Return to an address of the Honourable the House of Commons, dated 9 December 1852;-for, zCopies of all reports of the Commissioners in Lunacy, and the evidence presented by them last year to the Home Office as to the state and management of Bethlehem Hospital, and of all correspondence thereon:y zAnd, of the observations of the Governors of Bethlehem Hospital upon the report of the Commissioners in Lunacy to the Secretary of Statey.

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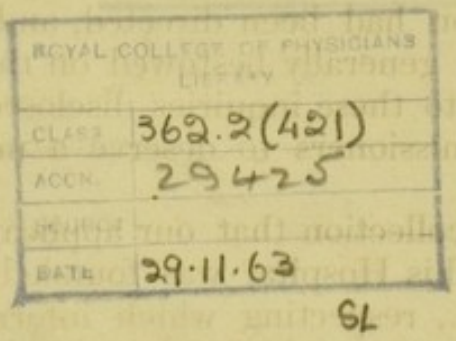
Report of the Commissioners in Lunacy to the Right Honourable Sir George Grey, Bart., M.P., &c. &c. &c. - - - p. 3

Minutes of Evidence taken before the Commissioners in Lunacy p. 33

Correspondence with the Home Office - - - - p. 249

Observations of the Governors of Bethlehem Hospital upon the Report of the Commissioners in Lunacy to the Secretary of State - - - - - - - - - - p. 249

Letter from Dr. Wood to the Right Honourable S. H. Walpole, M. P., &c. &c., enclosing Observations on the Management of Bethlehem Hospital, with reference to the Report of the Commissioners in Lunacy - - - - - - p. 387



REPORT of the COMMISSIONERS in LUNACY to the Right Honourable Sir *George Grey*, Bart., M.P., &c. &c. &c.; together with NOTES of the EVIDENCE, 1852.

REPORT on BETHLEHEM HOSPITAL.

To the Right Honourable Sir *George Grey*, Bart.,
&c. &c. &c.

SIR, February 7, 1852.

WE, the Commissioners in Lunacy, report that, by virtue of your order, dated 13th June 1851, authorizing two or more of us to visit Bethlehem Hospital, four members of this Board visited that Institution on the 28th day of June last, and saw all or the greater number of the patients resident therein, and made a general inspection of the wards, rooms, and exercise-grounds appropriated to their use.

Upon that occasion the Visiting Commissioners were accompanied by the Matron during their passage through the wards used by the female patients, and by the Resident Apothecary during their inspection of the entire establishment. After having visited the wards, and before leaving the Hospital, the Commissioners made various inquiries of the Resident Apothecary, of the Matron, of Dr. Monro, one of the Visiting Physicians of the Institution (who called at the Hospital during the Commissioners' visit), and of two of the nurses of the establishment, in reference to certain points to which their attention had been directed, and also as to the care and attention generally bestowed on the patients; and the answers given to these inquiries disclosed facts that appeared to the Commissioners to deserve a more minute scrutiny.

It will be in your recollection that our application to you for an order to visit this Hospital was founded mainly on the case of Miss A. M., respecting which information had been laid before us, together with certain matters of complaint, into the accuracy of which, as a Board superintending the

the general treatment of lunatic patients in England, we felt it to be our duty to inquire. Subsequently to the visit made on the 28th of June, it became known that an inquiry was pending before this Board into some matters connected with Bethlehem Hospital, and thereupon certain evidence was volunteered to be laid before us, which we did not think it right to reject; the more especially as it appeared to bear materially on the general object of our inquiry.

We, therefore, at different times, summoned before us and examined various witnesses, and required the production of several documents, tending to show not only the special treatment adopted in reference to particular patients, but also the character of the general arrangement and supervision of the Hospital in which the treatment of the cases brought especially under our cognizance was immediately or indirectly involved.

It is right to state that every facility was afforded by the Governors of Bethlehem Hospital to enable us to pursue our inquiries.

Before submitting the result of our inquiry, it will be convenient to advert to the leading characteristics of the Institution.*

The net income of the estates applicable to the purposes of the charity appears from the general account of 1850–51 to be 17,400 *l.* per annum, which is exclusive of about 3,000 *l.* per annum paid by Government for the maintenance and care of criminal patients; making a total income of about 20,400 *l.*

The Hospital is united with the Hospital of Bridewell, both of which, with their revenues, were granted to the Corporation of the City of London, and are now nominally under the general direction of a body of Governors, at present exceeding 300 in number. Out of this general body is elected a Managing Committee, consisting (besides the President and Treasurer) of forty-two Governors, and this committee subdivides itself into various sub-committees. Amongst others, a Sub-Committee of seven members is summoned by rotation to attend weekly at Bethlehem Hospital.

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* The foundation, constitution, and early history of Bethlehem Hospital are fully set forth in the elaborate Report of Mr. F. O. Martin.—*See* the 32nd Report of the Charity Commissioners, Part VI.

pital. This Sub-Committee, however, is open to the whole body of Governors.

It is customary for four, five, or six Governors to attend the Bethlehem Sub-Committee, the duties of which are to determine on the admission and discharge of patients; "to inspect those in the house;" to audit bills, &c., and for general purposes.

Sometimes, it is said, the Treasurer, who, in the absence of the President, is the standing chairman, is alone present, and constitutes in his own person this Sub-Committee. The Sub-Committee go through the wards of the Hospital once a month, but never at night.

The Sub-Committee report to the General Committee of forty-two Governors, who meet at Bridewell, and by whom the proceedings of the Sub-Committee are required to be confirmed.

The principal officers are the President, the Treasurer (who ranks next to the President), two Visiting Physicians, one Consulting Surgeon, the Resident Apothecary, a Steward, a Matron, and various subordinate officers.

The Treasurer is a responsible officer, to whom the execution of various important duties is committed. In consideration of his services to the Institution, and to the Bridewell Hospital, he has the free use of a furnished house at Bridewell, in which he resides. His powers appear to be very extensive. His duties, as stated by himself, are to superintend the affairs of the Hospital, "both as to its attendants and details." He has no power, however, he states, to interfere with the medical officers, or Matron, except as an individual member of the Board, or to rescind any of the existing rules. Nevertheless, he says, that in a case of emergency he takes upon himself to rescind a rule, reporting such interference on his part immediately to the Committee. On one occasion, indeed, he seems to have assigned to the Matron, in our opinion very injudiciously, the very important power of classifying, employing, and generally of managing and arranging the female patients, without reporting such alteration to the Committee, or obtaining their sanction thereto.

The Treasurer generally presides at the weekly meetings, when reports from the Steward and medical officer are submitted to the Board, and the Case-Book (so far only as relates to patients who are from time to time discharged) is laid before, and signed by him. The hiring and discharge of

attendants also rest with him. In the case of hiring male attendants and servants, he acts on the recommendation of the Resident Apothecary and Steward respectively, and in hiring female attendants, on the recommendation of the Matron. His power of dismissal appears to be absolute. The diet of the patients, together with much of the internal economy and comfort of the Institution, appears to be under his influence.

It does not appear that any periodical visits to the wards are comprehended in the list of the Treasurer's duties; but he does visit them about once a fortnight, and sometimes at uncertain times, but never at night.

Practically, the Treasurer is the principal authority at the Hospital, holding the position of a managing director, and the officers and others resident therein appear to be in a great measure under his control.

The visits of the Treasurer and other members of the Sub-Committee are for the most part made at times when the attendants may expect and be prepared for them; very rarely, if ever, at night, or after the patients are in bed; and their attention on such occasions appears in general to be principally directed to the state of the wards, in regard to cleanliness, ventilation, and warmth, and to seeing that the patients are tranquil and orderly, and the attendants are in their proper places.

It is to be regretted that the Visitors on these inspections are invariably accompanied by an attendant, so that the patients have no separate opportunities of making complaints; and further, that no detailed entry or report recording the fact of the visit, and the particular matters observed, as calling for reprehension, inquiry, or amendment, is made or preserved in a written form.

The internal good order of the establishment, however, and the general comfort and well-being of the patients, in ordinary circumstances, must depend mainly on the degree of vigilance with which the attendants are superintended in the performance of their daily duties by the resident officers of the Hospital.

The duties of the Visiting Physicians consist in each of them visiting the Hospital four days a week, one of these days being Friday, when the Sub-Committee assemble. Upon these visits, each physician generally sees the patients placed under his own care, or such of them as require medical

medical treatment, but not those under the care of his colleague.

The precise duration of these visits cannot easily be ascertained; the physicians themselves estimating that they respectively last two or three hours, and sometimes only one hour, whilst another estimate fixes them at about one hour each. They are evidently of no long duration, for we understand that the limited attendance of one of the Visiting Physicians has already been made the subject of complaint by one of the Governors of the institution.

On reference to the duties of the physicians, as set forth in the printed Rules and Orders, they appear to be (*inter alia*), to inform the Committee of any neglect or abuse, and to suggest reformation; to examine and prescribe for the patients; to visit every part of the Hospital, and to record their visits; and to sign the Case-Book, which (according to the Rules and Orders) is to contain the particulars of each case, as taken by the physician of the week, with an account of the remedies prescribed, and the result of such treatment.

How far the Visiting Physicians have made themselves acquainted with neglects and abuses, and have suggested remedies, we have no means of ascertaining, except in the several cases hereafter specially noticed. But it does not appear that they prescribe for all their patients, or that they visit all parts of the Hospital, or that they sign such Case-Books as are required to be kept by the Rules and Orders.

The Surgeon's duties are mainly to attend in those cases only where a patient has any disorder requiring his assistance, and to view the bodies of patients after death, and leave a statement respecting them with the Resident Apothecary. It does not appear that he is called on to attend patients in ordinary or simple surgical cases, which are left to the care of the Resident Apothecary.

The duties of the Resident Apothecary (amongst many other things) are: 1st, to enter in a register the particulars of each case as taken by the Physicians, with a weekly record of the bodily and mental health of every curable patient, and of any change from time to time in their condition, together with the effects of all medicines administered; 2d, to visit the patients and wards daily, and to keep a record of such visits, and to report to the Physicians any alteration which he may make in the treatment of patients; 3d, to make occasional visits to the wards after the patients are in their

sleeping-rooms, and to report such visits, with his observations thereon; and 4th, to regulate, in the absence of the Physicians, the classification, employment, amusements, and general management of the patients.

According to the accompanying evidence (of the Resident Apothecary), by far the greater portion of the medical treatment of the patients appears, in practice, to devolve upon him, and thus his own peculiar duties are neglected; for it is manifest from the whole of his testimony, that the medical and other registers and records of the Hospital, which form so very important a feature in this officer's duties, and which, if perfect, would afford such material evidence as to the actual care and treatment bestowed upon the patients whilst in the Hospital, are generally either very imperfectly kept, or totally neglected. His night visits to the wards appear to be rare, and his visits to the female wards are very rare; and his powers and duties of classification, &c., conferred on him by the Rules, have, so far as they relate to the females, been recently transferred to the Matron, by the verbal direction of the Treasurer.

It seems unnecessary for the purpose of this report to advert to the duties of the Steward, further than to state, that besides having the care of the stores, &c., he formerly had the control over the male attendants, who are now, however, properly placed, by some verbal regulation of the Treasurer, under the management of the resident medical officer.

In regard to the Matron, she, according to the Rules and Orders, is directed (amongst other things) to keep a record of all instances of restraint for the inspection of the medical officers, and also "to see that the linen and sheets of the patients are regularly changed as they ought to be," and to take an account of the linen, and to see that it is returned and properly washed. These are amongst the duties entrusted to her, in addition to the power of classifying and employing the female patients, lately transferred to her by the Treasurer, as already referred to, and which she now exercises quite independently of the medical officers of the institution. It is also, according to her statement, a part of her duty to look to the personal comforts of the patients.

Although the Matron makes daily visits to the female wards, and keeps written notes of anything particular that she may observe therein, she makes no report to any medical

or

or other officer on the subject; it not being, she says, part of her duty to do so. Either from some misapprehension on her part, or from some alteration in the Rules, of which we are not cognizant, she does not make any report on the subject of restraint; that report being now made by the nurses directly to the Resident Apothecary. Adverting to her duties to see that the linen of the patients is properly changed, washed, and returned, and that it is her duty to look to the personal comforts of the patients, it might be inferred that the fact of as many as fifteen female patients sleeping naked in the basement-ward must have become known to her; but this she assures us was not the case—a fact that can only be attributable to her imperfect and not very frequent visits to this part of the Hospital, and to the fact of her never seeing these patients after their being placed in their beds at night.

We have only further to remark, that the jurisdiction of the Matron ought never to be allowed to interfere with, much less to supersede, the authority of the medical officer in anything that relates to the management, classification, or employment of the patients, whether male or female.

The attendants at Bethlehem to whom the more immediate charge of the patients is committed are sufficient in point of numbers, but the supervision exercised over them is evidently lax and superficial; and we can perceive that this laxity has produced its natural effect, by introducing among them a corresponding laxity of discipline.

Amongst other things, there is much reason to fear that practices have prevailed in some of the wards which indicate the existence of great harshness and violence on the part of some of the attendants, and are in themselves utterly unjustifiable. We allude more particularly to the practice alleged to have been resorted to of laying down the females, who were dirty, on the stone floor of the gallery, naked, and washing their persons with cold water and a mop; to the brutal means which are said to have been sometimes employed for controlling and overpowering refractory patients; and to the violent and offensive mode in which food appears to have been forced upon some of those who obstinately refused to take it voluntarily.

To what extent these abuses may have prevailed in the Hospital in former times can now be only matter of conjecture; but the fact of their having existed, and that at no remote period, seems sufficiently clear.

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The patients of the Hospital are distinguished into three classes, viz., those on the curable, those on the incurable, and those on the criminal lists respectively, of which the first is the most numerous and important.

In order to be admissible on the curable list, the Rules of the Hospital require that the attack of insanity shall not have been of more than twelve months' duration, and shall not be complicated with "paralysis, epilepsy, or any other disease of such a kind as to require the attendance of a nurse, or to threaten the speedy dissolution of life." In practice,* if any such disease supervenes during residence in the Hospital, the patient is sent away uncured, and in any event, whether recovered or not, he is discharged at the end of a twelvemonth, except in certain cases in which a few months' extension of the term of residence for the benefit of further treatment is allowed.

The cases on the curable list may, therefore, be described as picked cases; that is to say, cases in which the mental disorder is of recent origin, and not combined with serious bodily illness, and presents the fairest prospect of recovery.

The average number of patients on the curable list at any one time is about 210;† the average number admitted in the course of the year is about 315. In the course of the last year, no fewer than 344 of such cases were received.

The patients on the incurable list consist of persons who have been formerly on the curable list, and have been discharged not cured.

These patients (who are not subject to the rules affecting the selection, discharge, and removal of curable patients) remain, with very rare exceptions, in the Hospital during their lives.‡ The average number on the incurable list may be taken at rather less than 80.§ The number admitted in the course of a year is on the average not more than 2.

The

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* *See* Dr. Wood's evidence.

† These numbers are on an average of the five years ending December 31, 1850.

‡ During the five years ending in December 1850, indeed, two instances only have occurred of patients on that list being discharged or removed (both in 1847), one of whom is stated to have been cured, and the other convalescent.

§ These numbers are given on the average of the same five years.

The daily number of patients on the criminal list amounts on an average to little more than 100. The number admitted in the course of the year is on the average about 21. They are placed in a separate ward, and never mix with the other patients. They stand also on a totally different footing in regard to their admission and discharge, a matter which, in their case, is under the control of the Home Office; and as their wards constitute an entirely distinct department, the cost of which is defrayed by the Government, it cannot be regarded as a part of the charitable foundation of the Hospital.

The total number of cases daily under treatment, upon the average of the five years ending the 31st December 1850, was 396, of whom 210 were on the curable, 80 on the incurable, and 106 on the criminal list.

The number of new cases annually admitted according to the same average was 367, of whom 316 were on the curable, 2 only on the incurable, and 21 on the criminal list. The total number of cases treated in the Hospital in the course of the same five years was 1,783 on the curable, 99 on the incurable, and 203 on the criminal list; giving an aggregate of not less than 2,085 separate cases under treatment on the three lists during that period. The number of patients of all classes under treatment in the course of the year 1850 was 770.*

With regard to classification, the patients of each sex, exclusive of the criminals, are, according to the General Rules, directed to be distributed into five classes, and are placed in corresponding wards. The first class comprising dirty and refractory patients; the second, patients newly admitted, and who are in a state of probation; the third and fourth, patients in different stages of convalescence; and the fifth, incurable patients.

This mode of distribution is in the main carried out in practice. The refractory and dirty patients occupy what is termed No. 1, or the refractory ward, which is situated in the basement, and the part of it forming the back basement (which appears by the plan to contain sixteen single bedrooms)

* These figures are extracted from the valuable tables which are appended to the annual Reports for the respective years. These tables were originally prepared by Dr. John Webster, one of the Governors, and appear to be drawn up with great care and exactness.

bedrooms) is appropriated to the worst cases. The incurables have not only a separate ward, but separate airing grounds also, and they do not, it is believed, intermix much with the other classes of patients.

From the foregoing details it will be evident that Bethlehem (in this respect differing from most of the other great public institutions for the insane in England) is pre-eminently and essentially an hospital for the *treatment and cure* of insanity,—a fact which it will be material to bear in mind when the arrangements for supplying medical care and treatment to the patients are considered. It is to be observed also, that the patients on the charitable foundation, although necessarily persons in straitened circumstances, are for the most part taken from the middle and educated classes; that comparatively few of them have earned their livelihood by manual or daily labour; that none of them belong to the pauper class; and that from their previous habits and position in life, the great majority of them have been accustomed to observe the proprieties, and are fully capable of appreciating the comforts, of civilized society.*

Although, of late years, improvements have been introduced in the Hospital, similar to those which for some time past have been in progress in other public lunatic asylums, the institution is still manifestly defective in many respects; one of the most striking defects being the inadequacy of the provision for the care and treatment of patients suffering under bodily diseases or infirmity.

The Hospital at present possesses no sick-ward or infirmary. It has not the usual conveniences and appliances for sick or infirm patients, nor experienced nurses accustomed to the management of the sick.

It was stated by Dr. Wood, the Resident Apothecary, that occasionally when an epidemic broke out, he had placed those whom it attacked in a separate room, as far as possible removed from the main body of the inmates. But there is not, and there never has been, any systematic appropriation of apartments fitted up for the sick or infirm.

Amongst

* The tables annexed to the annual Report show that upwards of five-sixths of the patients had received a superior, good, or moderately good education. This is, of course, exclusive of the criminal ward.

Amongst the extensive additions to the building which were commenced so long ago as the year 1838, a distinct "infirmary or sick-ward for each sex, with nurses' rooms attached," formed part of the plan publicly announced, although (for what reason does not appear) this has not, up to the present time, been carried out. The desirableness of such a provision is generally admitted by the medical officers.

It is suggested, indeed, by one of them, that as persons who, in the language of the Rule, are "so sick as to require the attendance of nurses," as well as those who after admission fall into such a state, are thereupon rejected or discharged, as the case may be, the existence of a separate sick-ward or infirmary is of comparatively little moment.

We cannot admit the force of this argument. It has no application to the patients on the incurable and criminal lists, who constitute together about two-fifths of the entire number under treatment.

Patients once placed on the incurable list, almost invariably remain in the Hospital for the rest of their lives; and all, or nearly all of them, must in the ordinary course eventually die there. Not a few are persons advanced in years; and many become subject to and die under lingering and painful bodily diseases; and among the more frequent causes assigned for these deaths, various maladies are specified, in which the most careful medical treatment and most sedulous nursing in a sick-room would be peculiarly required. The same reasoning would apply in a considerable degree to the patients on the criminal list.

But even as regards the patients on the curable list, the argument will be found to have no real weight when the facts are thoroughly examined.

It is to be observed that the Rules regulating the admission and discharge of patients on that list have never been construed so stringently as to preclude the admission or retention of many insane persons, whose general health is bad.

The almost total absence of medical records renders it extremely difficult to ascertain the precise number of curable patients under medical treatment at any particular time; but enough may be collected from the annual reports to prove that there is always in Bethlehem a large number of curable patients,

patients, who are in a bad state of bodily health, and who, therefore, require the best medical care and treatment. Of those who are admitted on the curable list, and are subsequently discharged uncured, after having remained the full period, about one-sixth appear to be in bad bodily health on admission,* and it would not be unfair to assume that of those who are discharged *cured* from that list, the like proportion were on admission in a similar condition.† At any rate, there is a legitimate presumption that nearly all the curable patients who are prematurely sent away as disqualified, or by request (amounting on an average to about 40 in a year) had fallen into bad bodily health prior to their discharge. Of course, until that condition becomes confirmed and arrangements are made for their safe removal, they necessarily remain in the Hospital, and during the intermediate time demand the best medical treatment and nursing. This was remarkably exemplified in the cases of the two female patients, A. M. and H. H., the circumstances of which will be hereafter fully detailed.

Another observation closely bearing on the same point is, that the bedding provided for the patients in the back basements, where such of the refractory patients as are wet or dirty sleep, is open to serious objection, and that the state in which the females of that class are placed in bed, is not merely most objectionable, but most discreditable. The bedding in that part of the ward for the most part consists of loose straw placed in a crib or trough-bedstead, and covered with a blanket, and upon this the patient is laid in a state of complete nudity. This practice, which has prevailed for years, has gone on without challenge from, and even (as is stated) without the knowledge of, the Treasurer, the Physicians, the Resident Apothecary, the Matron, or any other of the responsible authorities of the institution. The existence of such a state of things, while it discloses a most reprehensible practice, at the same time proves that most culpable laxity must have prevailed in the internal supervision of the Hospital.

In discussing the circumstances which render the fitting up of an infirmary so desirable, we have already in a great measure

* This is on the average of the five years ending December 31, 1850.

† This is confirmed by the tables appended to the Reports, which show that of those on the curable list discharged "cured," nearly that proportion was in bad bodily health at the date of the attack.

measure anticipated the reasons why it is indispensable to the efficiency of the institution that it should constantly command the services of a well-organized and efficient medical staff.

These reasons are mainly grounded on the peculiar character of Bethlehem as an hospital for the *treatment and cure* (as distinguished from the mere care) of the insane; on the great number of persons who are annually admitted to its benefits; and on the unusually large proportion received in it of cases in which active and judicious treatment (including under the term all remedial means, whether medical or moral) is likely to be useful.

When to the medical and moral treatment of the patients are added the multifarious duties comprised under the terms "general management and superintendence,"—duties which have been found by experience to be in general most conveniently attached to the office of the resident medical officer,—it will readily be conceded that in an hospital of the size and character of Bethlehem, those labours are far too onerous to be adequately performed by a single individual. In point of fact, nearly the whole of the treatment (medical as well as moral), and much of the business of general supervision, are at present thrown upon Dr. Wood, who, as he candidly admits, has not been equal to the burthen; and the services of the Visiting Physicians (which apparently are almost entirely confined to examining the patients before admission and discharge, and to occasionally prescribing for them in cases of severe illness) occupy but a small portion of their time, and have not been always regularly or assiduously rendered. The result has been, that the care of the patients is left far too much to the uncontrolled discretion of the attendants; that the keeping of the Case-Book is in a great measure neglected; that scarcely anything is known (or can now be ascertained from the records) respecting the past condition or treatment of patients who have left the Hospital; and that various complaints have from time to time been made, the justice of which it is now extremely difficult to estimate, but which the evidence certainly bears out to some extent, of supineness and negligence on the part of the medical officers.

The apology urged by the Resident Apothecary in substance is, that an excessive amount of work has been thrown upon him, far beyond what he can satisfactorily accomplish; and it is impossible to deny that there is some force in the plea.

The

The proper discharge of such duties would, we conceive, furnish ample employment for at least two resident medical officers. The principal medical officer, in his capacity of general superintendent, should be invested with paramount authority within the Hospital, and be responsible for the whole of its internal management; and to him the rest of the Medical Staff, the Matron and the inferior officers and attendants, should all be subordinate. He might also be empowered, under the sanction and regulation of the Sub-Committee, to call in certain other eminent medical practitioners, in cases of difficulty or emergency.*

The existing plan of having Visiting Physicians, between whom the medical care of the patients is now nominally divided, in our opinion encourages carelessness and destroys responsibility. Having regard to the amount of the salaries now paid to the medical staff, the scheme here suggested does not appear to be open to objection on the ground of its involving much additional expense.

By one of the printed Rules† of the Hospital, it is provided that the Resident Apothecary shall keep a register, in which he shall enter the particulars of each case, as taken by the physicians, on admission of patients, with a weekly record (subject to the revision of the physicians) of the bodily and mental health of every curable patient, and of any change in their condition which may from time to time occur, together with the effects of all medicines administered, and an account of all surgical operations whatever; and shall record every change in the bodily or mental health of any incurable or criminal patients with the like precision; which register is to be signed, on the discharge or death of the patient, by the physician under whose care the patient has been placed.

Notwithstanding the explicit terms of this judicious regulation, it has not been enforced or attended to in practice. At

* On reference to the evidence, it will be found to be the opinion of several persons connected with the institution, and amongst others of the Treasurer, of the Resident Apothecary, of two of the Governors, and of one of the Visiting Physicians himself, that there should be another medical officer resident in the Hospital. It is the opinion of two of these gentlemen, that in the event of another resident medical officer being appointed, such officer should be subject to no authority, except that of the Managing Committee, or Sub-Committee, and that there should be imposed upon him the entire responsibility of the medical treatment of the patients.

† Rule 7, Physicians. Rule 6, Apothecaries; pp. 109, 112; edition 1847.

At present the Case-Book contains, with scarcely any exceptions, merely a brief summary of the condition of the patient at the respective periods of admission and discharge, without noticing any further particulars of the case, either as to its characteristic symptoms, or as to its subsequent phenomena and progress, so that it affords little or no really useful information.* We could not learn that the defective character of the Case-Book, and the neglect of the Rule in this respect, had ever been brought to the attention of the Treasurer or Sub-Committee, by either of the Visiting Physicians, although the weekly record which it is directed to contain is declared by the same rule to be "subject to their revision."

The general superintendence of the Hospital is carried on, as already stated, under the control of the Treasurer and Sub-Committee, and the more immediate conduct of its internal economy and discipline is confided to the Resident Apothecary, the Steward, and Matron, under whose supervision the care of the patients in their respective wards is entrusted to attendants of both sexes.

For the instruction and guidance of these various functionaries, a body of printed Rules and Orders was some years ago issued, in which their several departments are to some extent defined, and their special duties prescribed.†

Many of these rules and orders, however, have never been enforced, and have been allowed to become obsolete; others are ambiguous in their terms; others again, having been found inconvenient, have been altered or rescinded, and new rules substituted in their place; and a considerable number of additional regulations and usages, more or less important, and some of them materially modifying the previously existing practice, have also been introduced at various times (occasionally on the sole authority of the Treasurer), and have acquired the force of Rules and Orders, although they have not been reduced to writing, and have never formally received the sanction of the governing body. The consequence, as

* In all registered hospitals and licensed houses subject to the regulations of the Act 8 & 9 Vict., cap. 100, medical Case-Books are regularly kept, pursuant to the 60th section of the statute. Bethlehem Hospital, which is specially exempted from the operation of this Act, forms an exception to the practice.

† So far as relates to the inferior officers, attendants, nurses, and servants, the old Rules were rescinded and superseded, and a new and improved set of Regulations were printed and placed in their hands in the course of last spring.

as might be expected, is, that what purports to be now the Code of Rules and Orders according to which the Hospital is governed, is extremely loose and imperfect; that various important points are uncertain or unprovided for; and that its precise bearing and effect are not thoroughly understood even by those whose conduct it is intended to regulate.

It is not necessary to go through these defects in detail; but among the most important may be mentioned that the existing Rules do not secure any system of careful inspection at irregular and uncertain intervals by the governing body or any of its members; that they vest (we think most injudiciously) in the Matron the duty of classifying and employing the female patients, and determining in what wards they shall from time to time be placed, according to her sole discretion, and to the practical exclusion of all medical authority;* and further, that they leave it uncertain on whom is now primarily imposed (whether the Steward or the Resident Apothecary) the responsibility of seeing to the sufficiency of the bedding and clothing of the patients. On the whole we feel ourselves warranted in saying, that in their present very anomalous and imperfect state, these Rules and Orders tend to produce confusion and mistakes; and that they are unfavourable to that cordial union and co-operation among the different officers of the establishment which are indispensable to the successful working of the institution.

Upon these grounds we are of opinion that the whole of the Rules and Orders, written and unwritten, according to which Bethlehem is now professedly managed, ought to be carefully revised, and that they should then be issued in a complete form, and be thereafter rigidly enforced.

We now proceed to state the general result of the testimony of the several witnesses who were examined by us in reference to the subjects of our inquiry. The evidence was received

* By the printed Rules, this duty belonged to the Resident Medical Officer, from whom the Treasurer, about a year ago, transferred it, by a mere verbal direction, to the Matron. The alteration appears to have been made without consulting any of the medical officers, and without being submitted to the Committee for their sanction. (See the evidence of the Treasurer, and also that of the Visiting Physicians, both of whom state their disapproval of the new rule.)

received by us on nine different days, namely, on the 7th, 10th, 17th, and 24th of July, the 14th August, the 8th and 22d October, the 18th November, and the 4th December, 1851 ; the investigation having been extended and prolonged on account of fresh evidence having been from time to time tendered for our consideration, and by the fact that the testimony given upon one or more occasions rendered it expedient to pursue further some particular branch of the inquiry.

The witnesses who were examined were twenty-seven in number. Their names are as follows, viz. :

1.	John Edward Johnson, Esq.	Treasurer of Bethlehem Hospital.
2.	Dr. William Wood - -	Resident Apothecary of ditto.
3.	Henrietta Hunter - -	Matron of ditto.
4.	Sarah Burrowes - -	Nurses in Bethlehem Hospital.
5.	Elizabeth Cliffin - -	
6.	Keziah Sanderson - -	
7.	Dr. Edwd. Thomas Monro -	Visiting Physicians of ditto.
8.	Sir Alexander Morison -	
9.	Peter Northall Laurie, Esq.	A Governor of ditto.
10.	Mr. Thomas Joseph H. -	Father of Miss H. H., lately a patient in ditto (dead).
11.	Mrs. Elinor W. - -	Lately a patient in ditto.
12.	Mr. Charles Taylor - -	Surgeon.
13.	Mrs. Elizabeth W. - -	Mother of Mary Isabella W., lately a patient in Bethlehem Hospital.
14.	Mr. John Ogle Else - -	Surgeon.
15.	Dr. P. R. Nesbitt - -	Medical Superintendent of the Northampton Lunatic Asylum.
16.	Dr. John Webster - -	A Governor of Bethlehem Hospital.
17.	Mr. Nathaniel Nicholls -	Steward of ditto.
18.	T. S. Capel, Esq. - -	A Governor of ditto.
19.	Miss Mary Isabella W. -	Lately a patient in ditto.
20.	Wm. Marson - - -	Lately an attendant in ditto.
21.	John Welsh - - -	Ditto.
22.	Samuel H. - - -	Brother of Mr. H., lately a male patient in Bethlehem Hospital (dead).
23.	Andrew Wentzell - -	Friend of ditto.
24.	William Beech - -	Lately an attendant in the Hospital.
25.	David Kidd - - -	An attendant in ditto.
26.	Miss A. M. - - -	Lately a patient in the Hospital.*
27.	Miss F. M. - - -	Sister of ditto.

Copies

* Miss A. M. and Miss F. M. were examined in the country by two members of this Board.

Copies of the short-hand writer's notes of the evidence given by the witnesses examined before our Board, and of the notes of the evidence given by the two witnesses examined in the country, accompany this Report.

This evidence appears mainly to embrace the following subjects, viz. :

1. Miss A. M.'s case.
2. Miss H. H.'s case.
3. The cases of Mrs. Elinor W., Miss Mary Isabella W., and Mr. H.
4. The general government and management of the Hospital.

Case of Miss A. M.

We shall, in the first instance, draw your attention to the case of Miss A. M. (lately a patient in Bethlehem Hospital), requesting at the same time a reference to the evidence itself, whenever our summary or statement of facts shall appear to require explanation.

It appears by the evidence laid before us, that Miss A. M. was admitted as a patient into Bethlehem Hospital on Sunday the 6th October 1850, and that she remained there till the 27th of the following December (a period of eleven weeks and five days), when she was discharged.

Miss M. F. (the patient's sister) states, that A.M., at the time of her admission, was in weak bodily health, and had for some days refused her food; that she (M. F.) visited her on the Friday after her admission (October 11), and again on the 4th of November. That on the first visit, she perceived that A. M. had a black eye; that on the second visit she found that her sister had been removed from an upper story into the basement-ward of the Hospital, which, it appears, is the ward specially appropriated to dirty and refractory patients. That at this time A. M. complained of excessive cold, of having no sheets or blankets, and of sleeping on loose straw; and also of the coarse, violent, and abusive conduct of the nurses under whom she was placed. Subsequently Miss F. M. understood from one of the nurses that A. M. had become "a dirty patient."

In consequence of A. M. complaining repeatedly of cold, her sister, on one occasion, took a warm jacket to the Hospital for her; but the Matron said that the patient "could not be allowed to wear it, as it was too smart."

Miss M. F. again visited her sister on the 3rd December, when she found her in a most feeble and emaciated state, complaining

complaining still of cold and of want of bed-covering; and also of a disorder in her bowels; and ultimately, in consequence of her sister's complaints of ill-treatment, and of her general personal appearance, Miss F. M. decided upon removing her, and, in fact, did remove her from the Hospital on the 27th December. It appears that A. M., during almost the whole of her residence in the Hospital, remained in the basement-ward.

The account given by Miss F. M. is corroborated by the patient's own evidence, taken on oath after she was perfectly recovered (both mentally and bodily), and when she had returned to her friends. From this it appears that she had always insufficient bedding during her residence in the basement-ward of the Hospital, and sometimes none at all, under her person, except the straw, under which she crept for the sake of warmth. She had no night-clothing, but always slept quite naked, and suffered from cold, both night and day. She sometimes felt very ill, but her treatment by the nurses was very rough, and their conduct towards her was rude and coarse. She was covered, she says, at this time with sores, which she attributes to the kind of bed on which she lay.

According to the testimony of the Resident Apothecary and Matron of Bethlehem Hospital, and of the nurse who had the care of this patient in that establishment, it appears that at the time of Miss A. M.'s admission into the Hospital, her person was examined, according to custom, by one of the nurses there. At this time, according to every statement, there were "no bruises, wounds, or sores" on her body; and it is stated she was in moderate (but it is said below average) health. She was placed, in the first instance, in the receiving-ward, but was removed in about a fortnight (on the plea of her being a dirty patient) to the basement-ward of the Hospital. This was done by the sole direction of the Matron, who, it appears, has the power of removing and classifying the female patients, without the intervention of any of the medical officers.

During her residence in the basement, the Matron and Resident Apothecary were respectively informed that there were marks on the patient's body, and that she had a bodily complaint, requiring great care and attention, and swollen legs; and it appears that being in a low state of health, she was put upon sick diet; but neither the Matron nor the Resident Apothecary seems to have particularly in-

spected her bodily condition, or to have examined the sores on her person; nor did either of them see her in bed, or know that she was put to bed naked upon loose straw.

During her residence in the Hospital, it appears that she got into bad health and suffered under some bodily complaint, and that she was treated medically by the Resident Apothecary, and also by Dr. Monro, but unfortunately no record of any bodily disorder, or of any medical treatment to which she was subjected, is to be found in the Case-Book, beyond the general fact of her being placed upon "sick diet."

It is shown by the testimony of two of the nurses having the care of the basement-wards, that this patient and others on the basement floor (amounting together to about fifteen in number) were regularly put to bed entirely naked (without any linen or other covering on their persons), and that there was only a blanket interposed between them and the loose straw on which they slept, which blanket was sometimes removed by the patients in the course of the night. This usage does not appear to have been known either to the Resident Apothecary, or to the Matron, or to either of the Visiting Physicians, or, in fact, to anybody connected with the establishment, with the exception only of some of the nurses and of the patients themselves who were subjected to this unusual mode of treatment.

On Miss A. M. being removed, it is stated that she was examined by one of the nurses, and that her back was then "very red," supposed to be from her dirty habits, or perhaps "from the rubbing of the straw;" that her legs were swollen; and that she had punctured wounds and some few bruises on her person.

She was removed from the Hospital on the 27th December, and on the day of her removal her person was examined by her sister, who states that she found her back a mass of sores, with a large sore on each hip, her body emaciated, and her legs swollen, and it was also ascertained that she had a disorder in the bowels. Miss F. M. took her sister on the day of her removal to a house in Camberwell, and on the following morning took her to Northampton, for the purpose of placing her in the Asylum there. Previously to her departure for Northampton, however, she was examined by Mr. Else, a surgeon, who had before certified as to her state of mind on the occasion of her admission into Bethlehem Hospital.

Hospital. At that time Mr. Else says, Miss A. M.'s condition "was anything but good, but it was not so bad but that it might be amended."

On her leaving the Hospital, he states that it was so bad that "he doubted her living twenty-four hours," and he strongly advised that she should not venture to take the journey to Northampton. It is right to say that Mr. Else did not examine the body of Miss A. M. at this time, but he understood that she had sores on her person.

On the 29th December 1850, being the second day only after her removal from Bethlehem Hospital, Miss A. M. was received into the Northampton Asylum. The following statement of her condition at that time, and of the remedies used in her case, is given by Dr. Nesbitt, the medical superintendent of that establishment:

"Her state upon admission was most deplorable, with an attenuated frame; her system was so enfeebled that she was unable to sit up. She had prolapsus of the uterus and anus with great mucous discharges, and suffered severely from tenesmus. Her lower extremities were livid and œdematous, and their motion paralyzed. On the hips and nates were a great many abrasions of the surface, varying in size from a millet-seed to a split pea. She had also on different parts of her body copper-coloured eruptions; she was quite unconscious of the calls of nature, and her urine and fœces passed under her. The treatment pursued was in the first place to give her a comfortable bed and to attend to her infirmities by frequent changes of linen; morphia, the hydriodate of potass and the local applications of oak-bark decoction, with generous diet, enabled her to get up in the course of three weeks, and from that time to this, her course has been one of progressive improvement. She was always a quiet patient, and grateful for attention, and after one month's residence all her faulty habits entirely left her."

This statement was made in writing on the 11th May, 1851, in answer to our inquiries respecting the patient.

At this time Dr. Nesbitt says, "Miss A. M.'s mental state is that of rationality, propriety, and decorum, and her bodily health is completely re-established. Her continuance here is more a matter of prudence and convenience than of necessity."

In a subsequent statement made in writing on the 14th of May, and being also in reply to some further questions proposed by this Board, Dr. Nesbitt says, that he has no longer any hesitation in giving his opinion, that the sores and abrasions on Miss A. M.'s body were referable to neglect; and he expresses his opinion that the straw would produce such irritations on the surface of her body, in connexion with her want of cleanliness. He observes that she had never evinced any propensity to pick her skin since she had been under his care.

In this statement Dr. Nesbitt further says, that Miss A. M. had uniformly complained of having nothing but straw to sleep on, "without any kind of protection between her body and the straw;" of having had no clothes to cover her; and of the whole treatment exercised towards her in Bethlehem Hospital having been harsh and coarse; and adds that this patient was remarkable for truthfulness, and was desirous of burying in oblivion that part of her life spent in the Hospital.

Both these written statements of Dr. Nesbitt were afterwards verified by oath.

On a subsequent occasion Dr. Nesbitt states, in his evidence before us, that at the time of this patient's admission into the Northampton Hospital, "her hair was very much matted and entangled, and there was a great number of vermin in her head;" and he adds that, in his opinion, the vermin and the sores were evidences of previous neglect, and that the sores appeared to be the result of her having lain upon straw.

Dr. Nesbitt's account of Miss A. M.'s rapid amendment under the mode of treatment pursued in the Northampton Asylum, is confirmed by the evidence of her sister who visited her there. "A fortnight after her admission into the Northampton Asylum," Miss F. M. says that she "found her sister greatly improved in health, her habits of cleanliness returned, and her mind also greatly improved."

The result of the evidence as to this case appears to be—

1st. That this patient (A. M.) was admitted into Bethlehem Hospital in moderate or weak health, but without any bruises, wounds, or sores on her person. That after remaining there nearly three months she left the establishment in no respect apparently improved in mind; emaciated in

in person; in deplorable health; covered with sores or abrasions; with bad habits; suffering under more than one bodily disorder, and with her head full of vermin.

2d. That on her removal to the Northampton Asylum, by affording her certain personal comforts, by generous diet, and by judicious medical and other treatment, she began almost immediately to improve; that in a fortnight she was manifestly better in every respect; that in a month her faulty habits entirely left her; that in rather more than four months her mental and bodily health were completely re-established; and that at the expiration of between five and six months she was discharged from the Northampton Asylum, and restored to her friends, perfectly well in all respects.

3rd. That during her residence in Bethlehem Hospital (besides acquiring the bad habits and bodily disorders above adverted to) she suffered almost continually from cold and insufficient bedding. That she was subjected to rough usage from the nurses. That notwithstanding the cold, she was allowed no night-clothing for her person, but slept naked on loose straw, which punctured her body, and produced sores. That neither the Resident Apothecary nor Matron, nor the Visiting Physician, whose patient she was, ever examined her person or saw her in bed. That the fact of her (and others) sleeping without night-clothing on loose straw, was (as is stated) altogether unknown to the Matron, and to all the medical officers and other authorities of the Hospital; and that although she was bad in health, and was under medical treatment by Dr. Monro and the Resident Apothecary, there is no record thereof in the Case-Book of the Hospital.

Case of Miss H. H.

Another patient, to whose case our attention has been particularly called, is that of Miss H. H. This lady appears to have been admitted into Bethlehem Hospital on the 4th of April last, to have been discharged on the 18th of the same month (after a residence therein of fourteen days only), and to have died in three days after her discharge.

At the time of her admission, it is stated by the medical practitioner who had previously attended her, that her limbs were firm, and that although thin, she had the average amount of flesh and strength for an invalid; but she occasionally refused her food, had two or three times been subjected to mechanical restraint, and for two days previously to her admission had fallen into dirty habits. Her father

also

also states, that on her admission her health was "pretty good," and that she was gaining flesh. In contradiction to this, the Matron states that she was emaciated at this time, but she never personally examined her; and the Resident Apothecary says that she was "very emaciated;" but his Case-Book does not set forth the fact. Sir Alexander Morison states that she was "very weak and thin."

About eight days after her admission, the patient's father states that he went to the Hospital to inquire after her, and learned from Dr. Wood, the Resident Apothecary, and from one of the nurses, that his daughter (whom he did not then see) was somewhat improved, and that she took her food better.

About five or six days afterwards, feeling anxious about her, he wrote to Dr. Wood, begging, as he had been told that he could not be allowed to see his daughter for a month after her admission, to be informed should any bad symptoms arise. This letter was left at the Hospital early in the morning of Friday the 18th April; at about half-past two o'clock on the same day he received an answer from Dr. Wood, informing him that his daughter was in a very precarious state; that it had been thought proper to discharge her, and that there was every reason to anticipate a fatal termination to her illness. She was accordingly discharged on the same day, and was removed by her father direct to his own house.

On her discharge her condition, according to her father's account, was exceedingly changed for the worse, and according to the statement of his medical attendant, Mr. Taylor, "her appearance was much altered, being very emaciated, her bones almost protruding through her skin, and on her body were various wounds and bruises."

On the 21st April, three days after her discharge from the Hospital, she died. On the day following her death, in consequence of some complaints made by the father, her person was inspected by Mr. Lawrence and Sir Alexander Morison (two of the medical officers of Bethlehem Hospital), and a *post mortem* examination was afterwards made by two surgeons, who, together with Dr. Wood, who came in before the examination was completed, signed a medical certificate, stating "that there was no evidence to show that she had sustained any injury which could in any way have hastened her death."

During

During H. H.'s residence in Bethlehem Hospital it appears that she and other female patients, fifteen in number, were regularly placed to sleep on loose straw, a blanket only being interposed between their bodies and the straw, and that they slept entirely naked, *i. e.*, without any linen or other covering on the body. That parts of H. H.'s person were very red on her admission, and that on her discharge there were various sores or punctures on her body, which seemed evidently to have been caused by the straw of her bed, into the midst of which she was in the habit of creeping.

It is stated that she was exceedingly feeble while in Bethlehem Hospital; that she had no sofa or easy chair, such as is used for infirm patients to sit on during the day; that she was in the habit of crawling on her hands and knees on the floors of the Institution; and that after her death, wounds or abrasions were found on her knees and elbows.

During her residence in the Hospital, H. H. was never seen in bed by the Matron, or by the Resident Apothecary, or by Sir Alexander Morison, whose patient she was. It is stated that none of them knew that she slept naked on loose straw, a practice which Sir Alexander Morison condemns altogether, considering that such bedding was particularly unfit for a weak or excoriating patient, such as H. H. in fact was. It is stated by Sir Alexander Morison that he prescribed for her, and that she had sick diet. There is no record in the Case-Book of any medical treatment, with the single exception of an enema, which was given to the patient on the appearance of diarrhœa, on the day immediately preceding her discharge.

After her discharge, H. H. (who appears then to have partially recovered her intellect) complained that bad language had been used towards her whilst she was in the Hospital, and that she had been beaten. The medical attendant of the family is of opinion that she was ill-treated or harshly used there, and the patient's assertion as to the use of bad language and very rough treatment is corroborated by the evidence of Mrs. Elinor W., who was at that time a patient in the same ward with H. H., but who was afterwards discharged recovered.

In consequence of some complaints made by the father of this patient as to his daughter's treatment whilst in the Hospital, an inquiry into the case was instituted before a Committee of Governors, and some evidence was produced thereon,

thereon, but the investigation (owing to the father not prosecuting the inquiry further) was not completed. The Governors have not, it is said, signified otherwise than that they were satisfied with the facts that came out in the course of the investigation; the result, nevertheless, of which seems to be, that a special order was issued by them that "every injury (however slight) and every bruise and accident should for the future be immediately reported."

The general mode of treating this patient whilst in Bethlehem Hospital will sufficiently appear from the foregoing summary of her case.

There is so much conflict, however, between the statements made by the several witnesses as to her condition on admission into the Hospital, and on her discharge, and also as to the origin and character of the various wounds and abrasions on her body, that we think it better to refer to the accompanying evidence for information on these points. To this evidence we must also refer for an account of the singular circumstances under which the medical certificate, drawn out after the *post mortem* examination took place, appears to have been framed and signed.

The other cases upon which evidence was volunteered before us were those of persons who had been patients in the Hospital; namely, Mrs. Elinor W. and Miss Mary Isabella W., female patients who had been discharged, and who are still alive; and Mr. H., a male patient, who died almost immediately after his discharge.

Case of Mrs. Elinor W.

The testimony of Mrs. Elinor W. relates in a great measure to the case of H. H., already detailed. It corroborates, however, also the statements made by other persons respecting the bedding and general accommodation of female patients in the basement-ward; the coarse manners of the nurses in that ward; their extremely rough usage of their patients, and the great want of regular supervision and inspection in that part of the establishment. It is right to state that the evidence of Elinor W. was taken some months after she had been discharged recovered, and that at that time she appeared to be perfectly well, and to be a trustworthy witness.

Case of Mary Isabella W.

In the case of Miss Mary Isabella W., the testimony of her mother (Mrs. Elizabeth W.) shows that this patient had various bruises on her person during her residence in the Hospital;

Hospital; that whilst there she complained of ill-treatment, and coarse conduct on the part of the nurses; and that she slept naked on loose straw, in the same manner as is set forth in the cases of A. M. and H. H. The truth of the mother's statement as to this patient's complaints of ill-usage, is strengthened by the evidence of Elinor W., to whom Mary Isabella W. made the same complaints whilst in the Hospital. And it is remarkable that both these last-named witnesses concur in stating that Mary Isabella W., whilst in the Hospital, expressed an intention of complaining to the Governors of the ill-treatment that she had been subjected to, and that she was dissuaded from, or counteracted in her intentions by the Matron.

On examining this patient herself, it must be observed that the answers given by her to our questions did not bear out the statements of her mother and of Elinor W. Mary Isabella W.'s recollection and general intellect were, however, in so feeble and imperfect a state at the time of her appearing before us, that we did not think it proper to question her to the extent we should have done, had she appeared more competent to give evidence on the subjects of our inquiry.

Case of Mr. H.

The tenor of the evidence given as to the male patient Mr. H., is to the effect that he was a patient in the Hospital for rather more than five weeks; that he was a strong muscular man, and free from bruises on his admission; that on his discharge he was exceedingly reduced in flesh, and had numerous bruises on his body, and that he complained (amongst other things) of ill-usage from the attendants, and particularly of his throat having been severely squeezed; a circumstance that was corroborated by the appearance of his throat on his discharge, and is also corroborated by the evidence of John Welsh, who was a keeper at the time of Mr. H.'s residence in the institution, but who has since been discharged. This last-named patient Mr. H. died within a few days after leaving the Hospital.

In

In concluding our Report, we think it desirable, in order to bring the main results of our inquiry more definitely and clearly under your notice, to state our opinion :—

1st. That Miss A. M., during her residence in Bethlehem Hospital, was subjected to harsh and improper usage from the attendants, and was neglected by the medical and other officers of the institution ; that the bedding, clothing, and accommodation afforded to her were unfit and insufficient, and that thereby her health was materially injured, and her life put in peril. (See summary of the evidence in this case, pp. 20 to 25, *ante.*)

2nd. That Miss H. H. during her residence in the Hospital was subjected to harsh and improper usage from the attendants, and was neglected by the medical and other officers of the Hospital, and that the bedding and other accommodation afforded to her were unfit and insufficient, and must, in our opinion, have materially injured her bodily health. (See summary of the evidence in this case, pp. 25 to 28, *ante.*)

3rd. That Mrs. Elinor W., Miss Mary Isabella W., and Mr. H., were respectively subjected to harsh and improper usage from the attendants of the Hospital, and that they were neglected therein.

4th. That the Sub-Committee, as at present constituted, is of too fluctuating and uncertain a character ; that the duties imposed on the members thereof are too much of a formal kind, and that their investigations into the well-being and comfort of the patients, and the practical working of the institution, are insufficient and are nowhere properly recorded.

5th. That the Treasurer has, without due authority, taken from the resident medical officer the duties of classifying the female patients, of regulating their employment, and determining in which wards they shall be

be placed, and has injudiciously invested the Matron with this power.

6th. That the duties of the Visiting Physicians are very imperfectly performed; that their visits to the Hospital are of too formal and superficial a character; that they never inspect the Hospital or visit their patients at night, and that their treatment of their respective patients is in a great measure left to the Resident Apothecary, whose own duties (if fully performed) are more than sufficient to occupy his time.

7th. That the duties of the Resident Apothecary are not fully performed; that his visits to the wards, his treatment of the patients, his supervision of the attendants, and his investigation into the patients' comforts, are imperfect and insufficient; that his medical records are much neglected, and that these neglects on his part are in some degree (but not altogether) owing to the duties of the Visiting Physicians having in a great measure fallen upon him.

8th. That the duties of the Matron are very much neglected, and that she has very improperly vested in her the power of classifying the female patients, of employing them, and of determining in which wards they shall be placed, without the sanction of any of the medical officers.

9th. That the Rules and Orders of the Hospital, as at present existing, are not well understood; that they tend to produce confusion and mistakes, and should be revised and amended.

10th. That the various Case-Books, and other records, which, by the general rules of the institution, are required to be kept, are for the most part either only partially kept, or are altogether neglected; and that it is most important that proper records should be kept for

for the purpose of ascertaining whether or not the patients of the Hospital have been fairly and judiciously treated during their residence therein.

11th. That the present Medical Staff is insufficient, and that any new arrangement thereof should comprehend the services of (at least) two resident medical officers, one of whom should have paramount authority in the Hospital, and should be responsible for the whole of the internal management thereof.

12th. That there are no Infirmaries, or proper accommodation for sick or infirm patients in the Hospital; and that the existing practices (which do not appear to be founded on any rule of the Hospital) of excluding the relatives and friends of patients from all access to the patients themselves for the space of one month after admission, and of sending away patients in cases where severe bodily illness supervenes upon their mental maladies, after admission into the Hospital, are objectionable, and should be reconsidered and modified.

Finally, We are of opinion that the management and condition of Bethlehem Hospital are in many material respects most unsatisfactory, both in reference to the purposes for which it was founded, and the very large funds by which it is maintained.

On behalf of the Board,

(signed) *Shaftesbury*, Chairman.

R. W. S. Lutwidge, Secretary.

Office of Commissioners in Lunacy.

MINUTES OF PROCEEDINGS.

LIST OF WITNESSES.

7 *July* 1851.

John Edward Johnson, Esq. - p. 35
Dr. William Wood - - p. 46
Mrs. Henrietta Hunter - - p. 67
Sarah Burrowes - - - p. 79
Elizabeth Cliffin - - - p. 81
Keziah Saunderson - - p. 86

10 *July* 1851.

Edward Thomas Monro, M.D. - p. 90
Sir Alexander Morison, M.D. - p. 102
Peter Northall Laurie, Esq. - p. 115
Mr. Thomas Joseph H. - - p. 121
Elinor W. - - - - p. 131

17 *July* 1851.

C. Taylor, Esq. - - - p. 138
Mrs. Elizabeth W. - - - p. 147

24 *July* 1851.

John Ogle Else, Esq. - - p. 153
P. R. Nesbitt, M.D. - - p. 156

14 *August* 1851.

John Webster, M.D., F.R.S., and FRC.P. - - - - p. 159
Mr. Nathaniel Nicholls - - p. 167

8 *October* 1851.

Thomas Spencer Capel, Esq. - p. 170
Mr. Nathaniel Nicholls - - p. 172

22 *October* 1851.

Mary Isabella W. - - - p. 182
William Marson - - - p. 184
Dr. William Wood - - - p. 200

18 *November* 1851.

John Welsh - - - - p. 221
Mr. Samuel H. - - - p. 228
Mr. Andrew Wentzell - - p. 231

4 *December* 1851.

William Beech - - - p. 233
Mr. David Kidd - - - p. 239

30 *July* 1851.

Examination of Miss A. M. - p. 246
Examination of Miss F. M. - p. 246

MINUTES of PROCEEDINGS taken at the Office of the COMMISSIONERS in LUNACY, 19, New-street, Spring Gardens.

7 July 1831.

THE EARL OF SHAFTESBURY IN THE CHAIR.

INQUIRY as to the MANAGEMENT and TREATMENT of PATIENTS.

John Edward Johnson, Esq., called in; and, having been sworn, was examined by the Commissioners as follows:

J. E. Johnson, Esq.

7 July 1851.

1. WHAT situation do you hold in Bethlehem Hospital?—I am Treasurer of the United Hospitals of Bridewell and Bethlehem.

2. What are your duties as treasurer?—To superintend the affairs of the hospital, both as to its attendants and the details of the hospital.

3. Have you any and what power to control or interfere with the conduct of any of the medical officers, or the matron?—None whatever, except as an individual member of the Board. If I perceive anything improper in the conduct of any one I should immediately report it to the committee, who would take the matter up.

4. But you have no power as treasurer?—As treasurer I have none; probably were I to suspend any one, the Board would consider it a judicial act, and the exercise of a proper power, presuming that I made out that it was a case to justify the suspension.

5. Have you any and what power to suspend or rescind any of the existing rules or regulations of the hospital, subject to the sanction of the Board of Governors, or otherwise?—Directly, I have no power to rescind any rules; at the same time, in a case of emergency, I take upon myself to do so; but I should report such immediately to the committee, who would doubtless approve of the case if they thought it sufficient to justify such a course.

6. Are you a resident at the hospital?—Not at Bethlehem Hospital, but at Bridewell Hospital.

7. Have you ever, on your own authority, given any orders or directions at variance with any of the then existing rules or regulations?—I cannot say distinctly that I have; probably I may; it may have been on some matters, but nothing occurs to my mind of my having done so.

8. Have you ever given any orders at variance with the practice previously in use in the hospital?—I do not know; there may have been something with regard, probably, to the mode of treatment, or the

J. E. Johnson, Esq.

7 July 1851.

supervision of female patients. I think I recollect, some time ago, that there was some misunderstanding between the matron and the resident medical officer as to the power that each had in controlling disputes that occasionally arose, and I think I suggested that the matron should take a little more to herself; that the medical man should not interfere so much as he had been doing. I believe that arrangement has been adopted between them since, and those misunderstandings have terminated.

9. How long have you held the office of treasurer?—A little more than three years.

10. How long ago was it that you gave that order?—It may have been two years ago; some time after I had been appointed treasurer I found many little things that I was not quite satisfied with, and they were continually disputing as to which of them had the power to do it. I felt that there was not quite employment enough for the patients; I think the employment of the patients rested with the medical officer, or with the matron, and I said I must call upon the matron to find full employment for the patients.

11. Having thus interposed to regulate these little differences between the matron and the medical officer, did you report such interference to the governors?—No, I did not; I felt it was entirely a matter of detail left in my hands.

12. Did it not strike you to be a most important matter of detail?—It did; but I was not at all conscious that I was interfering with the rules. It is only within a few days that I heard so; up to that period it was not a rule; I was not conscious that it was so.

13. It was clearly, by your own showing, a new rule instituted by you; because there appears to have been a variance between the medical man and the matron, and you laid down a rule for their observance?—I did not know it was a new rule; I felt that there was a misunderstanding about the rules.

14. I understood you to say you did not report it to the governors?—I did not. They themselves did not appear to understand what the rule was; and I rather interpreted the rule than made a new one.

15. Can any other governor suspend?—No.

16. Can any other governor exercise the same power as you do?—I should say not.

17. Have you made any and what alterations in the management or superintendence of the wards for female patients?—With the exception of that one, I am not conscious of having made any.

18. Which do you allude to?—As to requesting there should be a larger amount of employment, and that the matron should be the person to attend, keep up and maintain that employment.

19. In whom is the power vested of hiring, suspending and discharging officers and attendants of the establishment?—In some degree it is with myself; but I cannot hire any male attendant except on the recommendation of the medical officer, and I cannot hire any female attendant except on the recommendation of the matron. In fact, the matron finds all the female attendants and takes them on trial; and after they have been there so long as to justify her recommending them she recommends them, and upon her recommendation I invariably act. I never find a servant myself; I act upon her recommendation.

mendation. That is distinctly one of the duties of the treasurer, as will appear by the list I have brought with me. The other servants of the hospital, who are not either male or female attendants, are recommended to me by the steward. Rule 27 is the one to which I refer. *J. E. Johnson, Esq.* 7 July 1851.

20. When the appointment has been made, is it reported to the committee or to the governors for confirmation?—No.

21. Then the appointment is absolutely with the treasurer, in fact?—Yes, upon those recommendations, after a residence in the hospital during the period of probation.

22. By whom are inquiries made as to the character and efficiency of the attendants before they are engaged?—By the matron with regard to all female attendants. Before, it was jointly by the apothecary and steward, until the new rules; but now it is solely by the matron with regard to all female attendants, and by the steward solely with regard to all male officials.

23. They are the parties who make the reports, and you act upon their reports?—They are the parties who bring persons into the hospital on probation, and report to me that they have introduced into the hospital such a person upon probation, of whom they have received a satisfactory character; and after they have been upon probation for a time, if they report that their services are satisfactory, then they are appointed.

24. Have there not been recently frequent discharges or changes amongst the attendants?—There have been a great number of changes among the female attendants, but very few discharges.

25. Can you mention what has been the cause of that?—It has been reported that such and such a person has given notice to quit without expressing any reason, and in some instances it has been accompanied by a statement, or rather an observation, that such a party was not suitable, but not very often. I only recollect two males who have been discharged during three years; one I found had been lending books to some of the girls connected with the house of occupation; the books were not of an immoral character at all, but I felt it so improper for him to lend them, that I thought it a sufficient reason to discharge him. The other person had been guilty of great unkindness and neglect of the patients, and I discharged him immediately.

26. You do not assign any cause for the frequent changes among the female attendants?—The matron is below, and she will be able to tell you that much better than I can.

27. When reports are made to you on the subject of the hospital, or the patients and attendants, by whom are they made, and how often?—The reports come up generally every Friday in a tabular form, as to the number of admissions or number of discharges; the number of deaths or accidents. Those reports are always made weekly, and the case-book is examined as to those who have been discharged; we do not usually look over the case-book, except as to patients who have either left the hospital, or intend to do so. Any letters of any kind are laid before the sub-committee every Friday.

28. By whom are those reports made?—By the steward as to the number, and by the medical officer on other matters.

 29. Does

J. E. Johnson, Esq.

7 July 1851.

29. Does the steward report upon the attendants?—No.

30. Who reports on the conduct of the attendants?—The resident apothecary.

31. You say the case-book is reported, but is not inspected every week?—The case-book is inspected as to discharged patients; on one Friday they are entered on the minutes, and read on the following Friday; the case-book is then called for, and every one of those cases where the patient is reported to have left the establishment is examined and signed by me as chairman, generally by initials.

32. The case-book is examined by yourself as chairman?—By myself, as chairman.

33. Did you ever give an order that female patients should be examined on their admission and discharge, and their bodily state reported to you?—Not reported to me; that never has been done; I never gave such an order.

34. Did you never give any order that reports of that kind should be made to you?—No; I have directed that they should be examined. It is part of the rules, that patients should be carefully examined, and reported to the medical officers. In the new rules, we direct that a record shall be kept, and carefully examined of the state of the patients; it is distinctly the duty of the attendants to inspect all patients who come in, to bathe them, and to report every discoloration or sore of any kind that may be observed to the medical officer. This is a list of the new rules which has been recently prepared for the attendants (*handing in the same*).

35. It being the duty of the superintending medical officer to go round and visit all the patients, male and female, every morning, did you ever give an order that he should only visit the female patients when called upon to do so by the matron?—Never; certainly not; it would be directly contrary to our regulations.

36. Did you ever give an opinion upon the subject?—Never.

37. You never, directly or indirectly, conveyed to the medical officer your opinion that he should only visit the female patients when called upon to do so by the matron?—No; most distinctly not. The medical officer has the patients entirely under his charge; his duty is to go round the hospital frequently to see all the patients; not particularly to interfere with their moral treatment, but to be with them a great deal.

38. What do you call their moral treatment?—To see that they are properly employed and take proper exercise.

39. That you call moral treatment, proper exercise and employment; is not that always considered to be part of the duty of the medical officer?—Certainly.

40. If that be so, why do you make that distinction, and assign what you call moral treatment to the matron?—I felt, if he required anything to be done, that he should give directions to the matron, and let the matron give it to the servants.

41. I understood you to say that you assigned the moral treatment to the matron?—Under the advice of the medical officer; he has the power to suggest what he considers essential.

42. You do not allow him to have further power than a mere suggestion?—I feel it is better with regard to matters not connected directly

directly with medical proceedings, to let the matron give her orders rather than he should give them direct himself; otherwise, in the case of contradictory orders having been given, the attendants might be placed in an unpleasant and embarrassed position.

43. On what grounds do you make that distinction; is not what you call moral treatment clearly a part of the duty of the medical officer; employment and occupation, and the whole system of moral treatment, surely belongs to the medical officer?—Presuming it to be necessary that a patient should be employed, the medical officer would tell the matron to give that employment.

44. Not according to what you have stated; he has only the power to suggest; has he power to order the matron to provide that employment?—If he made any suggestion, and it was not carried out, he would report it immediately.

45. You stated in the outset that the matron was to have the moral treatment, and the medical officer the medical treatment, and he was not to interfere with her?—I certainly gave the moral treatment to the matron; but at the same time I expected her to act in a way that would meet with the views of the medical officer.

46. Did you express those orders in writing, or by word of mouth?—Only by word of mouth.

47. Does the matron, or does she not, alone decide whether or not employment or absolute quiet is best for the patient?—She would answer that question much better herself.

48. Then as you interposed between the matron and the medical officer, and as the matron and medical officer are now acting on the result of that interposition, I ask you to give the Commissioners the full explanation of what you meant by that?—My interference simply meant this: in all those cases which the matron should think were strictly cases of employment, she was to decide; and those cases which had anything to do with the duties of the medical officer should be left entirely to his decision. Disputes occasionally arose, which I felt proceeded from there not being sufficient employment of the patients in the wards.

49. When you gave those orders to the matron, did you or did you you not intimate as the result of your advice that the matron should decide absolutely upon the employment or non-employment?—No.

50. What did you mean?—I meant to imply that complaints frequently arose, and the conviction in my own mind was that they proceeded from there not being a sufficient employment. It was with the view of obtaining a greater amount of employment, and it has had that result.

51. Did you or did you not mean that the medical officer should have the power of ordering employment for the patients?—Certainly; that he should have full power to order employment for the patients.

52. If so, why was the moral treatment left in the hands of the matron?—That she should carry it out.

53. You stated just now it was to be by a suggestion; did you intend it to be by order?—The suggestion of the medical officer was to have the force of an order. I intended that he should suggest the employment, and the matron should carry it out; that instead of giving it to a servant he should give it to the matron.

J. E. Johnson, Esq.

7 July 1851.

54. Do you personally inspect the wards and rooms of the patients?—I go round the hospital very frequently.

55. Can you say on an average how often?—I would not say every fortnight; perhaps rather more than once a month. I have no doubt, on an average, it is once a fortnight. Taking the times that are not the days of the committee, it is full once a fortnight.

56. By whom are you accompanied at those times?—Frequently by the steward; when I am going on questions of repair, always by the steward. I am always accompanied by some attendant; frequently by the medical officer, but never without an attendant.

57. You never go by yourself?—No, never. It is one of the distinct rules, that immediately a person goes in a ward the attendant joins him, and sees him throughout.

58. Do you go to the basement as often as to the other wards?—I think so; probably a little more frequently, because it is the access to the criminal wards. We cannot get access to them without going through the basement, and therefore I go there more frequently than to other parts.

59. Do you make such visits at certain or uncertain times?—We generally, after our committee has broken up, go round once a fortnight; that would be a certain time; but I frequently visit at uncertain times. All questions of repairs are at certain times, but I go at uncertain times.

60. Do you visit the wards at night?—I have never been in the wards at night, except once, after the introduction of gaslights throughout the whole establishment; I went one night to see the effect, and probably once after; I may have been there to ascertain the extent of warmth that was going on throughout the whole of the galleries, and I found it to be exceedingly satisfactory.

61. Do you make any and what inquiries as to the bodily condition or comforts of the patients?—Only so far as the general rules go.

62. Not individually?—Not individually. With regard to the mode of serving the food and the diet, with permission I would observe that a new diet table has recently been introduced (*handing the same*). This is the diet table I found in the hospital when I became treasurer, and this is the diet table that has been introduced since. I have also made an alteration in the mode of serving the diet, as well as the description of food. I have had knives and forks introduced throughout the whole of the establishment, as well as a great number of open fireplaces; and a greater number are in progress. The washing-places have also been altered. I have increased the number of water-closets, and we are now entirely altering the character of the windows; the basement windows are all to come out, and we have entered into a contract for new ones, which are now in progress. These are parts of great alterations which are now in the course of completion.

63. When were the new rules introduced?—I think it was in February 1851.

64. What was the reason of their introduction?—I felt it desirable that every attendant should have placed in his hands a copy of the rules of the duty which each was required to perform. I felt it better to give them the details of their duty in a separate book to themselves, than give them a large book containing all the duties of the superior officers.

officers. I felt it necessary, also, that they should sign the declaration at the end (which the Commissioners will perceive), that they had received it. In some instances they were rather disposed to deny, and in one instance particularly, that they had all the rules. It is a distinct part of the duty of one of the officers to read to every attendant that comes in, the duties he has to perform, and in one case it was denied that such rules had been read. I discovered a peculation on the part of a female attendant, and she denied she was aware she was not entitled to perquisites.

J.E. Johnson, Esq.

7 July 1851.

65. In going about, do you endeavour to ascertain whether there be any causes of complaint?—I hear every statement made to me.

66. Do you make any inquiries?—Not specially of the patients.

67. You are not likely to hear them from the attendants?—I hear everything the attendants are disposed to say.

68. Supposing a patient has any cause of complaint against an attendant, you are not likely to hear that from the attendant?—No.

69. Do you never inquire of the patients?—When I go through the gallery I converse with all as far as I can.

70. You never see a patient without the attendant being present?—Not except they are discharged.

71. When that does not occur, do you see them without an attendant?—Not without an attendant. I will not say the attendant always, but generally the attendant is with me, or the matron.

72. Do you think it likely a patient would communicate any cause of complaint if you had a number of attendants with you?—I do not expect that I should hear more complaints if I were by myself. If I did, I should take steps as soon as I heard it.

73. But you have not taken steps to ascertain whether there is any ground of complaint?—Yes, I have taken every step to ascertain whether there is any ground of complaint; I am most anxious there should be no ground.

74. You say you have done everything to ascertain whether there is any ground of complaint, and at the same time you say you have not examined the patients?—Not privately.

75. Describe the mode in which you ascertain whether there is any ground of complaint?—By going through the wards, and by hearing everything they have to say. I go through the wards slowly, and I have a good deal of conversation with a great many of them.

76. On the discharge of female patients, does the surgeon inspect and examine them himself?—I do not know.

77. Do you not know?—No.

78. You began by telling the Commissioners that one of the duties, on the discharge of female patients, was for the attendant to examine them; does the surgeon inspect and examine them himself; it clearly is his duty?—Do you mean an entire inspection of the person, naked?

79. If necessary?—I have no doubt he does. They are discharged on the report of the medical officer; they are reported, by the attendant, convalescent to the medical officer. I understood the question at first, to mean an entire personal inspection, naked, as they would come out of the bath; if so, I do not believe that such an examination takes place.

80. That is only in case it should be necessary; you say now, you believe it to be the practice to examine patients on their discharge;

did

J. E. Johnson, Esq.

7 July 1851.

did you order that female patients should be examined, not by him, but by the matron and nurses, and a report made to the medical officer only in such cases as they might think proper, so that many female patients might be discharged without being seen by Dr. Wood? —Certainly not.

81. Are you quite sure you never gave an order that female patients should not be examined by the medical officer, but by the matron and nurse, on their discharge?—Most distinctly not.

82. I do not mean merely the personal examination to which you allude, but that female patients, when discharged, should go under what may be considered a medical examination?—No doubt of it.

83. Did you direct that this examination should be made and conducted by the matron and nurses, and not by the medical officer?—Certainly not; the report comes to us from the medical officer, and we insist upon the matron and nurses reporting immediately everything they perceive about a patient, and that report should be made to us; it is Dr. Wood who reports the patients' convalescence.

84. Are you quite clear in your recollection that you never gave an order to that effect?—I am quite clear that I never in my life gave such an order, that the examination should not be made by the medical officer.

85. Is the examination made by the matron, and reported to the medical officer?—No; always by the medical officer.

86. Who is responsible for carrying into effect all orders and directions?—It depends upon the parties to whom it is referred. If it be as to the treatment of the patients, it is referred to the medical officer.

87. Do you mean by the medical officer, Mr. Wood?—Yes.

88. And not the physicians?—No. I expect more from the physicians than I get.

89. Have you seen any reason why the friends of patients should not be permitted to see them for a month after their admission?—I am not aware that it is the fact; the rule is, that they shall see them every Wednesday, and I have always understood that was the case, and I hope it is the case.

90. Is it one of the new rules?—I believe it is an old one.

91. Is it in the old rules?—I think it is; I have copied the old rules as far as possible. I believe the old rule is once a fortnight.

92. Has not the practice grown up of excluding friends of the patients for a whole month?—I am not aware of anything of the kind; I should have resisted it most strongly.

93. Just now you used the expression, in talking of the physicians, "I expect more from the physicians than I get." What is your meaning?—I should be desirous that they should look a little more to the general details of the whole establishment than merely the medical details. I state to you in candour, with regard to the medical staff, that I have never from the first been satisfied that I had a sufficient medical staff. I feel that one resident medical officer is not sufficient for so large an institution. I ought to have two resident ones, who should take the entire control of the whole establishment; and it should never, under any circumstances, be without one. This is my private opinion, and I have no doubt I shall succeed in time in bring-

ing

ing it about. One of the gentlemen has been 37 years in the establishment, and the other upwards of 16; therefore I feel there is some difficulty at present in effecting an alteration.

94. Do you mean the physicians?—Yes; one is there every day.

95. One or other physician is there every day?—One or other is there every day, and on Fridays they meet jointly.

96. We understood you to say that you would very strongly advise that there should be two resident medical men?—From the first of my joining the establishment that has been my private opinion. I feel that to superintend all the cases, to keep up the case-book, to conduct the correspondence, and to watch with all that care and all that attention that it requires, is full occupation for two medical men.

97. Have you ever proposed that there should be an additional medical man?—I have again and again proposed it, and should a vacancy occur, I should suggest that alteration then to be made.

98. But there is a vacancy; there is only one, and there ought to be two?—That is my opinion, and always has been.

99. What is the number of patients in Bethlehem?—On an average 400, including the criminal patients.

100. Does the medical officer attend to Bridewell as well?—No.

101. Do you know what the physicians do when they come?—I do not; but I know this, that the physicians must attend in their turn.

102. What do they do at the times they attend?—At the times they attend they are to go through the wards with the apothecary; it is his duty, as the rules show, to go with them, to receive their instructions and to carry them out, but the details of that are never laid before the committee.

103. Upon an average, how long do they stop during their visitation?—One of them is there about an hour per day three times a week; but on Fridays, when they have to attend the committee, it takes them two hours and a half; the other gentleman is there about two hours and a half.

104. What patients do they see, and what rooms do they go through?—They go through the whole establishment; an arrangement has been made to suit their own convenience (it is a very old one), that each gentleman should be considered as taking the patients of one week, and the other the following week; and all patients who come in in one week are considered under the care of one physician, and in the next under the care of the other physician, and they remain under the care of those particular physicians during the whole period of their being in the wards.

105. You have stated just now that each physician remains an hour a day three times a week, and you have stated they see all the patients, and they go through all the rooms?—Through the galleries; it is impossible to go into all the rooms; sometimes the patients are not in the rooms.

106. Is not their duty discharged in a rapid and somewhat summary manner, if in one hour this great Hospital of Bethlehem is to be seen, the patients examined, the rooms looked at, and a proper superintendence exercised?—They do not go into the bedrooms; they go along

J.E. Johnson, Esq.

7 July 1851.

along the gallery and see all the patients; it is certainly a very short time, and I have always felt it to be so.

107. Is there any register or case-book kept?—There is; and that case-book is laid before the committee, with the names of the patients who have been discharged in the preceding week, and those who are to be discharged on the following Friday.

108. That case-book is kept?—Certainly.

109. Does the case-book date far back?—Certainly; before the period of my being treasurer.

110. Is the case-book kept better now than it used to be?—I do not know that it is. It is kept in this respect better, that since I have insisted on seeing (it is a recent introduction of my own) every case completed the week after the patient has been discharged, I am satisfied they have been made up more regularly. I have very little doubt before that they were not made up with such regularity, and I incline to think they were not made up so fully.

111. Has it ever occurred to you that there is a difficulty in the case-book being made up where there are 400 patients?—The resident medical officer keeps it; it is examined, and it is signed as correct.

112. Is there a prescription book, independently of this case-book?—Yes.

113. What salaries have those gentlemen?—This is a list of all the salaries (*handing in the same*).

114. The two physicians have 250 *l.* per annum?—That is exactly the scale of salaries as it was last year. All my accounts are published every year, and everything we have is as accessible to the public as we can make it.

115. Do you recollect that there was in the hospital at Bethlehem some time ago two young persons, a Miss M. and Miss H.?—I recollect the case of H. very well, but I did not recollect the case of M. until it was recently drawn to my attention.

116. Do you recollect whether any complaint was made at any time of her ill-treatment?—Certainly not, while she was in the institution. The case of M., as it appeared to us, was this:—She was brought into the institution, and shortly after a request was made that she should be permitted to sign a legal document, to which I objected. I would not consent on any consideration to allow her to sign any document, the object being to obtain money for her through such signature, and I would not consent to it; and her friends suggested that it would be better to remove her, and take apartments, and obtain her signature. I said I would have nothing whatever to do with it; if they removed her they might do so, but I would not permit her to sign any paper while she was there. An application was shortly afterwards made for her removal, on the ground that a change of air would be beneficial for her, and she was taken away. Certainly no complaint was made on the part of her friends of her treatment. It may be that they were themselves not conscious of there being anything about her which indicated ill-treatment, and until recently I never heard of any complaint of the sort.

117. You said you had heard about Miss H.?—Not during the time she was in the hospital. I had a long correspondence (the whole of which

which is here), showing every step that was taken in the case, and it is concluded by her father, Mr. H., requesting another interview; and we fixed a day for it, intending to go into the matter very fully, and to have a reporter there to take notes of everything that occurred; and upon the day fixed, Mr. H. wrote a note, saying he was so ill that he was unable to attend, and he would reserve the investigation for some future period. Our answer was, that we were sorry to hear of his illness, and we would make an appointment whenever he thought proper. I have a copy of the letters he sent.

118. In fact, nothing has been done in the case?—Except a long investigation.

119. But no result has been come to?—No, it has been considered *sub judice*.

120. Do you not consider the effect of your modification of the old rule to be to give more power to the matron, and to take away the power from the medical officer?—I did not intend it to be so; I intended that she should be called much more into action, and he not the less.

121. Has not the effect of the modification been to give more power to the matron, and to take away the power from the medical man?—The obvious effect has been to give an immense deal more employment to the patients. I am not conscious how it has affected the medical officer at all. I perceive, in going through the wards, that they are much more employed than they were. That is the result.

122. Do you not consider it has given the matron more power, and the medical officer less?—I did not intend to diminish his power at all. I intended that she should act in cases where she was not acting before, such as cases of employment.

123. Has Dr. Wood complained that his power has been circumscribed at all?—Not the least.

124. Have the new rules always been received in a kindly manner by the chairman and the governors?—Certainly. In the first place I sent copies of those rules round to many of the most active governors, and they offered me numerous suggestions; and having received and considered all these suggestions, the new rules were framed.

125. Have you ever proposed to have an additional resident medical officer?—Not as a distinct proposition. I believe most of them know it is my private opinion; and a great many concur with me, and in the event of a vacancy occurring, an alteration will be made.

126. There is no vacancy necessary?—Such an alteration should take place. There is another difficulty besides that of merely appointing the medical officer, that is, to find accommodation for him.

127. By vacancy, do you mean resigning or dying?—We should not fill up the vacancy; we should appropriate the salary to the resident medical officer.

[The Witness withdrew.

Dr. *William Wood* called; and, having been sworn, was examined by the Commissioners as follows:

Dr. *W. Wood.*

7 July 1851.

128. ARE you a Doctor of Medicine?—I am.

129. What office do you hold in Bethlehem Hospital?—Resident apothecary.

130. What are your duties in the hospital with respect to male patients?—I think I may say the management of the hospital depends upon me. I have the general direction of the treatment of the male patients. The physicians, of course, are supposed to be responsible for the medical treatment, but a good deal of the medical treatment necessarily devolves upon me, in consequence of my always being there.

131. What do you do on the arrival of a male patient; do you see him and examine him?—Yes.

132. And also on his discharge?—There is no formal examination on the discharge of a patient. The form of discharge is, when a patient has arrived at such a period of convalescence that he may safely be discharged, his name is put in a book called "The Convalescent Book," which is read to the committee at three successive meetings; and if, during that period, he appears to be going on well, he is discharged by the committee.

133. What are your duties as to female patients?—My duties as regards female patients are somewhat the same as on the male side, except that the classification and employment of the female patients, and the control of the nurses, is in the hands of the matron.

134. The classification of the female patients is in the hands of the matron?—Yes.

135. And the employment of those patients?—Yes.

136. Have you not full authority, then, as to the employment of female patients?—No.

137. Have you the power of making suggestions as to their employment?—Certainly; I have the power of suggesting anything that strikes me.

138. In what way have you been controlled? Was it by an order given to you by word of mouth or in writing, that you were not to interfere with the employment and classification of the female patients?—By word of mouth.

139. By whom was the order given?—By the treasurer.

140. And that was to rest entirely with the matron?—Yes.

141. Did the treasurer at that time mention to you, that any suggestions of yours would have the force of an order, and would be attended to?—No, I think not. I cannot recollect any such observation. My impression is, that no such observation was made to me.

142. What are your powers in general, and are you controlled by any and what superior officer or other person on either side of the establishment?—The treasurer, and of course the physicians, are responsible for the treatment.

143. How often do you visit the female wards?—Twice a day under ordinary circumstances.

144. At what time of the day do you generally visit them?—I usually begin to visit them as early as I can in the morning. I generally

rally visit the men's side first, in order to give the women more time to prepare themselves. I go there generally about nine or ten o'clock, according as my other duties will allow me.

145. Do you ever visit them at night?—Whenever occasion requires it. I have no fixed time for visiting them at night; I go round twice every day, and sometimes five or six times a day if the patients are ill, and it is requisite.

146. It is not a rule, then, with you, to visit them at night?—There is no rule to visit them at night; there is a rule that requires me to make a visit, but at no certain time, after the patients have gone to bed.

147. Do you keep any record of such visits?—There is a rule that requires me to keep a record of my visits to the gallery; but when I first went I found it utterly impossible to do all that was required of me, and that the book could not be kept when so many duties devolved upon me; I found it was quite impossible.

148. When you make visitations, do you see every room, and personally examine the patients?—I do not go into every room; unless the patients are in the bedroom I do not go into it. The patients are generally at one end of the gallery, and, by turning my back occasionally, I might miss seeing one or another; but, as a rule, I believe I may say that I see all the patients at every visit. Some may be employed at another place, or in going up or down the staircase, whom I might possibly miss; but, as a rule, I always go into the ward to see the patients, and, if any one is ill in bed, there is no chance of my missing one who is ill.

149. What inquiries do you make when you see the patients?—I inquire into their general condition; as to their habit of body and mind, and anything that occurs to me at the moment of visiting, both of the nurses and the patients.

150. Do you take care to ascertain that you have seen every patient?—I do not take a list, and tick them off as I go along, when there are as many as 40 or 50 patients in a ward; therefore I cannot positively say that I see every patient.

151. How can you feel assured, then, that you have seen every one?—I am not sure; I know that sometimes I do not see every patient, and for this reason, that now and then I am told it is not particularly necessary or desirable that I should see them. I do not content myself with the accounts given by the nurse, but determine for myself whether I shall do so or not; sometimes I think it is desirable that I should not see them.

152. As to some of the patients, then, you are in the hands of the nurse?—Not at all. As a rule I go through every ward; and unless a patient is accidentally out of the way, or happens to be in the closet, or something of that sort, I rarely miss seeing whoever is there. Still, when there are so many in the ward it is quite possible that, in going through them, I may not recollect all of them; I may forget to ask after every particular individual.

153. You are at the mercy of the nurses, then, whether you have seen all the patients or not?—I think not.

154. Have you ever investigated the basement story at night?—Yes.

155. Lately?—

Dr. *W. Wood.*

7 July 1851.

155. Lately?—I do not go much on the women's side of the basement unless the patients are ill; on the men's side I go constantly.

156. Have you visited the female side at night within the last three months?—Oh, yes; it generally happens there is somebody a little out of health there, and I have occasion, on that account, to visit them at night.

157. When you go over their wards do you endeavour to ascertain whether the patients have any cause of complaint?—I do not put the question to them, whether they have any cause of complaint; it generally comes out if they have, and I always encourage them to tell me any cause of complaint, if I have reason to suppose there is any.

158. Why do you assume that it will come out, unless you put the question?—I have no reason to suppose there would be any cause of complaint, unless something occurred to attract my attention.

159. Have you such unbounded confidence in the management of Bethlehem that you think there cannot be any cause of complaint?—If I had any reason to suppose that there was any cause of complaint I should inquire; but without reason to suppose that there is a ground of complaint I do not suggest to the patients that they have anything to complain of.

160. You do not ask them whether they have any cause of complaint?—Not as a practice; not unless I have reason to suppose there is any.

161. Do you go about with the attendants?—Yes.

162. Do you suppose that if a patient has any cause of complaint, he would make the complaint when an attendant was by?—I have very often had the patients complain to me of the attendants. I have occasionally heard complaints of the attendants in the presence of the attendants, and I have at once made them state their case, and heard what they had to say; and then determined, to the best of my judgment, what ground there was for the complaint.

163. What steps did you take when you heard those causes of complaint?—At once to hear the statement of the patient, and then hear the statement of the person complained of, and get any other evidence that I could that was likely to assist me in forming a judgment.

164. Did you ever lay such complaints before the governing powers?—Yes, I have done so.

165. What was the effect?—The effect has been, in one case where I had occasion to complain, that the man was immediately dismissed; and, in another case where I had to complain, the attendant was reprimanded.

166. How do you ascertain whether a patient requires medical treatment at all?—I ask them generally how they do, and if they are not in a condition to answer for themselves, I ask the nurse if any thing is wrong; I make the usual brief inquiries as to the state of their health, what food they take, and so on.

167. And as to the state of their bowels?—Yes.

168. If a patient has been scalded, or has suffered any injury, how do you ascertain that?—In the first instance, I should state that I have had all means of restraint taken out of the wards; no person can get any means of restraint without a written order; therefore there is no possibility of employing any restraint without my knowledge.

169. When

169. When did you give the order that all means of mechanical restraint should be taken out of the wards?—I had no power of giving the order; I merely suggested to the treasurer that it should be done, and he gave an order.

170. When was that?—Some weeks back.

171. Why was that order made?—It was because there were so many of these things about the house. I really do not know any particular reason that I gave for it at the time. It rather occurred to me that it was desirable to have them all out of the reach of the nurses and attendants, and I must say I was a little disappointed once or twice, after a very long interval, during which I had been trying to do without restraint, that one of my superiors exercised his undoubted power to order restraint in my absence, and so deprived me of the means of saying that there had been no restraint for so long a time. I do not complain of that; I am not sure that it was not judicious, but if I had been there I think it could have been avoided. It was an order to meet that case that the idea occurred to me of having permission to remove all those things, and put a little more difficulty in the way.

172. Has any attempt been made to restore these instruments of mechanical restraint?—No.

173. What was the system before they were removed? Were they all lying about, so that the servants could use them whenever they pleased?—They were kept locked up in the different departments; and the rule was, that no patient should be placed under restraint without my knowing it.

174. What means had you of ascertaining that that rule was observed?—By being constantly about, and seeing the patients who were likely to be subjected to it.

175. Did you examine the other patients as to the fact?—I have no recollection; such an idea never entered into my mind. I have had no reason to believe anything of the sort had been done; if so, I must have known it; I was constantly about the wards, and it could not possibly have been done without my knowing it.

176. You said a short time ago that an order was given by your superior for mechanical restraint, which was very vexatious to you?—Not very vexatious; I said I was a little disappointed.

177. Who was that superior?—The surgeon.

178. Who is the surgeon?—Mr. Lawrence.

179. What is he?—He is the consulting surgeon.

180. Do you recollect when he gave that order?—I think it was some time last year.

181. What kind of restraint was it that he ordered?—It was what we call a canvas frock, with very loose sleeves inside; it was a very simple form of restraint indeed, and only put on to prevent the patients picking off some bandages; perhaps I was not justified therefore in saying that I was disappointed in their doing it. My great anxiety has been to do away with restraint in all cases as much as possible; and, having kept the keys, I meant to prevent any restraint being used, unless I found it necessary.

182. How often does this gentleman visit Bethlehem?—He has no fixed time; he comes occasionally.

Dr. *W. Wood.*

7 July 1851.

183. He comes when he is sent for?—No; he comes without being sent for.

184. How often does he come?—Perhaps once a week, or twice in ten days.

185. He is the consulting surgeon?—He has no medical charge of the patients; unless there is any surgical case which requires him to see a patient, he does not go into the ward unless I ask him.

186. By whom and by whose authority is restraint or seclusion imposed?—The nurse and the attendants have the power of putting a patient into a room without first mentioning it to me, but they are obliged to report it to me immediately they have done so; they have no power of employing mechanical restraint. I have taken care of that by having this order; they have no means of getting at them without a written authority.

187. What are your instruments of restraint at present?—I believe there are some strait-waistcoats, but they are not used now; I have not seen them used.

188. In whose custody are they?—The steward's.

189. Then are we to understand that all instruments of mechanical restraint have been removed?—Yes.

190. Removed from the custody of the attendants?—Yes.

191. And the matron as well?—Nobody has any but the steward, and he is ordered not to use them without an order.

192. Is a register kept of the restraints?—Yes, and of the seclusions also.

193. Who keeps the register?—The report is made to me.

194. How far is the treatment of the patient left to your direction?—Where there are so many patients, it so happens that I prescribe for nearly all; in other cases, the physicians are responsible for the medical treatment, but I prescribe for any patient who appears to require medical attention.

195. Do you keep a case-book?—Yes.

196. Do you keep the case-book more accurately now than it was formerly kept?—I cannot say more accurately. My duties are so multifarious that I find it impracticable to make it out as I could wish. I am anxious to keep it as well as I can, but I have so many duties to perform that I cannot bestow so much time upon it as I otherwise would.

197. In fact, you have a great deal too much to do?—Yes.

198. You want another resident medical officer?—It is impossible, as I have told you, for one person to do all that is required; it is utterly impossible.

199. Have you ever stated that to the authorities of the hospital?—Oh yes; I believe many of them are fully aware of it. I think the treasurer is just as anxious as I am that there should be another.

200. To whom do you make your reports respecting the state of the patients?—To the committee.

201. How often?—Every week.

202. Can you alter the prescription of the physicians?—Yes.

203. Do you report to the physicians what medicines you prescribe?—Not always, because so much of the medical treatment is left to me.

204. Have you a prescription book?—Yes.

205. With whom and on what occasions do you consult with the other medical officers?—It is my duty to go round with the physicians every day.

206. What amount of time do they devote to that duty? It must be a great relief to you to have two physicians calling there every day, or rather each one three times a week?—I do not know what relief it is. I am obliged to go without them as well as with them.

207. How long are the physicians in the hospital on an average?—About an hour, I should think.

208. You go with them through the wards and the galleries?—Yes.

209. Each physician sees all the patients?—Each sees them all; but he has only half of them under his special charge.

210. They do not have access to the others?—Not unless something particular occurs.

211. That duty must be performed with considerable dispatch to be done in an hour; it is a very large building: when you say the medical man goes round three times a week, does he see all the patients, or only those under his own particular care?—He sees them all.

212. And speaks to every one?—They see every room.

213. Have you a list to mark them off?—No.

214. Who determines the ordinary, and who the sick diet?—The ordinary diet is fixed by a rule of the hospital. I have the power to order anything as sick diet.

215. Are your orders attended to?—Always.

216. Who administers the medicines prescribed?—The nurses and attendants.

217. How do you know that the medicines that you prescribe are duly administered?—I have no means of knowing it, except relying on the trustworthiness of those who have to do it.

218. Is there a sick diet list in the ward?—There is a sick diet list in the ward.

219. A patient has no opportunity of knowing that she has the diet you prescribe for her: supposing you were to order wine, for instance?—No other than by my generally saying, if I order a patient anything of the sort, "You shall have so and so."

220. How are the patients fed who refuse food?—If possible, we try to avoid the use of the stomach-pump; we only resort to it occasionally, and when we cannot induce or coax them to take their food.

221. When it is necessary to resort to such means as these are you always present?—Invariably. In fact I always administer the stomach-pump myself.

222. Are there not many instances in which food is given to reluctant patients without the agency of the stomach-pump?—Yes; many are unwilling to take their food.

223. Who gives them their food?—The nurses or the attendants.

224. Sometimes it is administered by force?—Not by force. If they cannot do it by fair means, they come to me, and I judge of the expediency of employing the stomach-pump. I always see them myself, and try to coax them to take their food.

Dr. *W. Wood.*

7 July 1851.

225. Do you receive any and what reports from the day or night attendants?—I have received hitherto a verbal report. I have omitted to carry out strictly one of the recent rules now in force. It escaped my attention that the report was to be in writing. I have trusted hitherto to their verbal reports, but they now make written ones.

226. Could you suspend or discharge any attendant?—No.

227. Not a male attendant?—No.

228. What reports do you receive from the matron?—Weekly reports of the bodily condition of the patients admitted, and the numbers in each gallery.

228*. How often do you get these reports?—Once a week.

229. Do they relate to the bodily condition of the patients?—Yes.

230. And restraint or seclusion?—That is duly reported.

231. Do they relate to accidents or injuries also?—The nurses' report is made to me every morning at my visit.

232. By what means do you ascertain the progress towards mental convalescence of any patient?—From my own observation.

233. Is your attention drawn to an improved case by the matron or attendants?—No; by myself. I do not trust to anybody to draw my attention. I keep my eye on them all, and from my repeated visits on one day or the other, I notice any improvement that may take place. Besides, I make it my business occasionally to have a chat with those who are quiet and orderly, and only have some delusion, to see to what extent the delusion still remains.

234. Do you keep no written record of accidents or injuries?—Not of trifling accidents.

235. Do you keep any record of accidents at all?—Only so far as the case-book goes.

236. You mention them in the case-book?—If it is anything important.

237. How far does the case-book go?—It does not go so far as it ought to go; but I feel that I am not responsible for that, considering the enormous number of duties I have to perform.

238. Do Dr. Monro and Sir Alexander Morrison countersign the case-book?—Yes.

239. Do they examine it minutely?—They countersign the fact of a patient being discharged, and the treasurer also countersigns what I have written of the case.

240. Is it part of your duty to see into the personal comforts of the patients, as to their bedding, clothing, &c.?—As to the bedding, I have done all I could to have some alteration in that, and it is now being carried out. The bedding has been very bad; it is now very much improved. When I say "bedding," perhaps I am not justified in using that expression. It was a bed consisting of a flock and a loose case only.

241. Do you allude to the basement?—Generally. I have directed the attention of the treasurer to that, and he has taken up the question.

242. Is there a good deal of loose straw?—Yes, in the lower department, for the dirty patients.

243. Are you aware that any of the female patients in the basement sleep entirely naked on loose straw, without anything interposed between their bodies and the straw?—No.

244. Was it ever the case?—Not to my knowledge.

245. Not since you have been there?—Not to my knowledge.

246. Can you positively say that they do not sleep naked?—I know some will take off what clothing they have; but I have no knowledge of any patient being put to bed naked, nor do I believe they are ever put to bed without a covering upon the straw. My firm belief is, that the straw is always covered with a blanket. It never has been my practice to put patients to bed on the bare straw.

247. Do you know when, and in what manner, the dirty female patients are washed, and where they are bathed?—That more particularly belongs to the duty of the matron.

248. Have you never been present when anything of that sort has occurred?—No.

249. Do you know how they are washed?—In the bath.

250. Are you aware that any dirty female patients are laid on the stone floor naked, and mopped with cold water?—No; I do not believe that such a thing was ever done at all.

251. You do not believe it has taken place?—No; it never has been done since I have been there.

252. You have no means of knowing the contrary?—No.

253. It might have been done, then, without your knowledge?—Yes.

254. Do you disbelieve that a patient was ever placed on the stone pavement, and washed with cold water from the pump?—I do totally disbelieve it.

255. Whose duty would it be to inquire into the charge?—The matron's. She has the control of the nurses and the people who have that duty to perform.

256. Whose duty is it to classify and distribute the patients in the different rooms?—I do it on the male side, and the matron on the female side.

257. Have you any infirmary for the sick?—No.

258. Have you any attendants specially appointed for the sick?—No.

259. What special comforts have you for sick patients?—We have water beds and water cushions.

260. In short, have you any special comforts for the sick except water beds and water cushions?—No.

261. You have no infirmary and no special comforts for the sick?—No.

262. Have you any means of separation should fever break out, or anything of that kind?—We have some rooms separated from others. Once or twice, when we have had erysipelas, we have separated the patients.

263. Are the bodies of patients examined on admission and discharge?—On admission, but not necessarily on discharge, if they go out well.

264. By whom are they examined?—When they are admitted they are examined by the nurses and attendants.

265. Are any written or other reports made by the persons so examining?—No written reports.

Dr. *W. Wood.*

7 July 1851.

266. To whom would the reports be made?—Verbal reports are made to me on the male side, and to the matron on the female side.

267. Then there are no written reports?—I write the reports myself. I make a written report of it to the committee.

268. Where are those reports recorded?—In the committee's book.

269. How long has this been the case?—Since I have been there, and always, I believe, it has been the case.

270. How long have you been there?—Going on for six years.

271. Does the matron accompany you when you go round with the visiting physicians?—No.

272. If either of the visiting physicians should be ill or absent, who attends to the patients?—I do occasionally, or the other physician comes for him.

273. Suppose from illness, or some other cause, you should be absent, by whom would those duties be performed?—He must provide a substitute.

274. How often do the governors meet?—Once a week.

275. What are the duties of the house committee?—I can hardly say. It appears from the Book of Rules to be, to visit the hospital at certain times, and to decide on the discharge of patients.

276. Do they visit at stated or uncertain times?—At uncertain times.

277. Do they ever visit at night?—No.

278. How often, on an average, do they come; once, twice, or three times a week, or what?—There are no fixed times; sometimes it is so rarely that I can hardly tell how often, but I suppose I might say, on an average, once a month, perhaps, since I have been there; sometimes it has been more frequent.

279. Has there ever been an interval of two months without a visit from the house committee?—I cannot say without the book; they generally make a note of their visit.

280. When they come, what do they do; do they inspect every room?—I do not know that they inspect every room; they go round very carefully.

281. Do they examine every patient?—The rule, I think, is, that they shall examine and see every patient.

282. Do they tick them name by name?—No.

283. Do they ascertain whether there has been any subject of complaint?—If complaints are made to them, of course.

284. Do they make inquiries?—If there is anything to lead them to do so; it is the practice, on discharging patients, always to put questions to them.

285. By whom are the house committee accompanied?—The matron goes round the female side with them.

286. Has the governor or the house committee issued any recent orders or regulations?—There were some regulations issued in March or April, I think.

287. Was it in February 1851?—Yes.

288. Did you ever hear the cause of those regulations being issued?—They had been in contemplation for a long time. I do not know any particular cause, except frequent dissatisfaction with the then state of

of the rules. Many of them having fallen into disuse, it was thought better to revise them, and make them more distinct and explicit.

289. Has anything been done in consequence of those new rules?—Yes, several things have been done. As regards the male side of the house, the attendants have been placed under my control; before, they were under the control of the steward. The diet has also been very much improved, but that did not come within the new rules.

290. Do you remember Miss M.'s case?—Yes, distinctly.

291. What was her bodily and mental state on her admission?—She was in moderate health. I do not recollect distinctly, on her admission, whether she was below average health. She was naturally a delicate person, with a dark sallow complexion and an unpleasant look, which I should imagine was natural to her.

292. By whom was she examined?—She was examined by the nurse.

293. Were you present during the examination?—She was examined first by myself on her admission, and afterwards by the nurse.

294. I want to know what your report was; the nurse can speak for herself. You say you examined her on her admission; tell us what was her condition, bodily and mentally, at that time?—This is as far back as the month of October, and I am scarcely in a position to tell you positively.

295. Have you got the case-book?—Yes. I have the report of her condition generally during the time she was in the hospital. It is rather in general terms; and I have also the committee's report of her bodily condition. After I approved of her admission, she was stripped and bathed by the nurses; a report was then made to me by the matron, and I reported the case to the committee.

296. Have you brought that report here?—Yes.

297. What is the general result?—She was free from bruises, sores, or wounds. I think that is the usual expression; "free from bruises, sores, or wounds."

298. Have you got the report here?—Yes.

299. In what ward was she placed?—She was placed, as all patients are on their first admission, in the No. 2 gallery.

300. Whose patient was she?—Dr. Monro's.

301. Was she visited by him during her residence in the hospital?—Yes.

302. She was not visited during the whole time of her residence by Dr. Monro?—Dr. Monro must have seen her.

303. Did he not fall ill?—Yes, he was laid up with the gout the greater part of the time that she was in the hospital. I find I have unfortunately brought the wrong book, so that I cannot read the report. It appears in the book for the year 1850, but I have brought that for 1851.

304. I gather from you, then, that there were no wounds or bruises on her person?—I have that report here.

305. That is the report we want; just read it?—This is the form of the report I received from the matron (*handing it in*).

306. Is that the report in Miss M.'s case?—Yes; it is as follows:—"10th October 1850. On the 6th October, admitted A. M., free from bruises, sores, and wounds. *H. Hunter*, Matron."

Dr. *W. Wood.*
—
7 July 1851.

307. Did you see Miss M., and inspect her bodily condition, and how often did you do that?—Not her bodily condition; I did not inspect her bodily condition. I do not inspect the bodily condition of female patients, unless something is pointed out to me.

308. Did you see her during her residence?—Oh yes; I saw her continually.

309. Could you speak to the condition of her body or her mind, at any time during her residence in the hospital?—She got gradually into very bad health, and was allowed extra diet; bottled stout, quinine, and so on.

310. Now attend to this. You have told us the condition in which she was when she was admitted. Do you recollect her having a black eye?—I have an indistinct recollection of her having a black eye; but I cannot charge my memory positively; my impression is, that she had a black eye shortly after her admission.

311. Do you recollect her having any sores on her body?—I am not aware of her having any sores.

312. You never saw any?—No.

313. Was no report made to you that she had sores on her body?—I have no recollection of any such report being made to me.

314. Do you remember her having prolapsus?—I did not recollect it; but the nurse reminded me that I had ordered what was necessary for it.

315. Have you no record in your book of your having given that order?—No, I have not.

316. Do you remember her having swollen legs?—Yes; I remember she had. That would result from her weak state.

317. It would be a sign of her bodily state of health?—Yes.

318. Can you state the medical treatment she received in consequence?—Yes; on the 17th of October she was ordered sick diet. On the 16th of November she was ordered bottled stout diet. I may mention that "sick diet" entitles the patients to anything they can be induced to take; beef-tea, arrowroot, or any delicacy.

319. Had she any of these delicacies?—Oh yes, continually; anything she could take.

320. That is to say, you ordered her those delicacies?—I ordered her sick diet, and that entitled her to anything she could take.

321. You have no means of knowing that she had it?—I am not present at the patients' meals as a rule; I do occasionally see them.

322. When she was discharged, was a report made by the matron or yourself, and recorded in the committee's book?—When she was admitted.

323. Not when she was discharged?—No.

324. You say a sick patient can have anything she wishes?—Not anything she wishes, but anything the nurse can induce her to take suitable to her condition. For instance, if I were going round, and found a patient on sick diet, I should inquire particularly how she got on; and I should say, "Have you tried so and so?" eggs, for instance; and if I found they had not taken what was ordered, I should direct them to try them.

325. Do you know where she slept?—She slept, I believe, in what is called the basement, which is the department for dirty patients.

326. Do

326. Do you know anything of the state of her room and bedding, or the comforts supplied to her during her bad state of health?—I am not aware that there was any difference in her bedding to that of other patients generally in that department; she was always very dirty, and I believe always on a similar bedding of straw as the others.

327. When you went to visit her, was her bed in a proper condition?—I never saw her in bed.

328. Do you know whether she lay on loose straw, without anything interposed between her and the straw?—I never saw her in bed. I have no reason to suppose she was treated different from all the other patients in that department.

329. Did you at any time receive any report, and from whom, as to her bodily health?—I had daily reports about the other patients; and, as a matter of course, I asked every day all the particulars about her. I cannot charge my memory with what I was told from time to time. I dealt with any symptoms that occurred at the time.

330. Were any reports made to you that there were sores on her back?—I believe not; I am pretty sure there were not.

331. By whom was she examined previously to her discharge?—By the nurse, if anybody.

332. Not by you?—No.

333. Then you cannot say what was her condition?—Not her bodily condition.

334. What was the name of the nurse who examined her?—Cliffin was the senior nurse at that time.

335. Was it the senior nurse's duty to examine her?—Yes.

336. Did you hear anything about somebody wanting Miss M. to sign a deed?—Yes; her sister came to me, I think, two or three times on the subject. We had a long talk about how it was to be done. I told her I could not consent while she was there; there was great doubt of the legality of such a step; besides, I did not think she could sign anything in that state of mind.

337. Do you recollect a patient of the name of Eleanor W.?—Yes.

338. Where was she placed?—She was placed, in the first instance, in No. 2 gallery, as is usual with all patients on their admission; and as she became violent, abusive, dirty and mischievous, she was sent to the basement. Her case appears in the book, which by mistake I have not got with me.

339. What was her bodily and mental condition?—As regards her bodily health, very good. I have a report of her bodily condition. "Admitted 26th March, 1851, Eleanor W., covered with cuts and bruises. Signed, *H. Hunter*, matron."

340. Was she discharged recovered?—Yes.

341. Why was she placed in the basement, if you found her in average health?—They only go into the basement on account of being violent, mischievous, dirty, and using bad language.

342. Do you know whether she made any complaint of ill-usage from any of the attendants?—I never heard of any complaints.

343. Did Mrs. Hunter make a report, or otherwise speak to you on the subject of this patient?—I do not remember. I have no recollection

Dr. *W. Wood.*
——
7 July 1851.

tion of her speaking to me about it. My impression is, that she never spoke to me on the subject; I have a recollection of her once mentioning her name to me.

344. Do you consider, with your present powers, you are able efficiently to perform all those duties which devolve on the resident medical officer of Bethlehem?—That is a question rather for my superiors to determine. I would rather not answer that question; it might place me in an awkward position by finding fault with those who have to determine it for me.

345. Do you remember Miss H. being brought?—Yes.

346. Did you see Miss H. after she was discharged from the hospital?—Yes; I was present at a *post mortem* examination.

347. When did you see her?—At her father's house after her death; I did not see her alive after she left the hospital.

348. What were your reasons for visiting her father?—The president wrote me a letter, enclosing one from the father of the patient to him, complaining of the treatment his daughter had received, and he wished me to investigate the circumstances. I thought the best way to do it, finding there was a charge of some marks on the body, was at once to go and see the body. I heard she was dead, and immediately went to the house, and there found the medical attendant of the family about to make a *post mortem* examination.

349. Were you present at the *post mortem* examination of the body?—Yes.

350. State with the utmost possible accuracy what was the condition of the body?—We made a written report of the examination, which is in the possession of the treasurer; I do not know whether he has produced it; to the best of my recollection, we reported what we observed; it is a difficult thing to carry in one's recollection what I had seen.

351. State the external condition of the body?—Externally there were some marks on her body; dry sores; what appeared to me to be rather the effect of picking; the surface appeared to have been broken up to some extent and healed; then a little way up a fresh scab appeared to have grown into that, as if there had been a series of pickings, and not produced at any one time. It appeared particularly at the lower extremities where she had somewhat similar marks, and on her lip was such an appearance as a person occasionally has with a cold.

352. Was there no cut on her lip?—There was a cut on her right cheek, more of a scratch than a cut; I am not certain whether it was on the left or right side of her mouth; it was rather a scratch than a cut; it was healed, and quite dry, but there was the mark of it.

353. What else was there; were there any bruises?—I cannot charge my memory as to the bruises; we noted everything at the time; I think there were some bruises, but I really cannot remember where they were.

354. Upon reconsideration, as a medical man, and moreover on your oath, do you mean to tell the Commissioners that you believe these marks were made by the patient picking her body?—I do most decidedly and solemnly, and without the smallest hesitation; I firmly believe they were done by picking, and I have more reason for believing

ing it, because I observed the patient during life continually picking at her lips, which would produce such appearances as appeared on other parts of her body; that is my most firm impression.

355. To what do you attribute the bruises?—She was paralytic, and occasionally falling about; as she did, they may have been produced by her falls.

356. To what do you attribute the long cut on her face, on her cheek?—It was shown to me at the time it occurred; the nurse used a mug that was cracked, with a sharp edge to it, and the patient, I think, somewhat resisted when the nurse was giving her food; the patient turned her head suddenly on one side, and was cut with the edge of the mug; the nurse was holding the mug or cup to her mouth.

357. Were you present when she was fed in that way?—No.

358. Did the nurse tell you how she fed her?—She said she was giving her some food out of a mug, when she suddenly turned her head away.

359. Did they tell you she was lying on her back?—No, she was sitting; she was about in the day ward.

360. Do you know in what state she was on her admission into the hospital?—Very weak; she was very emaciated, and was stated to have brought up blood; she was in a very delicate state of health.

361. You have her case?—Yes.

362. How do you account for such a change taking place in the course of 14 days?—I do not think there was such a sudden change; I think the change that took place was perhaps such as might have been expected; in the first instance, when she was brought for admission, there was a great question whether she was fit, according to the rules, which require that no patients be admitted who are weak and paralytic.

363. What was the name of the medical man who joined with you in the *post mortem* examination?—Mr. Taylor.

364. Have you got here the state of her health on her admission?—I have got the book. "H. H., admitted 4th April 1851."

365. When was that entry made?—Soon after her admission; I cannot tell to a day when the entry was made; it was some time between the 4th and the 9th.

366. Why are not the dates kept?—This is an entry made of the general condition of the patient during the first few days of her residence in the hospital.

367. The Commissioners wish to know the date of that entry?—It is never the practice to make it; it is rather the general impression which the case made upon me from time to time, taken from daily observation.

368. You do not put down, then, her state when she first came in?—No.

369. Not the state of the patient when she first comes in?—No. "Very much depressed, inert, and obstinately silent; there is a disposition to great restlessness, and she is extremely obstinate on all occasions; generally refuses her food, and always requires it to be put into her mouth; will neither dress nor undress herself, and resists those who do it for her, so that the assistance of a second nurse is always required to put her to bed, and to get her up in the morning.

She

Dr. *W. Wood.*

7 July 1851.

She pays no attention to anything that is said to her, and does not appear to understand when spoken to; sometimes more obstinate than at others, and on these occasions will stand at the door, and make every attempt to get out; but when the door was opened, she did not appear to have any definite notion of what she wanted, and would wander about without any apparent object. She will frequently stand twiddling and pulling her fingers by the hour together, evidently from extreme restlessness; very restless at night; gets out of her bed and scatters her bedding about the room, but is not noisy; extremely dirty day and night, paying no attention whatever to the calls of nature, but smearing filth all over her body and bed-clothes, and about her room."

370. On what report do you make that statement about the calls of nature?—On reports made to me from time to time, and my own observation of the patient generally. "9th. On visiting the ward this morning, the nurse informed me that the patient could not be induced to take any food, but was in other respects much the same. I took her into the dining-room, apart from the other patients, and after a good deal of coaxing and persuasion succeeded in getting her to take some beef-tea and bread; at the time suspecting that her emaciation might be owing to pulmonary disease, I examined her chest carefully, but could not discover anything particularly wrong. 15th. On getting her up this morning she was unusually shaky, and after three or four hours in the sitting-room with the nurse standing at the window, she suddenly fell down in a fit; was a good deal convulsed, but soon recovered to about the same condition she was in when the fit occurred. 16th. Had an attack of diarrhœa, her bowels being moved five times during the day, but not to any great amount. 17th. The diarrhœa continued, and was now stopped by enema, *amyli c. opio;* the state of her mind remained unaltered. 18th. In consequence of a letter received this morning from her father, she was discharged paralytic, there being no prospect of her recovery; and it appearing extremely improbable that she would survive many days, her family wished her to die at home."

371. What is the reason of the rule that patients shall not be allowed to see their friends for a whole month after their admission?—It is a rule, but it is always in the power of the medical officer to make an exception to it, and we do it continually. We have the opportunity of refusing it on the ground of the rule, if we think it desirable.

372. Who made the rule?—I cannot say. I am not aware whether it is a rule or not.

373. Is it the practice?—It has always been the practice; there may perhaps be no positive rule on the subject, but I found it in force when I went there, and I continue to observe it as a rule.

374. According to the statement of Dr. Taylor, the gentleman who made the *post mortem* examination, there were many wounds, and symptoms not attributable to the picking to which you assign it?—I have omitted to say anything about the appearance of the lower part of the back. She was sore there from abrasion; from wet and dirt, no doubt.

375. What

375. What is your opinion of her treatment; had she been properly taken care of; properly cleansed and washed?—I cannot say.

376. What is your opinion, as a medical man, of this treatment of Miss H.?—My opinion, as far as my knowledge and observation go, is that she was treated with the utmost kindness.

377. To what do you attribute this frightful result in the course of a fortnight?—To the effect of continually picking the skin, which produced these dry sores.

378. You told us just now that the sore on the back was not produced by picking; how do you explain that?—I am unwilling to colour the case one way or the other. We did not turn the body up; it was just lying sideways, and that was the only manner we had of getting to that part of the body. I was not requested to look at her. I found what part did appear was red, and I have no doubt that further on it was excoriated.

379. What do you attribute it to?—I attribute it to continual wet; from friction and irritation of wet things about her.

380. Do you think it was owing to comfort and kindness that she was left in this state of wet and filth?—I think it possible that if she was left in a wet state from day to day for 10 days, with all the washing, you could not prevent excoriation. It is well known that if a patient lies in bed, wash as you will, you cannot prevent the sacking getting wet.

381. She was not continually in bed?—Not during the day; she was sitting up, but not without the means of keeping her up. She was always wet and dirty.

382. Recollect the evidence you are giving; your medical character may depend upon it. Do you mean to tell the Commissioners that you think these symptoms could have occurred in 14 days, with the greatest possible kindness and attention shown to the poor creature?—I state again exactly what I said before, that, as far as my knowledge goes, this patient was treated with the utmost possible kindness. I will not state that as my medical opinion. I am willing to give a distinct answer. I have no motive for avoiding the truth.

383. I ask your opinion, as a medical man, whether the state in which the body of this poor creature was, could have resulted, had she been treated with proper kindness and attention, during the short time of 14 days?—I think it is possible.

384. What, quite consistent with kindness and attention?—I think it is quite consistent. I think so, distinctly.

385. Now attend to this. This is Dr. Taylor's report:—"Friday, 4th April 1851. H. H., who had been under my care about three weeks, with symptoms of cerebral disease, tending to mania, left her home, being admitted a patient of Bethlehem hospital; at the time, although spare, her face and limbs were firm, and she had an average amount of flesh"?—As far as my distinct recollection goes, of the patient, that is not the fact.

386. You then contradict Dr. Taylor flatly?—My impression is that this was not the case.

387. "She being but little thinner than during her ordinary state of health. She had on two or three occasions been violent, but was restrained by the attendants; one day the use of a strait-jacket being

Dr. *W. Wood.*

7 July 1851.

had recourse to. There was then no wound, or abrasion of the skin, about the body.—Friday, 18th April 1851. I was requested again to see her, understanding she was brought from Bethlehem Hospital. Her state at that time was as follows: Her appearance is much altered, being very emaciated; her bones almost protruding through the skin; on the body are several wounds"?—If you will allow me to interrupt you, I think that statement is inconsistent with the fact of this patient being brought into the hospital with an average amount of flesh; for in the interval between the 4th and the 18th of April, if she had not tasted a mouthful of food, there would not have been that amount of emaciation.

388. Not simultaneously with very ill-treatment?—I do not know what that treatment consists of. I am not aware that any ill-treatment was pursued towards her.

389. Here is the statement; "On the body are several wounds?" —My interpretation of that is, that they were not produced by ill-treatment.

390. They were wounds?—I do not understand that anybody says that she had been struck. I believe Dr. Taylor only means wounds produced by the rubbing of the straw; he does not impute them to direct personal violence.

391. "One small one on the right *alæ nasi*, one on the right side of the upper lip: this, I was told by the matron, had been produced by an accident, the patient having been fed out of a cup or saucer which has a small triangular piece broken out of it"?—That is another mistake. The wound is described as being on one side of the nose. This was most distinctly on the cheek. The other is described as on the side of the mouth. Nobody says they were produced by the same means.

392. "These wounds were scabbed, and had no surrounding inflammation"?—That is another proof they were not the result of personal violence; any amount of violence, that would have broken the skin, must have left some mark round the wound of the surrounding *cutis*.

393. Supposing it had been a wound produced by the sharp ends of the straw, it would be the same as picking?—My own impression is, that it was not produced by the straw.

394. "There was another wound, similar to a scratch, on the right cheek, about two-thirds of an inch in length, of the same character as the former; on the outer side of the right elbow were several wounds or abrasions;" were these caused by picking?—They were caused by her falling and knocking herself about.

395. "The solution of continuity of the skin had scarcely taken place. On both hips there were the same appearances, namely, several small wounds, varying in size from half the size of a pea to nearly that of a fourpenny piece;" were these produced by picking? —My own impression is that they were.

396. "Being abrasions, some were covered with a small scab;" did you see them?—On the hips, I did.

397. "The surrounding skin was red, and slightly inflamed, having an appearance not unlike that produced by pressure on a bed-ridden patient"?—This patient never was bed-ridden; she kept about.

398. How

398. How long was she at home before she died?—I do not know.

399. "On the knees, over the patella, and on the outer side, were some small wounds of the same character; also on each ancle, on the outer side, there was one particular wound;" was that produced by picking?—All these marks have to me the appearance of what I have seen produced by constant picking.

400. "On each ancle, on the outer side, there was one particular wound, about one-third of an inch long, and about an eighth of an inch in width; this had somewhat the appearance as if produced by the pressure of something bound round the ancles?"—One wound on the ancle. If this mark had been produced by something bound round the ancle, it would not be on the ancle; it would be above or below the ancle. It seems to me to be conclusive of the fact that the mark was not produced by anything bound round the ancle. The friction of anything of that sort would be either above or below, but not on the ancle itself.

401. "The several wounds were accounted for variously; those of the face have been already alluded to. The matron considered they had been caused by the cut ends and rough portions of the straw on which the patient had lain. Sir Alexander Morrison, whom I had the honour of meeting at the patient's residence, considers they were produced by the patient's knocking herself about." Was she exceedingly weak?—Yes.

402. Did she knock herself about very much?—Yes, and that is quite consistent.

403. Did you ever see her fall?—I have seen her fall.

404. Did you see her knock herself about?—My impression is, that I have seen her, but I will not positively charge my memory. It is quite consistent with the fact of a patient being very weak and knocking herself about.

405. Did you tell Dr. Taylor it would be better there should be little or no fuss about the matter?—I have no recollection of using any expression like that. I remember distinctly drawing up a report of what we had observed, and one part of the report was this, or equivalent to it, that there were no appearances on the body that could in any way have contributed to the death of the patient; presuming, as far as we could judge from appearances, that there was no ill-treatment.

406. Do you remember, on the day of her discharge, her nose bleeding?—I do not remember it. The discharge is the act of the committee.

407. Have any inquiries been made relative to the treatment of Miss H.?—Yes, a very long inquiry.

408. What has been the result?—The result was, that a special order was given, that every injury, however slight, every bruise, every accident, should be immediately reported.

409. For the future?—Yes.

410. Have any of the attendants or servants been discharged in consequence of that inquiry?—No.

411. Are you sure of that?—I am no party to their discharge. I am not aware that some have been discharged; some have no doubt left.

412. What,

Dr. *W. Wood.*

7 July 1851.

412. What, since?—Yes.

413. Have any other charges of ill-treatment or neglect towards patients been brought within the last twelve months?—I have no recollection. There was a charge, but it was never brought forward. A man died in Bethlehem Hospital a year ago or more, and his wife was very much dissatisfied that he was ever brought there. She was very angry with the medical man for recommending his coming. She complained of his being brought there, and said that his death was in consequence of having been brought there; but if ever a man had kind treatment, that man had, for I fed him from my own table eight or nine times a day.

414. Any statement on the part of a patient that she had been ill-treated, would you reject at once as unfounded?—Surely not; on the contrary, I should feel it my duty to attend to any statement of the sort.

415. You did not examine into this case of Miss H.; Dr. Taylor states that when she went home, she said that she had been ill-treated, and you say that it is an unfounded statement?—I never said so. All I said was, my impression, as far as I had an opportunity of observing was, that she had always been treated with kindness, and that I never saw anything to the contrary. As far as I was personally concerned, I took a great interest in her; she was so helpless an object, that I felt pity and sympathy for her, and I paid more than usual attention to her.

416. Did Mrs. Hunter make any report to you, or otherwise speak to you on the subject of this patient?—I have no recollection.

417. Do you remember a nurse of the name Ellen Code?—Yes.

418. Do you know where she is?—No.

419. Was she dismissed?—No, she resigned.

420. It has been stated, that in the event of patients refusing food, there is a practice with some of these nurses of not applying the stomach-pump, but laying them down on their backs, and kneeling on one arm with one knee, and on the other arm with the other knee, and sitting down themselves on them, then endeavouring to open the mouth and force food down their throats while in that position; is that the case?—I cannot say what course may be taken when I am absent. I can only say it is opposed to my feelings, and I have not the smallest reason to suppose such has been the case.

421. Has it ever been stated to you by any patient?—Never; and the best proof is, I would not tolerate such a practice, if I had the slightest reason for supposing it to exist.

422. I want to know if you have ever heard of it from any of the patients?—Never. This very entry in the book will, I think, satisfy you of that as far as I am concerned. The moment I find there is any difficulty, and that the nurses cannot manage them, rather than countenance anything approaching to harshness, that when I find they cannot induce them to take anything, I go myself to the patients, and try coaxing and persuasion until I get them to take what I think necessary.

423. Have you ever heard any complaint made of the misconduct of the nurses in respect of beating or ill-treating the patients, or calling them offensive names?—Occasionally patients have complained that they have been ill-treated in general terms.

424. Did

424. Did they specify any particular nurse as having ill-treated them?—I cannot remember any instance in which any specific charge was brought against a nurse.

425. Was Ellen Code implicated in anything of the sort?—She was on one occasion, but Ellen Code was a person I had no confidence in. I believe she was a person who was harsh with the patients, and she had not sufficient intelligence to discharge the duties of a nurse.

426. You say that complaints were made of Ellen Code?—I have a recollection of some complaints having been made in general terms.

427. What was the cause of her going away; had it any connexion with those complaints?—That is all in Mrs. Hunter's hands; I do not know; I have nothing at all to do with the nurses in that respect.

428. Have you nothing to do in the approval of the nurses?—No.

429. Do not the nurses report direct to you before they report to the matron?—No, except there is anything as regards bodily health or bodily illness.

430. You do not know anything of the frequent changes of the female nurses?—No, it is not part of my duty.

431. Has your authority in any way been diminished since the appointment of the present treasurer?—On the female side it has, because the duty of classifying the patients there has been transferred from me to the matron.

432. The matron has more authority now than she used to have, and you have less?—On the female side that is so.

433. That is, she can remove the patients from one ward to another when she thinks proper without consulting you, or inquiring into the fitness of the proceeding; she can take them from such a ward to such a ward; can she do that?—Yes.

434. Did you ever complain of that to the treasurer, and point out to him the obvious disadvantage that resulted to the patient by being so changed without your authority?—It was a question much discussed, and it was directly ordered by the treasurer that it should be so, but there was no use in my remonstrating with this positive order.

435. He ordered that the classification should be with the matron, and not with you?—Yes, believing that a woman was the more proper person to manage the women than a man.

436. Is the basement a fit place for a person in delicate health?—There is no doubt there is very much want of an infirmary.

437. Is there any other instance in which your authority has been diminished, and the authority of the matron increased by the present treasurer, besides the point of classification?—No, I do not know of any other; classification and general management of female patients, employment and occupation.

438. All this is removed from your supervision, and placed under the care of the matron?—Yes.

439. It used to be under your care?—Yes.

440. But could she not shift a patient into a cell without your authority?—Not without its being reported to me.

441. That is seclusion?—Yes.

442. She could direct that such and such a patient should have more or less exercise, or more or less employment?—Yes.

Dr. *W. Wood.*

7 July 1851.

443. Or should have a straw bed, or should be placed in a dirty ward? —Yes.

444. What was the difference between you and the matron that required the interposition of the treasurer?—It is years gone by, and I have no occasion to state it unless you press it; I would submit that it is a pity to rake it up now.

445. It is necessary you should state it?—When I came to Bethlehem Hospital my predecessor was very much out of health; he was altogether in such a state of health that he was not able to carry out the duties of his office effectually, by which means some portion of his duties fell to the lot of the matron and steward to perform, and, when I came, there was perhaps a natural jealousy to my taking on myself duties which I considered properly belonging to my office, and interfering therefore with the power which they had hitherto exercised. I believe that was the real secret of all the disagreement which existed between us.

446. And then the treasurer interposed?—Yes.

447. When did this difference begin?—Almost as soon as I went there.

448. And that is six years ago?—Yes.

449. When was it that this interposition took place?—It was not in consequence of any difference between myself and the matron that the present alterations of the treasurer took place; it was only his own impression from being connected with another asylum.

450. In the first instance, the treasurer supported your authority? —In the first instance.

451. The predecessor of Mr. Johnson supported your authority? — I really forget what was the state of the law on the subject when I first went there, but the practice had been for the steward to classify on the men's side, and the matron on the female side, the steward having the control of the male attendants, and the matron the control of the female attendants; however, after a time, some rules were drawn up, in which it was arranged that the duties on the female side should not devolve upon me. I forget to what extent; I was associated with the matron and steward in performing that duty. At any rate, the feeling of the present treasurer, when he came, was without any reference, I believe, to the disputes, because I think there was an amicable understanding between the matron and myself at the time. The feeling is, that it is rather better for a woman to have the control and management of the women than a man; I believe that to be the cause alleged for the alteration he directed.

452. You do not coincide in that opinion?—No, I do not; I think there should be one head to a place. When authority is so subdivided, it must necessarily interfere very much with the duties of every one; it is almost impossible to prevent clashing.

453. Is Mr. Johnson also the receiver and accountant?—No, he is treasurer; he is an honorary officer.

454. Is he paid out of the Bethlehem funds?—He is not paid at all; he has only a furnished house to reside in.

455. Does he live in Bridewell?—Yes.

456. Has he any payment from either Bethlehem or Bridewell?— No, it is an honorary appointment.

457. Have

Dr. *W. Wood.*

7 July 1851.

457. Have you brought with you the different documents specified in the summons?—I have got them here (*producing the same*).

458. Do you consider the nurses at present in the establishment effective?—There are several of them who are new, but three or four of them have had no great experience; those who have been some time in the house I believe to be very good nurses.

459. Does the list you have handed in contain the present staff of attendants?—It shows all who have been in the hospital as attendants during the last year. You will find in one column the dates of those who have been discharged.

460. The causes of the dismissal do not appear?—I was going to refer to that. This is a rough copy I have with me; I will give in a more perfect copy afterwards.

[The Witness withdrew.

Mrs. *Henrietta Hunter* called in; and, having been sworn, was examined as follows, by the Commissioners.

Mrs. *H. Hunter.*

461. ARE you Matron of Bethlehem Hospital?—I am.

462. What are your duties, especially in reference to female patients?—To visit them daily, and more frequently if I think it necessary; to see whether every kindness and attention is paid to them by the nurses; to report to the medical man, and to see that the nurses report also, any case of medical necessity that may occur during his absence; to send up their medicines, and various other things that can contribute to the comfort and security of the patients.

463. Are you controlled in your duties, or rather your power, by any superior authority?—The treasurer is our master.

464. What power have you of acting for yourself without reference to him?—Very little power; as to any new orders or directions, he gives them to me; I merely go on the usual routine, as I have stated; if he wishes anything done, or gives directions, I am expected to obey them.

465. How often do you visit the female wards, and at what time of day?—From six or seven o'clock in the morning, sometimes, until past 10 or 11 at night, in cases of illness; only once is my duty, but it is done more frequently when occasion requires it.

466. Do you ever visit at night?—I do.

467. How often?—That depends upon circumstances; if there are cases that require it I visit them frequently; I am there often as late as half-past 10.

468. Do you make extra visits at uncertain times, without an attendant, for the purpose of seeing what is the condition of the wards?—I do not make my visits at any stated periods, but from seven to 10 at night I visit at different hours.

469. Do you ever speak to the patients without the presence of any attendant?—Frequently; sometimes I go into the galleries before the nurses are aware of it.

470. Do you make reports on the occasion of your visits?—No.

471. Not at all?—No report of my daily visits.

Mrs. *H. Hunter.*

7 July 1851.

472. Do you keep any notes of what you see?—If anything very particular occurs I make a memorandum.

473. You could not report it to anybody?—It is not part of my duty; I have never been directed so to do.

474. Do you see every room and personally examine every patient at these visits?—Every room I must see nearly every day; the doors are thrown open to show that they are in a perfectly clean state.

475. What kind of inquiries do you make when you go round the wards?—I speak to every patient.

476. You are sure you see every patient?—It might so occur, as you are aware, that one might escape by having to retire during the time I am in the gallery; but I am so particular in regard to that, that if I recollect not seeing a certain patient I return to the gallery, and say, "Where is such a patient; I wish to see her?"

477. Do you carry with you a written list of the patients, and mark off those you have seen?—I recollect them so well that I did not do it after the first two or three years; sometimes I do take the lists with me, but not very often.

478. You cannot tell then every day that you have seen all the patients?—I think I recollect them all in the different galleries; sometimes I take my list and sometimes I do not.

479. Do you inquire and ascertain whether the patients have any cause of complaint?—I repeatedly ask that question.

480. You repeatedly ask whether they have any cause of complaint?—I frequently ask them that question.

481. Do they make complaints to you?—I have had complaints made on some occasions.

482. What steps do you take on hearing complaints?—I should instantly make inquiry, and if confirmed, I should report it to the treasurer, and ask permission to discharge the servant immediately.

483. Is it not part of the matron's duty to report to the governing power all night visits to the wards?—It is only within the last few weeks that we have had the regulations well defined. With regard to the servants' rules, they have only recently been defined and given to me to distribute within the last week. I immediately had them put in force; and, among other regulations, there is one directing reports to be sent in to the apothecary or matron.

484. Is that quite a recent regulation?—Yes. That regulation was not commenced as soon as it should have been, but I have now commenced it.

485. How do you ascertain whether a patient is subjected to mechanical restraint or seclusion?—Because there is not a portion of the house that I do not examine.

486. You go into all the rooms?—I go into every room; I will not say every night, but I am sure there are not the means of seclusion without my knowing it.

487. How do you ascertain whether a patient has received injury or not?—There are two nurses, one always, and if another can be spared two, to examine the patients previously to their being discharged or taken away.

488. How do you ascertain, after admission, if they have received some injury?—It is the duty of the nurses, if there is the slightest mark

Mrs. *H. Hunter.*

7 July 1851.

mark on the patients, to report to me or the medical man that very instant. It may frequently happen that a patient receives a black eye from another patient.

489. By whom and whose authority is restraint or seclusion imposed?—By the medical man. I have nothing to do with it.

490. Have you any instrument of restraint about the wards?—Not a particle in any part of the house.

491. Do the attendants make a report to you of the restraint or seclusion into which they may have put a female patient?—It is not to me the report is made, but to the medical man.

492. Is not the report to be made by you to the medical man?—No; by the nurse directly to the medical man.

493. Are not all these regulations very recent?—Not all of them; they have been revised and corrected, and more clearly defined. The duties of the different servants and attendants were put into my hands some weeks ago, and I distributed them amongst them.

494. How do you ascertain that all the instances of restraint and seclusion are duly reported to you?—It is not to me; it is to the medical man.

495. How do you ascertain that they have done their duty in reporting them to the medical man; do you make it a subject of inquiry?—If I find a patient in a padded room, or an India-rubber room, I should immediately say to them, "Have you the directions of the physician or resident medical man for this?" and if I saw a patient very violent, I should say to the nurse, "Will you go and ask permission for this patient to be put under restraint?"

496. Have you any and what control over the removal or sick diet of a patient?—I have very little; but I think any suggestion of mine would be attended to. If I pointed out to the medical man that such a patient was not well, he would immediately attend to it.

497. What control have you over the classification, employment, or amusements of the female patients?—I have control over that.

498. Over the classification?—Yes; over the classification and employment, by direction of the treasurer.

499. To whom do you report that classification? If you remove a patient from the upper story to the basement, to whom do you report it?—I do not report it; the physicians and the resident medical man would soon find out that the patient had been removed, and if they thought it wrong they would alter it.

500. You do not report it, then; do you enter it in any book?—I have a book, in which I make entries from day to day; and if I were to put a patient in a different ward I should erase the name from No. 1 or No. 3, or from the basement, as the case might be. It is a book where I put down the names of the patients. I do not say it is my duty to do so, but I record in it if a patient is removed from No. 2 or No. 3, or any other ward.

501-2. Who is that book seen by?—No one. I keep it for my own satisfaction. I have never been directed to keep a book of the kind, but I do it.

503. How does the medical officer know that you have made these changes from one ward to another?—Dr. Wood sees the patients every day, and he must visit them in his rounds.

 504. But

Mrs. *H. Hunter.*

7 July 1851.

504. But Dr. Wood cannot interfere with you; you do as you like?—I will not say that I do as I like. I was directed to take the department, and I took it. I should be sorry to say that Dr. Wood could not direct me, because I would not require his direction. A suggestion from Dr. Wood or the physicians would cause me instantly to change the situation of the patient.

505. That is because you would not be compelled?—I should not consider it courteous to Dr. Wood, as a medical man, to refuse.

506. You have the power?—I do not use all the power I have, but I am employed to make the classification.

507. And in the same way the employments?—In the same way the employment, besides regulating the amusements.

508. The patients sometimes refuse to take their food; how are they treated who so refuse?—Why, the nurse; and if one is not sufficient, two will feed the patient. I have often gone myself, and I know Dr. Wood has often gone, to see a patient of this kind fed. It has occurred that the stomach-pump has been used in extreme cases.

509. Do you receive any reports from the day or night attendants?—I have commenced it, but it is only a recent thing the appointment of night attendants. We had a night watch for some years, but there has been a recent appointment of a person to take it one night, who is relieved by another at two o'clock in the morning.

510. Can you suspend or discharge a female attendant?—Yes, I can; but it is my duty to report the circumstance to the treasurer, and to state the reason why.

511. Do you know whether the medicines prescribed for the patients are duly administered?—No, I do not.

512. Do you trust to the nurses?—They are directed to be administered by the medical man, who gives the medicines to the nurses with directions.

513. But you have no means of knowing that the nurses fulfil their duty in this particular?—No; my only security is having for the head nurse a woman who has been there some years, and in whom we have confidence.

514. In the case of any accident or injury, or sudden illness, are reports made to you?—Yes, certainly. If anything of the kind occurs they go to the medical man first, and then immediately they come to me in every case of an accident.

515. Is it not your duty to look to the personal comforts of the patients, to their clothes and bedding?—Certainly it is.

516. How often do you look into these things on the female side?—I have nothing to do with the male side. Sometimes I may go there two or three days together, and turn up a few beds.

517. What is your mode of doing it?—Turning them up for inspecting them; and I frequently look at the patients' clothing to see if anything is not clean; and I look at the patients in their clothing to ascertain that all is right.

518. What are the circumstances or symptoms that would induce you to remove a patient from one gallery to another, from No. 2 or No. 3, for instance, to the basement?—Why, for violent conduct to another patient, or for being very dirty in their habits, or for using obscene conversation and language. These are some of the reasons why we consider

consider it right to separate them from those who are more quiet. No. 2 gallery is what we call the receiving gallery, and those who are not fit to remain in it we put in the basement.

519. Who is to judge of their fitness?—Well, that is the case.

520. Are you aware that any of the female patients in the basement sleep entirely naked on loose straw, without anything being interposed between the straw and their bodies?—No, I never saw that. I will not say I never saw it, because I did when I first came there.

521. How many years ago?—Eleven; and then I made an application for troughs to inclose the straw.

522. Do you mean to state to the Commissioners that these things never occur now?—For very dirty patients. I will tell exactly how it is. Clean straw is put into the trough and covered down with a blanket, on which the patient sleeps, with another blanket over her. With very dirty patients that is the practice which is now pursued.

523. They being perfectly naked, without a shift or anything on, so that the patient is put to bed perfectly naked?—Oh dear, no.

524. Are you quite sure that this is not the case?—I will not say so upon my oath; it never has been done, because I am not aware of it.

525. It is only recently that the straw has been placed into covers?—It is only a recent thing on the basement.

526. Formerly they used to be put into the straw without any cover?—Yes, with a blanket put upon them.

527. Do you mean a blanket placed between the body of the patient and the straw?—No, not with regard to the patient herself, but the bedding. The patient was presumed to have some sort of clothing or covering about her, such as her flannel or her shift.

528. And a blanket over her?—Yes.

529. She was placed on the straw?—The blanket first on the straw, and then the patient.

530. And then a blanket over the patient?—Yes.

531. In the cases of dirty patients, have you some India-rubber covers made besides the blanket?—Yes, we have some of that description in cases of great violence; a description of blanket and a sort of Marseilles quilting.

532. In a case of that kind, is anything put under them?—One is to cover the straw, and the other is to put over them.

533. Are you aware that any dirty patients are allowed to be laid on the stone floor naked and mopped with cold water?—Never, to the best of my knowledge.

534. How are they washed?—If they are very dirty, warm water is brought to them, or there is a closet if they are fit to be taken to it. It is only a short distance from the sleeping apartment. If they are not fit, warm water is brought to them and they are washed; or if they are not very strong, warm water is brought to them and they are washed and dressed.

535. And they are not taken out and laid on the flags and washed with a mop and cold water?—I never heard of such a thing; if such a thing has been done, it is unknown to me; I would not for an instant have permitted such a thing; it is perfectly unknown to me.

536. Can you state in the most solemn and emphatic manner, upon your

Mrs. *H. Hunter.*

7 July 1851.

your oath, that it is not the case?—Upon my oath, I am not aware of it.

537. To your knowledge, has it never been the case, as far as you know?—I never heard of such a thing.

538. Did you never hear that such a complaint had been made?—Never, as to mopping a patient.

539. Or being thrown on the flags, and then cold water thrown over them, and then their bodies mopped?—I solemnly assure you I never heard of such a thing.

540. Do you remember E. W.?—I do.

541. Did she never complain of the conduct of the nurses?—She never complained to me until she was on the point of going to the convalescent gallery. I closely questioned her in consequence of something that had been said by another patient, and then she said, "I have a complaint to make about a nurse," and she named a nurse of the name of Code. I then said, "I am exceedingly vexed you did not draw my attention to it on the instant, because the woman should not have been one hour in the house; she is now going away in a day or two, and I greatly rejoice."

542. Did not Mrs. W. tell you that women were laid down on the flags and mopped; was that not one of her complaints, upon your oath?—Upon my oath, it was not stated to me; she never told me that.

543. What was her complaint?—She complained, to the best of my recollection, that she had heard opprobrious language used by more than one servant in the basement; and I think she said, "I have seen another patient drawn or dragged very roughly along the gallery." I wanted her to recollect the name of the patient, and she could not.

544. Did she say that she had seen a patient struck with a broom-stick, or with keys?—Never; for I would not have retained the woman an instant; she should never have gone into the gallery again.

545. What did you do when W. made that complaint?—W. was going to the convalescent gallery; when she had gone there, I went down and asked a great number of other patients with regard to this nurse, and there was not one that said she had behaved unkindly to her.

546. Did you ask anybody before her?—Not before her.

547. Or before any other nurse?—Or before any other nurse.

548. You said you were glad that Ellen Code was going away; what did you mean by that?—I was glad when the patient said she had been ill-treated, and saw another person ill-treated; I was happy that she was going, although it was with her resignation, because, of course, there would have been an uncomfortable feeling if she had remained.

549. Would you not have taken some notice of it?—I must have done so; but, as she was within a short time of leaving, I did not do so.

550. Did you ever hear any other complaint about Ellen Code from anybody else?—I did not, except that one of the patients said, that as she was looking one day from the window of No. 3 ward on to the airing ground, she saw Ellen Code take some patients by the hand, and pull them by the hair.

551. What

551. What did you do; did you make inquiry into that?—I could not substantiate it.

552. Did you tell E. W. that if she came back again, she would find things much better?—I do not recollect that I did; I said, "If you come back again, I do request that you will come to me upon the slightest complaint of unkindness upon the part of the nurses, and I will attend to it; all I complain of is, that you have not told me before."

553. Did you ever hear any complaint of the nurses using bad language towards the patients?—No; I have heard patients say, as in the case of a woman of the name of M., that they would have nicknames for them frequently; but over that we can have no control.

554. You said just now, you had heard patients complain that the nurses had used bad language?—Yes; but I could not substantiate it.

555. Did W. complain that the nurses used bad language?—She said so; she named another nurse who had not been with us long, and she said her language was not quite right.

556. What was the name of that nurse?—It was a woman of the name of Turner, who was with us a very short time; she was not strong enough for the situation.

557. Turner was examined at the hospital?—I think she was examined in H.'s case.

558. How soon after that did she go?—I really cannot positively say.

559. Do you know why she went?—She was not strong enough for the situation, neither did I consider her very efficient.

560. Do you know the tendency of her evidence?—I did not hear any blame attached to the nurse particularly.

561. Did you ever hear that her evidence went against the evidence of the other nurses at the time of the examination?—The woman Turner's evidence?

562. Yes?—No; I was present at most of the examinations, but it struck me that Code's did not correspond with some of the others; it struck me so, that Code's did not correspond with the rest.

563. That Turner's did not correspond with Code's?—Most of the nurses differed; when Code was asked one particular question, whether when H. went out there were any bruises, she said "No, I do not think anything was the matter." Of course, that was quite at variance both with the truth and with the statement of the other nurses.

564. Their statement was that there were bruises and scratches?—Decidedly.

565. That there were abrasions, and so on?—There were.

566. Do you not look at the patients' skins now and then yourself?—I have an opportunity very often.

567. I do not ask you about opportunity; do you never do it?—I do it, because I often go down when the patients are being put to bed. I often go through the gallery when they are putting the patients to bed, and they are in the act of putting on their nightcaps.

568. All dirty patients are in the basement?—Yes.

569. Does not your experience lead you to know that dirty patients are apt to have sores and abrasions of the elbows, hips, and ancles?

When

Mrs. *H. Hunter.*

7 July 1851.

When you see these patients, do you not examine them yourself now and then?—Yes, I do occasionally; but I do not make a constant practice of it.

570. At what hour are female patients locked up at night?—The worst class are locked up earliest at night. I think some of the old ones retire to rest between five and six; they are much fatigued and tired; others retire at a later hour.

571. What do you call "a later hour?"—Why, at eight o'clock, in No. 2 gallery, they go to prayers.

572. At what time do they go to bed in the basement?—At different hours; the worst class go to bed early, and the old ones afterwards.

573. What are the hours?—I should think six o'clock, or a little earlier if a patient is ill.

574. How many hours are they kept in their cells; do they stop until six o'clock in the morning, 12 hours?—Not all, but a certain number of the dirty or violent are left.

575. A certain number of patients are placed in separate sleeping cells, where they remain 12 hours without anybody going near them?—No, because there is a nightly watch.

576. Without anybody opening the door to see them; does anybody open the door during the 12 hours?—Not every door, but where the least noise is.

577. Unless there is some particular indication of suffering, a patient is placed for 12 hours in a separate cell?—Yes, unless there is an indication of noise; it is not until nine o'clock in the convalescent gallery.

578. Do you remember Miss M.?—I do.

579. Do you remember what her bodily state was on her admission?—I do not think there were any bruises or sores about her; if you will permit me to refer, I have the report with me.

580. You have reported there were none?—I think I have.

581. Do you know by whom she was examined?—She was admitted on a Sunday.

582. Do you know by whom she was examined?—I do not know; the medical man admits the patients, and then orders them into the gallery.

583. Do you not know what the report was?—No bruises or sores.

584. Do you not know what the report of the medical man was?—No.

585. In what ward was she placed?—In No. 2, receiving ward.

586. When was she removed from that ward?—It might have been in a fortnight.

587. By whose order?—It was by my own direction she was removed

588. Then you gave the order that she should be removed down to the basement?—Yes.

589. What was your reason for doing so?—Because she was so exceedingly dirty.

590. By what medical officer was she visited during her residence in Bethlehem?—By the two physicians, Sir Alexander Morrison and Dr. Monro, and the resident medical man, Dr. Wood.

591. Dr. Monro was ill during part of that time?—Part of the time only.

592. Did

592. Did you inspect her bodily condition?—When she came?

593. No, during the time she was resident there?—No, I did not.

594. In no one instance?—I do not recollect.

595. Do you think it is correct to allow poor dirty patients to remain in this state without looking to them now and then to see whether they have any sores?—It is always reported to the medical man.

596. By whom?—By the head nurse.

597. You seem to pay attention to the convalescent wards and the several galleries where there are people who require little attention, and these poor unfortunate creatures who are not convalescent are not regarded?—No. 2 requires great attention.

598. Were you at any time aware of Miss M.'s bodily condition?—I was aware from her dirty habits that there were marks upon her.

599. That was reported to you?—Yes.

600. Did you report to anybody that such was her state?—No, I did not report it; it was not my duty to report it to anyone.

601. Looking at the responsible situation you occupy, surely it is your duty to make known to the authorities everything that is wrong. If anything wrong comes to your knowledge, it is your duty to report it?—Decidedly it is, but here is a natural consequence.

602. A natural consequence is what you ought to have reported?—It was reported to the medical man as well as to me.

603. How do you know that?—Because the nurse told me.

604. Did the doctor tell you he knew it?—No, he did not.

605. When the report was made that there were sores on her body, did you examine her?—No.

606. Do you recollect Miss M. having a black eye?—I do not recollect anything about it.

607. Do you remember her having a disorder called "prolapsus"?—I do; it was told to me.

608. By whom?—By the nurse; she went to the apothecary, Dr. Wood, and he gave her directions what to do whenever it occurred.

609. Do you recollect her having swollen legs?—Yes.

610. All secondary signs of a bad bodily condition; do you know whether remedies were applied?—So far that she was put upon a sick diet; she had stout, and various other things.

611. Do you know whether she was laid upon loose straw without anything being interposed between the straw and her body?—She lay in the back basement, decidedly.

612. At the time when loose straw was used?—It must have been.

613. Do you know whether she lay upon loose straw without anything being interposed between the straw and her body?—Do you mean the clothing next to her own skin?

614. No, a blanket?—No, never to my knowledge.

615. In putting a blanket over the straw, a patient moving about would easily move it?—Very easily.

616. So that if a patient were restless, she would, in fact, be lying upon loose straw?—She would.

617. Do you know what state of cleanliness she was in of a morning, and the mode adopted by the nurses of cleansing her?—She was almost every

Mrs. *H. Hunter.*

7 July 1851.

every morning in a dirty state, and they brought water, or took her to the closet, where there is both hot and cold water, and there washed her; more frequently they brought water to her.

618. That you know by their statement; you did not see it?—No, I do not go down to see the dirty patients washed of a morning.

619. You never see them washed of a morning?—I see them when they are bathing the patients occasionally.

620. It would be a good thing for you to recollect what a responsible situation you hold: it would have a beneficial effect if you brought the weight of your authority to bear upon all this. Why do you not go?—It is not my habit, and I cannot effect it.

621. It is not your habit: I hope it will become your habit: you hold a most responsible situation?—I am aware of it.

622. What comfort had this poor girl M. during her illness?—As I described; she had sick diet. If arrowroot, or anything of that kind, was directed by the medical man, it was given to her under their directions, and entered in a book.

623. Do you know whether the nurse gave the things that were ordered?—I frequently go down to see, when they do not expect me coming round.

624. Have you reason to think these things were administered?—To the best of my knowledge.

625. And you say the same of the medicines?—I do not attend to the medicine: it is the medical department.

626. Such things as wine and porter are trusted to the nurses to give?—Yes.

627. If she was to be fed with wine or porter the nurse might drink it?—I do not mean to say that never has happened; but I go round and see the sick patients at dinner repeatedly.

628. Was Miss M. examined upon her discharge?—Yes.

629. By whom?—I think it was by the woman Cliffen.

630. What was the state of her body?—Her back was very red; we supposed from her dirty habits, or perhaps from the rubbing of the straw.

631. What they call scalding?—Something of that description; and her legs were swollen.

632. Any punctured wounds?—I think there were; and some few bruises were reported.

633. Do you remember a girl of the name of H.?—Yes.

634. What was her bodily state upon admission?—So very emaciated that it was a question whether she was to be taken in. I saw her myself at the moment of her admission, and she was a most emaciated creature.

635. Did you see her stripped?—I have seen her stripped.

636. But did you see her stripped upon admission?—No, not upon her admission.

637. How then could you say she was emaciated?—Because from her hands and neck. We took down the back of her gown the first time I went into the gallery, hearing she had been taken in; and I saw the poor creature's arms, and also her legs, as far as I could see.

638. How soon after she was brought there?—She was admitted about

about half-past eleven; and the very instant the committee met, which was about 12, I went round the gallery.

639. That statement does not square with the statement of the medical man who saw her before she was sent to Bethlehem; her own medical man?—In what respect?

640. She was not thin upon the whole: he says there was an average quantity of flesh?—That was a mistake entirely.

641. Did you see any bruises or other sores upon her?—Here is the report I made at the time: "H., free from bruises and sores."

642. Why was she sent to the basement story?—She was so excessively dirty.

643. Do you know how she was treated; did she lie upon loose straw?—Yes.

644. Was anything interposed between the straw and her body?—A blanket and her own clothing.

645. Do you know how she was washed in the morning?—With very great care in the morning, for upon more than one occasion I saw them.

646. Did you ever see her in bed?—I do not recollect seeing her in bed.

647. Then you cannot, from your own knowledge, say that there was any clothing upon the bed?—I do not recollect seeing her in bed. A part of the time, a week or ten days before she went away, I sprained my ancle, and I was not able to go round the gallery during that period.

648. You can say nothing yourself?—No. I might not have been away from the gallery so long as that, but for some days I was absent.

649. You never saw her in bed?—No.

650. Has any inquiry been made relative to the treatment of Miss H. in the hospital?—Yes.

651. What has been the result?--There was a long investigation before the committee.

652. Has any servant or attendant been discharged in consequence?--Not one.

653. Did any servant leave immediately after the inquiry?--Two had resigned their situations previously, and went away, I think, soon afterwards.

654. Who were they?--Code was one; she had resigned previously to it.

655. And the other?—The other was a woman of the name of Turner, who was not equal to it, and not efficient.

656. Have any new regulations been made in consequence of that inquiry?—I think there have been a few; the beds have been all enclosed; and in consequence of the suggestions of the Commissioners (I do not know whether I ought to say that) sheets have been put in the basement.

657. Is that since the Commissioners were there?—Since they were round. I considered it my duty to express what I had some years ago expressed, and it was done immediately.

658. What was the bodily state of H. when she went out of the hospital?—She had some appearances upon her back.

659. Had

Mrs. *H. Hunter.*

7 July 1851.

659. Had she not other appearances besides?—She had bruises.

660. Had she not a cut upon her face?—That cut upon her face I will explain; I came into the gallery the instant after it occurred; the nurse pointed it out; she said, "Unfortunately I was giving the poor girl some food from a mug in which there was a little bit out, and she turned her head suddenly round and cut her face."

661. Who told you that?—Cliffen. I had seen two of the nurses carrying her like a child to bed, in her weak state.

662. Could she sit up?—I believe she never kept her bed for a whole day; it was considered better for her to be up; it was with very great difficulty we persuaded her to take anything.

663. Have you any easy chairs or sofas?—We have no sofas; and there is a deficiency of easy chairs.

664. No chairs with backs?—We have two or three.

665. No comfortable reclining chairs?—No. I believe those are to be ordered.

666. Did you see H. when she left the hospital?—I did.

667. Do you know what caused her nose to bleed?—No; but we fancied it might have been a little breaking out of the nose; she picked herself very much indeed.

668. Was it reported to you that she had picked herself?—I have often seen her myself.

669. There were no symptoms of picking before she came?—It was not described to us.

670. She did not show any signs of picking before; the picking must have commenced afterwards?—Neither was she paralysed when she came, but she became paralysed.

671. Have any other charges of ill-treatment or neglect been brought within the last 12 months?—I do not at this moment recollect any.

672. Have you ever had cause of complaint stated against any and which of the nurses during the time of your being matron?—Upon several occasions, when I have found neglect, I have discharged the nurse instantly; and if I have only had complaints made of what I considered unkind treatment, I have immediately requested permission of the treasurer to discharge the woman instantly.

673. Did you ever hear such a statement as this: that nurses sometimes, in order to force a patient to take food, would lay her upon her back upon the ground, sit astride upon her chest, and kneeling upon her arms, force the food down her throat?—No.

674. You never heard of it?—I could scarcely credit it to be possible; the woman would be choked.

675. Did you ever hear it stated?—I never heard such a thing.

676. W. did not tell you that she saw it?—No.

677. Do you ever believe the nurses use offensive language to the patients?—I have gone at all times, and I have never heard of it. I will not say never, because some years back I did hear a servant make use of oaths several times, and I discharged her.

678. Do you remember a young woman who left the hospital soon after W. went away; a patient who lived in the New Road?—I do not know where they live.

679. She went away recovered, about a week after W.?—I have

so many go away, that unless you were to tell me the name I could scarcely answer. With regard to the place, it is a very unusual thing to hear where they live. I shall be most happy to attend to any suggestion; my wish and aim is to do everything that is humane and kind.

Mrs. *H. Hunter.* 7 July 1851.

[The Witness withdrew.

Sarah Burrowes called in; and, having been sworn, was examined by the Commissioners, as follows:

S. Burrowes.

680. DO you remember Miss M.?—Yes.

681. Were you a Nurse at that time in Bethlehem Hospital?—Yes.

682. In what ward?—In No. 1.

683. Do you remember in what state Miss M. was when she first came; did you examine her?—The head nurse did that.

684. You did not?—Not when she first came; when patients first come they go into No. 2; I cannot say how long she was up there, whether it was a few days or a fortnight, or how long.

685. How soon did she come to No. 1?—I cannot say.

686. No. 1 is called the basement?—Yes.

687. Did you see the state in which she was when she came down to No. 1?—Yes.

688. Did you see her with her clothes off?—Yes.

689. Had she any wounds or bruises?—She had some bad places about her; sore places, I mean. I do not remember whether they were sore places or merely red places.

690. Had she a great many of them on her body?—Yes.

691. Are you sure she had a great many?—She had several.

692. Do you recollect her having a black eye?—No, I do not.

693. When she was in the basement did she lie on loose straw;—Yes.

694. Was she in the back basement?—Yes.

695. Was there anything between the straw and her body?—Yes.

696. What?—A large thick blanket, quilted.

697. Did that remain there all night?—Yes; I used to find it when I unlocked the door. I did not always unlock it.

698. Did she sleep with a night-shift on?—No.

699. No kind of shift?—No.

700. Perfectly naked?—Yes.

701. How was that?—She was very dirty.

702. Was it the order that she should have nothing on?—They generally sleep without.

703. Do the patients in the back basement sleep without night-shifts?—Yes.

704. Is that merely a regulation of the ward, or an order of the medical officer or matron?—I do not know.

705. Is it the custom of the ward?—I believe it is; I was there only a short time.

706. How many of them, at that time, were in that state?—Most of them down in the back basement.

707. How many were there?—Fifteen.

708. Do

S. Burrowes.

7 July 1851.

708. Do any in the front basement sleep in that state?—I do not know.

709. How long were you in the basement?—Seven months.

710. During that time was it the practice?—Yes.

711. That is to say, the practice was to strip off all the clothes, and put them on this blanket stark naked?—Yes.

712. Did you frequently find them on the straw without the blanket?—No; I frequently found them with the blanket under them.

713. Sometimes the blanket was taken away?—Very seldom.

714. In what way were the dirty patients washed?—We used to get a pail full of warm water, and wash them.

715. At the bed-side, or did you carry them away?—There is a closet close to the bed-room where we get hot and cold water.

716. Did you ever see a patient, during the time you were there, taken out of a bed-room and mopped with cold water in the gallery?—No.

717. Upon your oath?—I did not.

718. You never saw a patient mopped?—No.

719. Never washed with a mop?—I am sure I never saw them washed with a mop.

720. Did you never hear a complaint that it had been so?—No, I did not.

721. What did you wash them with?—A house-flannel or a piece of blanket.

722. Did you wipe them?—Yes.

723. Always?—We used to have cloths to wipe them down.

724. How many cloths?—We used to keep cloths and change them in the closet.

725. You did not dry them?—We used to have cloths to dry them.

726. Was it not the custom to put on their clothes without drying them at all?—I did not do it.

727. Have you not seen it done?—No.

728. Did you ever hear of it being done?—No.

729. Did you never hear of any complaint that it was done?—No, I never heard of any complaint.

730. Did you ever see any violence used?—No.

731. Did you never see any nurse strike a patient?—I never saw a nurse abuse a patient while I was in the gallery.

732. Did you ever see them at any other time?—I did not see anything of the sort.

733. Did you never see a nurse strike a patient with her fists or keys?—No.

734. Or call them bad names?—No.

735. Are you sure you never saw a patient struck with keys?—I never saw them struck with keys.

736. Did you never hear a nurse call the patients bad names?—No, I never did.

737. Have you heard the patients call one another bad names?—The patients frequently call each other bad names; and other people too.

738. What did they call Miss M.?—I have heard several patients call her "Black Sall."

739. Do

739. Do you remember what patients?—No, I did not take notice; I know several used to call her that name. *S. Burrowes.* 7 July 1851.

740. Do you recollect the girl H.?—No, I did not know her.

741. Did you see M. the day before she went away?—I do not remember the day she went away.

742. Were you in the ward when she left the hospital?—I was.

743. Do you remember how she was; whether her nose was bleeding when she went?—I did not see her when she went away.

744. Were you in the habit of taking her out in the morning up to the time she left?—Sometimes.

745. Do you remember the state of her body the last time you saw her?—No, I do not.

[The Witness withdrew.

Elizabeth Cliffin called in; and, having been sworn, was examined by the Commissioners, as follows:

746. Are you a nurse at Bethlehem Hospital?—Yes. *E. Cliffin.*

747. How long have you been so?—I have been there 10 years, or rather better; seven years this time, and three before.

748. In what ward are you at present?—In the basement ward.

749. How long have you been in that ward?—I have been there near upon 10 years.

750. What rules have you for your guidance?—I have a book of rules.

751. How long have you had those rules?—I think it was in February.

752. How many other attendants are there in the ward?—Three.

753. Are they under you or over you?—Under me.

754. What are their duties?—Their duties are to assist in getting up the patients, and cleansing the rooms; to assist in every way in looking after the patients, or to assist any of the other nurses.

755. When a patient is brought into your ward, do you examine her person?—Yes.

756. To whom do you report the result of what you see?—It is very seldom I have them brought into my ward when they are first taken in, unless they are very violent indeed, or very dirty.

757. Are they taken to No. 2.?—Yes.

758. When a patient is brought down to No. 1, she must be stripped?—Yes.

759. You have the opportunity of examining her person?—Yes.

760. If you see anything, to whom do you report it?—To the doctor.

761. How many persons are there in your ward?—Forty-three.

762. Is that the average number?—No; I have had as high as 52; I have charge of the whole of the patients in the day time.

763. Of what class are these patients?—The very worst.

764. What kind of bedding is there in use at present?—There is flocks for the best and cleanest patients in the basement, and straw for the dirty; I think there are 29 flock beds.

765. How long have these been in use?—The flock beds for the cleanest in the different basements have been in use these four years,

E. Cliffin.

7 July 1851.

766. You have been there 10 years, you say?—Yes,

767. Did any patients formerly sleep on loose straw without a blanket between them and the straw?—I never knew that; there was straw in the front basement when I was first there; straw throughout the basement.

768. When these patients are very dirty, are they stripped naked and put into bed?—Some of them if they are so very dirty.

769. If they are very dirty they are stripped and put to bed stark naked?—Yes, if they are dirty.

770. That is to say, all these 15?—I have many dirty patients besides the 15.

771. At all events, these 15 and some besides are stripped naked as they were born, and put into bed?—Yes.

772. How many altogether are so placed?—I think it is 16 at present.

773. Sometimes they are left all night without any covering at all?—No, I have never known that.

774. What have they on them?—They have thick blankets; when they are dirty, a woollen blanket quilted on canvas.

775. When are the patients sent to bed?—The worst are sent to bed from six to seven, or from seven to eight; or if they break out, by chance we may put them away before.

776. Do you visit these patients at intervals?—Not in the back basement; I am continually in the ward up to bed time, unless I am called out.

777. Many of these patients are left from seven at night till eight o'clock in the morning?—There are two nurses who are continually down in the back basement; I am in the front.

778. Do you go into the cells?—Not into the cells.

779. Is there a day room at the corner?—Yes.

780. At this time of the year are they shut up as early as six o'clock?—No; unless one or two by chance.

781. What time do you shut them up?—Near upon seven.

782. Whose duty is it to wash and bathe the patients?—We all assist.

783. How do you manage that?—Why, in general there are one or two washing, and others wiping them and taking them to bed.

784. How often are the patients bathed and washed?—They are bathed once a week.

785. How often are they washed?—Every morning they are washed and combed.

786. How do you wash a dirty patient?—We take a pail of warm water and wash them with a flannel.

787. Do you strip them naked?—They are naked.

788. Do they stand up or lie down?—Just according which way we can do it best.

789. Suppose they were to lie down?—Then we should turn them over and do it.

790. On the stones?—No, on the bed; on the straw.

791. Do you change the straw afterwards?—All the dirty straw is taken out.

792. Do you change the straw before washing or afterwards?—When

E. Cliffin.

7 July 1851.

When they come out of bed dirty we wash them before we take the dirty straw away.

793. Did you ever use such a thing as a mop?—No.

794. You never did?—I have used a mop in cleansing the stones.

795. In cleansing the patients?—I never saw one used.

796. What do you use?—A flannel.

797. When a patient becomes excited and violent, what course do you take?—Put her into a room.

798. Have you the power of employing mechanical restraint, such as putting on a strait-waistcoat or fetters?—No, we have not.

799. You put them into a room, you say?—Yes.

800. What do you do on putting them into a room?—We report it to the doctor.

801. Until very lately had you strait-waistcoats and manacles, and other things that you could use when you pleased?—Yes; I think from 12 to 18 months there have not been any used.

802. Have they been taken away from you?—Yes.

803. What was the practice before that?—There used to be different restraints used then.

804. You used to restrain the patients whenever you thought fit?—We did at first, when I went to the hospital; but not of late years, unless we had an order.

805–6. What do you mean by different restraints?—Canvas gloves, strait-waistcoats, hobbles, or wrist locks.

807. None of those are used now?—No.

808. Do you remember a nurse named Ellen Code?—Yes.

809. Where is she now?—I cannot say; I have not seen her since she left.

810. Was she discharged?—No.

811. Why did she go away?—She gave in her resignation to leave; she wished to leave.

812. Was she under you?—Yes.

813. Did you ever see her strike a patient?—I never did.

814. Never see her use her fists?—No, I never did.

815. Nor see her use keys to strike a patient?—No.

816. Never hear her use bad language?—No, I cannot say that I have.

817. Did you ever hear any complaints of her?—There have been complaints since she left, and so there were after she gave in her resignation.

818. By whom were the complaints made?—One was made by two of the patients.

819. What were the names of the patients?—One was a patient in No. 3 ward.

820. What was the name of the patient?—E.; she complained to the doctor, and the nurse also complained of seeing her do something, out of a window, to a patient.

821. What was the nurse's name?—That I cannot tell you.

822. Who made the complaint?—The nurse and patient made the complaint. The nurse was not in the hospital long; she was in No. 3 ward; I forget her name.

823. Was it Turner?—No.

E. Cliffin.

7 July 1851.

824. Was the other patient named W.?—I do not know.

825. Did you ever see a patient naked, on the ground, and washed with a mop and a pail of cold water?—I never did.

826. Did you ever see a nurse, when a patient refused her food, kneel or stand astride over her, and force the food down her throat while she was lying on the stones?—No.

827. You are quite sure of that?—I am quite sure of that.

828. What was the subject of complaint that was made against this nurse?—I do not know what complaint Mrs. W. made; it was made to Mrs. Hunter, and Mrs. Hunter told me that she had been making a complaint.

829. Did you never hear a complaint made about a patient being washed in this way?—I never did; I have never seen it, and never heard speak of it; I do not see them all washed.

830. Could they have been washed in that way without your knowing it?—Oh yes; because there are several doors from the back basement to the front.

831. Do you remember Miss H.?—Yes.

832. Did you ever hear it stated that Miss H. had been treated in that manner?—I have heard that her father made a complaint.

833. From whom did you hear it?—We were had before the committee.

834. That was one of the accusations?—Yes.

835. Was an examination held by the governors?—Yes.

836. What was the result of it?—I believe the governors were well satisfied; they did not give me to understand any other.

837. Was Miss H. under your charge?—Yes.

838. In the basement?—Yes; she came in on a Friday.

839. Did you see her state of body when she came?—Yes.

840. What was it?—Her bottom was about as red as if she had been confined; she was in a bad state from wet. She was very dirty indeed, and likewise her clothing was very dirty.

841. That was the state in which she came into your ward?—That was the state in which she came into the hospital.

842. Did she come straight to you?—She came straight to me, because she was so very dirty; myself and the other nurse took her down when we received her from the committee.

843. Are you sure she was never in No. 2?—Not one night in No. 2 gallery; I helped to take her down into my ward, and I never left her until I went to receive other patients.

844. Was she placed naked on the bed?—She was the first night.

845. When you saw that redness, did you examine it two or three times?—Yes.

846. To see whether it was getting better or worse?—It did not get worse.

847. What did you apply to it?—I did not apply anything; I was not ordered; she was continually being wet.

848. You, who have been so long a nurse looking after dirty patients, must have seen again and again that when patients are laid down without being carefully dried they get what we call "scald"?—It was not so bad as that; I have seen scalds.

849. It

E. Cliffin.

7 July 1851.

849. It gets red at first, and, if not attended to, it gets into a raw?—Yes.

850. Under whose special charge was Miss H. placed?—She was in my ward, and she was in a day ward under a nurse named Code.

851. Did Miss H. sleep without her clothes?—Yes; she was very dirty.

852. Was she feeble of body?—She had very bad health; they reported that she had broken a blood-vessel twice.

853. Was Mrs. Hunter aware that she slept without any clothes at night?—Yes, she must have been; she could not be "off" it; it has always been the rule for dirty patients.

854. To have no shifts on?—Yes; and I have had no fresh rule given to me.

855. Do you think Mrs. Hunter ever saw the patients in bed in the basement at night without any shifts?—They were covered with blankets, but they were without shifts.

856. Has she ever given you any orders to put them to bed without their shifts?—It was a rule when I went there, and I have had no fresh rule.

857. Would Mrs. Hunter know whether the shifts were used by the number supplied by her to the ward?—Yes.

858. She names the number?—Yes.

859. And takes care of the clothes?—Yes.

860. Do you put shifts on them in the day time?—Yes.

861. After the washing do they carefully dry them, and so on?—Yes.

862. This poor girl, with this redness on her rump, could not sit down very well?—She very seldom did.

863. What did she do?—She used to go on her knees and elbows.

864. On the floor on her knees?—Yes. We would set her up a dozen times a day, and if we laid her on the side of the bed she would fall off on to the ground. Her elbows were quite hard from it. Her bed was the only thing that we could lay her on. The first time I laid her on the bed I perceived she had a fit. I had hardly left her 10 minutes when she was on the floor again.

865. Had she several fits?—I fancy it was a fit.

866. Was that the only one you saw?—Yes; it was like an hysterical fit.

867. Did she appear weak when she was up?—Very weak.

868. Had she an easy chair to sit on?—We had none.

869. Do you know the disease called "prolapsus"?—Yes.

870. Had she "prolapsus"?—No.

871. She could not sit on the stone floor?—It was in the day room; there are boards there in the sitting room. The patients are taken from the flagstones in the day time.

872. You say there had been some complaints made against the nurse Code?—Yes.

873. You say a complaint was made by a nurse and two patients of the names of E. and W.; what complaint was it?—I cannot tell what complaint W. made. It was made to Mrs. Hunter, and Mrs. Hunter told me that W. had complained after she left my ward.

874. What did she complain of?—Of Code ill-treating the patients.

E. Cliffin.
——
7 July 1851.

875. How?—Mrs. Hunter did not tell me.

876. What did E. complain of?—That she saw, out of a window of the ward No. 3, a nurse lay hold of a patient in the airing ground by the hair.

877. That was E.?—E. and the nurse together.

878. What was the state and condition of her body when she left the asylum?—She had a place on her knees where she had picked; she had one on each ankle, and several places on her body from the scratches of the straw and sores; she had one here (*the Witness pointed to the place on her own person, the face*). But that one was an accident; I did it myself.

879. You say there were scratches from the straw; what makes you say that?—She used to get into the midst of the straw.

880. Did she exhibit any tendency to pick her body?—She picked this (*the face*), otherwise it would have been well.

881. She did not pick her body?—I never saw her pick her body. When she was placed in the straw, she would get out on to the stones, and I had her moved from there to the end room.

882. What room do you call it?—An end room.

883. She was not in the habit of picking herself only in that particular place?—She picked this place here (*pointing to it*).

884. She was not in the habit, then, of picking herself?—I do not know what she did at night.

[The Witness withdrew.

Keziah Saunderson called; and, having been sworn, was examined by the Commissioners, as follows:

K. Saunderson.
——

885. ARE you a nurse in Bethlehem Hospital?—Yes.

886. How long have you been so?—Between five and six months.

887. In what ward are you at present?—I am in the basement ward.

888. Are you under Cliffin?—I am.

889. Do you recollect Miss H. being there?—I do.

890. Was she under your charge?—Yes, I had to assist in getting her to bed and up in the morning.

891. In what state was she when she came to you?—She appeared in a state of very bad health, and very bad in her mind.

892. Had she any sore on her body?—Yes, she had some, and two on her foot and ankles.

893. But not about her body generally?—No.

894. Had she any about her ankles?—Yes, about her ankles there were some.

895. When she came?—Yes.

896. Are you sure of that?—Yes, to the best of my recollection, and she went away with those.

897. Had she those when she came when you first saw her?—Yes, she had marks on the ankles.

898. When she first came into the ward?—Yes.

899. Did you see her naked?—Yes, I assisted in putting her into a bath.

900. Had

900. Had she any on her elbows?—I do not remember that she had any on her elbows.

901. Nor any part of her body except the ankles?—I think she had some slight marks on her face.

902. Did you ever see her washed in the morning?—Yes, I have.

903. Describe how you wash the patients; how do you begin?—When they are able to turn to be washed, we begin to wash the face and neck; but she was not a patient of that description.

904. Tell the Commissioners how you washed Miss H.; did you use hot water?—Yes, we had always a pail of hot water.

905. How did you begin?—It always took two nurses to hold her; she was a very irritable patient. We got a pail of warm water, and with soap and a flannel we washed her all over.

906. With your hands?—Yes, and the flannel; and then took a cloth and dried her.

907. Dried her well all over?—Yes.

908. Everywhere about her?—Yes.

909. How was she placed during this?—We always had two to hold her; either a nurse or a patient, or two nurses; she could not stand, she was so emaciated, without.

910. She could not stand without assistance?—No.

911. Did you dry her feet?—Yes.

912. And then her hair?—We combed her hair throughout, and put her shift on, and dressed her. It always took two or three to manage her.

913. Did you ever see her washed in the gallery?—No, I did not, when she was at the bottom end of the gallery; the nurse has gone away who had the washing of her.

914. Who was that?—A nurse of the name of Code.

915. Did you ever hear that the nurse had thrown her on the stones, and mopped her with cold water?—No, I never did.

916. You never heard of that?—No.

917. You never saw it?—I never saw it, and I must have seen it.

918. Did you never hear of it until this moment that I told you of it?—No, not of the patients. I have heard the nurses say one to another, in passing remarks, "You have been using the mop as they do in the basement." I never saw them used; they never have been used in my time. It was a remark that one nurse made to another; not my own, but the nurse in No. 4.

919. How came the nurse to make that observation?—I do not know; it was a little disagreement amongst the nurses. It was not said with any bad intention to me.

920. You heard one nurse say to another, "You have been using the mop"?—I heard one nurse say to the other, "Have you been using the mops, as they do in the basement?" The nurse in No. 4 thought herself better than the basement nurse.

921. What was the name of the nurse?—I do not know; it was a new nurse, in No. 4; she was there before I went there.

922. Is she there now?—She is there now.

923. Will you swear you do not know her name?—I will try to recollect her name; it is rather a strange name.

924. When did you hear this talked about; how long ago is it since you

K. Saunderson.

7 July 1851.

you heard this conversation between the nurses?—About a couple of months.

925. Who were the nurses that she was speaking to?—Mrs. Turner was one whom I heard it said to; there were two; one was Susan Turner.

926. What were the words used to her?—"We are not basement nurses; we don't use mops as they do in the basement." I took very little notice of it; I had never seen them used; I thought it was a little spite one against another.

927. Are you quite certain that you have never used a mop?—No, neither have I ever seen them used; I keep in the bottom basement during the time the patients are up; I am obliged to look after them, or they would injure themselves.

928. Did Miss H. complain to you of any ill-treatment that she had received?—No, she was not able to do so; I never heard her say anything, except "Oh, my mother!" I don't know that I ever heard her say anything more than that; sometimes, if I put food to her mouth I was obliged to take it away.

929. Did you try to induce her?—I don't know that I fed her more than once.

930. You never saw her fed?—No, I had not anything to do with it.

931. Down in your ward are the dirty patients put to bed naked?—They are.

932. All of them?—Yes, all of them.

933. How many?—Fifteen.

934. Are they sometimes put on the straw without any blanket being placed between them?—No, I never put them on the straw; I always double the blanket, and lay them on the blanket. In the morning I frequently find the straw out of the bed, and the strong blanket torn.

935. In the case of Miss H., did you ever find her in the straw in the morning?—Yes, I have frequently found her in the straw.

936. Did you find her body made sore by means of the straw?—Yes, apparently it was so by getting out of bed and lying amongst the straw, and sometimes I have removed her into the India-rubber room. She would not remain in bed, and when I could not keep her in bed I used to move her to the India-rubber ward.

937. Do not the nurses sometimes lose their temper; sometimes have you not seen them use the broomstick and their fists?—No, I never saw a nurse use a broomstick.

938. Have you seen them use the keys?—Occasionally the patients get hold of the keys, and you cannot get them away without a struggle. I have myself seen them try to loosen their fingers.

939. Have you not seen the nurses use their fists, and give them a good blow with the keys afterwards?—No, I cannot say that I have.

940. When you saw them loosen their fingers?—They may perhaps tap their fingers. This morning I had my cap torn by a patient, and three nurses could hardly get her off; she had got so fast a hold of my dress I could not loosen her no how. It was a patient of the name of B.

941. Have

941. Have you never heard of the nurses striking the patients?—No, I never heard of it.

942-3. Do the patients never complain?—Oh, they will frequently do that when they are not struck.

944. Did you never hear Ellen Code complained of?—Well, I have heard patients complain a little of her.

945. What patient have you heard complain of her; do you remember Elinor W.?—Yes, I do.

946. Did she complain of Code?—Yes, I have been given to understand so by the nurse.

947. Was Code ever noisy in her language; did she use rough words sometimes?—Yes, sometimes, when she was very much excited; she had a very trying place. I have been a short time in the place, and I find it is a very trying one. She did get very much excited at times, and I have no doubt she may have used some language that was not proper. I did not like it when I first came, and I shall be glad when I get away, when Mrs. Hunter is suited.

948. What sort of language have you heard used?—I cannot remember.

949. Coarse expressions?—Yes; she got very much excited at times, and you cannot help it among that kind of patients.

950. Had she anything to do with H.?—Yes; in the day time, she had to attend her; she had her in her ward.

951. Did you ever see her feed her?—Yes, I have.

952. How did she feed her?—I have seen her take up a knife and fork to cut her food, and feed her with a spoon.

953. Did you ever see her feed her with a cup?—No; it was the head nurse who used a cup.

954. Did you ever see Cliffin place her upon her back and kneel upon her?—No.

955. Or Code?—No, I never saw it.

956. Does the matron ever come into the ward at night?—Occasionally she comes round late in the evening.

957. Does she come after nine o'clock at night?—I have never known her so late as nine o'clock at night, or if she has been round so late, I have not seen her.

958. She has not been down in your part?—No.

[The Witness withdrew.

[Adjourned to Thursday next, 10 July, at One o'clock.

10 *July* 1851.

THE EARL OF SHAFTESBURY IN THE CHAIR.

Edward Thomas Monro, M.D., called; and, having been sworn, was examined by the Commissioners, as follows:

E. T. Monro, M.D.

10 July 1851.

959. WHAT office do you hold?—Physician to Bethlehem Hospital.

960. Will you state what are your duties and powers?—My duties are to visit the patients four days in each week, to attend the committee upon Friday morning, for the admission and discharge of patients, to make out the reports at Christmas, to receive pupils, and to read lectures to them; those are my principal duties.

961. What are your powers connected with those duties?—I have the power of directing any medicine or food that I think necessary, and I have the power of advising the committee upon the admission and discharge of patients.

962. Have you any power over those servants?—I have, no doubt, a certain power over the servants, but it has seldom passed through my hands; it has been under the direction of the inferior officers.

963. In short, as a medical man, you are not restricted?—Not at all.

964. Have you the power of advising the committee as to any general improvement you may consider necessary in the management of the hospital?—I occasionally do, and in the Christmas reports more especially; there are suggestions in the last Christmas report of some little importance.

965. How often do you visit the hospital?—Four days in every week.

966. How long do you stop at each visit?—That varies considerably; sometimes three hours, sometimes two, and sometimes one; it may average two, perhaps.

967. Do you inspect all the rooms of the hospital?—I do not see every room, every time; there are about five hundred rooms; at this time of the year they are all of them empty, or at least very few occupied; the patients are all out of doors in the summer time and the galleries are empty.

968. Are there any special rooms that you make a point of inspecting?—I always go into the dinner rooms, and into the nurses' room, and into the rooms where the patients are working at their needle, where, perhaps, I see them. That is the rule. I go, also, into some side rooms opposite the dinner rooms.

969. What inquiry do you make during those visits?—I inquire as to any sickness that exists, and as to the mental condition of the patients,

E. T. Monro, M. D.

10 July 1851.

patients that appear to me requiring more immediate attention. Some go from week to week very much in the same condition. I inquire more especially as to all the recent cases, and as to all cases at all affected by any indisposition, as to any particular cause; as to those who are particularly violent, or particularly depressed. I always ask the nurses how they go on, and whether there is anybody in bed sick. I draw their attention to points of that kind. The Commissioners are aware that nine patients out of ten are in very much the same condition from week to week.

970. What patients do you make a rule of always seeing?—My own patients. They are divided in this manner; Sir Alexander Morison, my colleague, takes in on one Friday, I take in on the following Friday. So we divide the patients in that manner, and they are put upon our books, and marked according to the week in which they are admitted. Some are considered my patients, and some his.

971. But they are all intermixed?—Yes.

972. Not kept in separate wards?—With reference to the criminals, we divide them equally. If I happen to have fewer than Sir Alexander, he apportions one or two to me, and so *vice versâ*. We keep an equal course with reference to the criminals.

973. What patients do you prescribe for, or otherwise attend to?—All invariably that appear to me to require prescribing.

974. Should you prescribe for any of Sir Alexander Morison's patients?—I should in case of emergency.

975. But not habitually?—No; he is there four days, and I am there four days; in fact, we are both there on the Friday to attend the Committee, and one or other of us is there each day. I do, in fact, converse and take an interest in his patients very often, and he in mine, but I do not feel so much responsibility for his patients as I do for my own.

976. You consider that you and Sir Alexander Morison hold co-ordinate powers?—I have been there much longer than he has. I have been there 35 years, and he has been there about 17 or 18.

977. Who goes round the wards with you?—Dr. Wood.

978. And the matron?—Sometimes, occasionally; Dr. Wood always goes round, but by some accident he might be out. The particular attendants or nurses belonging to that particular gallery, and the pupils, also go round.

979. Who would report to you any particular case, or draw your attention to any particular patient?—Dr. Wood, the nurses, or the keepers; Dr. Wood, more especially, as being resident there.

980. Have you any powers, and if any, what are they, over the resident medical officer, matron, or attendants?—I look upon myself as the superior officer, and I do occasionally give directions to each. I have not often occasion to correct any one.

981. You consider you have authority over the resident medical officer, although you may not exercise it?—I feel I have a certain authority.

982. If you objected to anything you saw, you would consider it your duty to report it to the Committee?—Certainly; but first I should speak to the parties privately.

983. Supposing they were incorrigible?—I have not found them so;

E. T. Monro, M. D.

10 July 1851.

so; I should deem it my duty to point out anything that I considered a neglect or abuse.

984. Is it a part of your duty to ascertain or inquire into the comforts of the patients, their clothing, diet, and bedding, more especially the sick patients?—Most certainly; I live on the most affectionate terms with them. There are a great many in whom I take a great interest, and with whom I have frequent conversations; they are quite capable of conversing; it is a pleasant thing sometimes to go round and converse with them in an intimate and friendly way, and, certainly, in cases of sickness they are strictly attended to in every way.

985. Do you inspect the beds of the patients?—Often.

986. And pull down the clothing?—Often. I do not look at 500 beds every time. I used to go round with Lord Robert Seymour frequently. I remember, in his day, he was particularly anxious as to the state of the beds. I have often been round with him inspecting the bedding.

987. Do you consider it your duty to inquire into the clothing, bedding, and diet of the patients?—No, I do not consider it my duty to inquire into the clothing. If I saw anything objectionable in the clothing I should point it out, or in the bedding; but I do not in a formal way go through the bedding and clothing.

988. In going over the wards, do you sometimes examine the beds which may look clean outside; do you pull down the clothing and see that they are clean inside too?—I have not done that very often.

989. I suppose you have confidence in the attendants and matron? —Yes. Everybody that inspects it seems thoroughly satisfied. The Governors go round frequently on the Friday.

990. Do you ever visit the wards at night?—I have done so. I think it is not my duty to go there at night. I have been occasionally, but not very often.

991. Do you know that part of the hospital called the basement? —Perfectly.

992. Are you aware that any female patients sleep there, or have slept, entirely naked upon loose straw?—I never heard of a case of the sort.

993. Did you ever hear of such a charge having been made before? —No.

994. Do you hear it to-day for the first time?—I think I heard somebody the other day (I do not know the gentleman who came the other day to the Bethlehem) mention such a thing. I heard such a thing mentioned as being supposed to have taken place, but I am not at all aware of any such fact myself. The patients strip themselves sometimes, and are very indecent.

995. Supposing such a system were existing, or had existed, should you consider it good or bad, especially for feeble patients?— Unquestionably bad.

996. Then, what should you say of that system if you found it adopted towards patients?—You mean the system of allowing them to lie naked.

997. Stripping them before they go to bed?—I think it, unquestionably, bad.

998. What

998. What should you say of the system where they must be stripped naked before they are put to bed, and then put into the straw with nothing between them but a blanket and the straw?—I think it bad. *E. T. Monro, M. D.* 10 July 1851.

999. Did you ever inspect the bed of any patient, especially when in a weak bodily condition?—As far as I can; in any grave indisposition.

1000. Not otherwise?—In all average cases it would not be necessary. If my attention were drawn to any case of grave indisposition or sickness I should think it my duty to do so.

1001. Do you make inquiries upon the subject as to sores or bruises?—Oh yes; often.

1002. Do you inquire of the medical man or the nurse as to the state of the body of the patient?—Oh yes; it is reported on Friday to the Committee in writing.

1003. In fact, you confide in the nurses that they would communicate anything to you that you ought to inspect?—Yes; and if I have a sort of inkling that anything deserves an inquiry, I make it.

1004. Do you give any, and what directions, either as to sick or weak patients, or others, to the resident apothecary, the matron, or the attendants?—I go round talking to Dr. Wood the whole time, and each case is brought more or less particularly before my eye.

1005. You said just now the Governors went round periodically?—They go round.

1006. Do you know whether the Governors make it a rule to inspect the bedding, and see that everything is in a proper state?—I have seen them do so. I do not make it a rule; I do not go round with them; I have occasionally done so.

1007. In going round with the medical man and with the attendants, do you direct or suggest anything in reference to the restraint or non-restraint, or to their moral treatment?—Yes, occasionally I do. We have hardly any restraint at all; I think, for some years past, it has been a fraction of only one per cent.; there is scarcely any. I do not know whether the Commissioners have seen the Restraint Book. Such a book is a pattern. It gives you every hour of restraint, and every mode of restraint, so that you may tell to an hour how long it has existed; you may tell the cause of it, and you may tell the particular mode of it. It is an admirable book.

1008. How long has it been kept?—Some years.

1009. Are you satisfied that the book is correctly kept?—I believe it is; for Nicholls, the steward, is an admirable man, and extremely attentive to all the statistics, and they are presented to me every Friday morning to see what has passed during the week.

1010. How do you know that Nicholls' statement is accurate?—I presume so, from Dr. Wood, from the nurses, and from the attendants. I believe everything is carefully reported, and I believe there is as much accuracy in that book as can be expected.

1011. Does he make up that statement from the report of the nurses and Dr. Wood?—I should suppose he would derive it from the nurses and male attendants. I presume it is their duty to report, when patients are under restraint, and then I go to see them; but

E. T. Monro, M. D.

10 July 1851.

but there is hardly anybody to see. There was a man last week who was in a violent condition, but he was merely secluded in his room. I do not think there was any personal restraint at all.

1012. Do you know who classifies or distributes the female patients?—The matron and Dr. Wood.

1013. Do you ever make any suggestion thereon?—Yes; I often suggest when I think a patient is well enough to go into the upper gallery. When they first come, the habit is to place the patient in what we call No. 2, in a middling gallery, and from thence they are distributed according as they are found to be improved or otherwise. Some go down to the basement, and some go up into No. 3, which is for the better class, the convalescent cases. The fourth is for incurables. There are four galleries. The more noisy, and dirty, and unmanageable, are in the basement, and the middling class, such as they are supposed to be upon their first admission, are in ward No. 2. Then No. 3, the convalescent gallery; the fourth for incurables, and the criminals in the wings.

1014. Have you an infirmary for the sick?—No, not exactly that, but if a patient were particularly sick, as they sometimes are of erysipelas and other complaints, and we wish to keep them apart from the other patients, they are then provided with a room upstairs as large as this one, a very airy, pleasant room upstairs. Frequently that is the course. We have not a great deal of sickness upon the whole; indeed very little.

1015. Suppose a patient is particularly or moderately sick, would it not be a great comfort to be removed?—The plan of an infirmary is a good one. I have repeatedly suggested it to the Governors.

1016. I should like to have your opinion whether you think it right that a great Royal Hospital like Bethlehem, with enormous funds, should be unlike inferior establishments, and not have an infirmary for the sick?—I think an infirmary would be an advantage. I should like to see an infirmary upon the principle I have suggested to the Governors in some of my reports, but although there is no infirmary, the patients are diligently attended to in their own apartments.

1017. As a man of experience, I want to ask what is your opinion of a Royal Hospital like Bethlehem being without an infirmary?—I never quite felt that; at the same time, I thought it would be advantageous.

1018. Have you easy chairs for the feeble and the suffering?—Some few, not many.

1019. Can you charge your memory; do you think there are a dozen easy chairs?—Yes, I think there are two or three in each gallery.

1020. Are you sure about that?—I am not quite sure; I know there are some easy chairs, but I cannot tell how many.

1021. Is it your opinion there ought to be a new provision in this Royal Hospital of Bethlehem for the sick and feeble?—I think the sick and feeble have accommodation of the same sort in the various rooms.

1022. Your opinion is there ought to be accommodation?—I do not think it has been loudly called for, or has struck my attention particularly; I do not think it has. They are always allowed to recline upon the bed; whenever they desire it they can retire to their rooms

and

E. T. Monro, M. D.

10 July 1851.

and recline upon their beds. There are no sofas, but there are many benches, upon which they sometimes recline.

1023. But there are no backs to them?—No; there are the sides of the rooms.

1024. Have you any special attendants for the sick?—There are several nurses in each gallery; there are none who are sick nurses exactly, but they all attend in their own galleries to the sick. I do not know whether the Commissioners are aware of it, but we never admit any patient in a state of sickness unless upon some special occasion; it is against the rules. All patients who are so sick as to require the attendance of nurses are inadmissible, and when they become sick we send them to their relatives. They generally leave the hospital; they are discharged as being sick and weak. We do not pretend to provide for any but for the casual sick, and they are never admitted sick, and never kept long if they are. It is a great advantage to go into the country, and we often suggest that in cases of consumption.

1025. Are the persons of dirty patients apt to be excoriated from lying wet in bed, and are they specially examined?—I believe they are. Dr. Wood is very particular about things of that sort, and all important cases Mr. Lawrence sees. All patients who have affections of the skin are reported upon a slate for Mr. Lawrence's inspection.

1026. How often does he come?—I should think he comes twice a week. He does not come upon the regular days as we do, but I should think, upon an average, he is there twice a week.

1027. Is a report made to the Committee of the bodily condition, sores, &c., of the patients generally?—Not of the patients generally; of any particular patient; and all the patients who come in and go out are reported.

1028. Is the report confined to patients coming in and going out?—Except special cases.

1029. Do you approve of this, that patients should be classified and moved from one ward to another upon the sole authority of the matron, or upon any other authority than that of the medical officer?—I think in some cases that her opinion might be sufficient, but there are frequent conversations upon that point between myself and Dr. Wood. I often make suggestions if I think a case ought to go to the better gallery; if they are not so bad, I frequently make suggestions upon that point.

1030. Now, I ask you this, whether, as the chief medical officer of Bethlehem, you approve of patients being classified or moved from one ward to another upon the sole authority of the matron?—Not in all cases.

1031. Or upon any authority but that of the medical officer?—Not in all cases. I think in some lighter cases, where it is a matter that is immaterial, I should not make a point of it. I think in the most important cases the medical man should be consulted.

1032. What is the general rule, then?—I think the general rule is, that Dr. Wood, upon the male side, and Mrs. Hunter, upon the female side, should make their distinction as to the galleries. If it is anything important it is easily submitted to the physicians, but in ordinary cases it would hardly be necessary; it is sometimes necessary.

1033. Do you consider, as a general rule, that it is not absolutely necessary

E. T. Monro, M. D.

10 July 1851.

necessary that the medical man should be consulted?—Not as a general rule. I think there are many cases where it would be immaterial; but I think, in grave or important cases, they should be consulted.

1034. Who should be the judge of the gravity of the case?—I should speak out.

1035. Is it not a question also of medical responsibility; ought the matron to have authority to classify and to remove patients from one ward to another?—I think the resident medical officer should have the supreme voice in it; but I think there are some cases where the matron may transmit a patient without any impropriety, when nothing important is involved in it.

1036. Do you think that patients should be placed in the basement storey upon straw beds, whatever be their condition of health, at the discretion of the matron?—I do not think they should.

1037. If you were to ascertain that that been the general or occasional practice in Bethlehem Hospital, would you, as one of the presiding physicians, completely condemn it?—I should think it right to animadvert upon it.

1038. Would you not go further than animadvert upon it?—In some cases I should condemn it.

1039. Would you allow it to go on?—I should not allow the matron to send patients to the basement who were, undoubtedly, unfit for such a residence.

1040. If you ascertained that such was the practice, you say you should animadvert upon it; I ask you whether, as one of the presiding physicians, you would not go further than animadvert upon it?—Certainly: it would be my duty to contravene it altogether. I should direct a reversal of such a decree as that, and I do occasionally direct reversals.

1041. Have the Governors or House Committee, or the treasurer, or any other person, issued any and what recent regulations or directions respecting the classification of patients, or their bedding, &c.?—I am not aware of any directions that have been issued. I do not remember that there have been any regulations issued lately respecting the management of the servants. I do not think that any orders or directions have been issued lately respecting anything you have mentioned.

1042. They have not been brought to your knowledge?—I do not remember any directions respecting classification or the bedding; it does not strike me at this moment.

1043. Have you heard that any complaints have been made as to the conduct of any nurses towards the patients?—Occasionally. The other day there were complaints made, about a month ago, in respect of some nurses; there are complaints occasionally, but not often.

1044. Do you remember the names of the nurses complained of?—I think one of them was the nurse in the basement, Cliffin.

1045. Do you remember what was the charge against her?—It came to my knowledge only; the case was not under my own immediate guidance; I allude to Miss H.; yet as a committee-man I did hear the complaint made, and the nurse was summoned to answer it. I did not attend throughout; it was not in my department,

ment, and the treasurer did not think it necessary I should remain. I think Sir Alexander Morrison remained, as it was his case, and I think he can tell you more about it, as the nurse was had up to be examined. It does not happen once a year. *E. T. Monro, M. D.* 10 July 1851.

1046. When you have visited the patients in the basement, have you ever seen them in bed?—Oh, yes.

1047. Did you observe whether they had body-linen or not?—They always had body-linen when I saw them.

1048. Do you ever go to the basement story at night?—Never. I may have done such a thing at night, but seldom; I may have been there now and then.

1049. There is a front and a back basement?—Yes; one upon each side.

1050. You have not been into either of them at night?—At night it is not my duty to appear there at all.

1051. You never went there by accident after they were in bed?—I have often seen them in bed in the day-time.

1052. At night?—I am not there at night. I have occasionally been there, but very rarely.

1053. So that you could not state, upon your own knowledge, whether they had, or had not, bed-clothing on?—No.

1054. Are you not aware that the matron can send any patient she pleases to the basement gallery without reference to any one?—I have known such a thing done, occasionally; and wherever I thought it improper I have always reversed it.

1055. Is not the power vested in her that she can send a patient to the basement gallery whenever she pleases?—I think at one time she had that power. I remember there was a great deal of discussion upon that point; and, to the best of my recollection, she was desired to confer always with Dr. Wood.

1056. Have you any record of that?—I dare say there is a record upon the minutes of the committee. The secretary has the minutes, and I think, probably, he has made a record of it.

1057. Do you know when that was?—I should say two or three years back; I cannot tell exactly.

1058. Notwithstanding that order, which you seem to think was given, and which you think we shall find recorded upon the minutes, are you not aware that since that time the matron has acted constantly upon that power, and constantly sent, at her own discretion, patients to the basement story, and that she now does so without consulting with the medical man?—I have known it, occasionally.

1059. I ask you whether, to your knowledge, she has not done it since that time?—I think she may have done it occasionally, but it has not been the rule.

1060. That would be a direct breach, then, of the regulations of the hospital?—I do assure the Commissioners I hardly know how to speak upon that point. I think she may occasionally have used her own authority when it would be more proper to have conferred with Dr. Wood, but I am not clear upon the point.

1061. Did she, or did she not, send Miss M. to the basement story?—I do not remember that at all. I know she was in the basement story, and I often saw her there.

 1062. Who

E. T. Monro, M. D.

10 July 1851.

1062. Who did send her to the basement story?—I presume it was done by the conjoint authority of Dr. Wood and Mrs. Hunter, as I saw her there.

1063. Have you heard whether the treasurer has, or has not, given to Mrs. Hunter, the matron, this power lately?—Of acting upon her own authority?

1064. Yes; the new treasurer since his appointment?—I do not remember that; the governors are rather jealous of her having too much authority, I should say.

1065. Do you mean to say that you do not know that the treasurer has given her that order and authority?—I do not know it. I do not remember it. I have not heard all the orders that the treasurer has given. I do not remember any of that sort.

1066. Have you made any, and what, suggestion to the governors, or other authorities of the hospital, for the improvement of the condition of the patients, or otherwise?—Yes, I have often made suggestions, and in my last report I made a suggestion as to a new airing-ground, that we might sub-divide the men a little more when out of doors. I have often done that in the special reports.

1067. Can you state what has been the result of that suggestion of yours?—The last has not been attended to yet, but I think it is in contemplation.

1068. What is that?—To have a new airing-ground for the males, so that they may be sub-divided a little more.

1069. Have you any suggestion that you wish to make for the improvement of the present system of management or supervision in Bethlehem Hospital?—That is rather a general question.

1070. From the result of your experience, have you anything to suggest?—If there were anything, I should feel it my duty to suggest it; I do occasionally make suggestions; for instance, as to a new convalescent ward and another airing-ground.

1071. And as to an infirmary?—I have made the suggestion; indeed, it constitutes a portion of my report to do so.

1072. Do you consider it desirable that there should be an additional resident medical officer?—Yes, I think it is desirable, and I believe it is in contemplation.

1073. Do you remember the case of Miss M.?—She was an old lady; I think she was about 55; I remember her perfectly.

1074. Do you remember her mental or bodily condition when admitted?—I remember she was in a very depressed condition of mind. I will tell you all about the case: I know she was residing at a lodging in Walworth; I had a letter from her sister, requesting me to come and see her at her lodgings, which I did, and I found her in a very depressed condition of mind, hardly saying anything, and refusing her food; and, having refused it, I think, for a week, or nearly so, I was rather alarmed at her condition, and also at the constipated state of her bowels. I remember well that I directed some castor-oil to be given to her, which there was great difficulty in administering. I do not think she took much of it; I found her in so intractable a condition that I desired her sister to place her in Bethlehem Hospital; I mentioned that I could easily obtain her admission, and I would put her in the way of getting the papers. She came to Bethlehem,

E. T. Monro, M. D.

10 July 1851.

Bethlehem, and her sister was much obliged to me for assisting her, and there she remained a couple of months. I only knew her during the first month of her residence, on this account, that I was ill myself; I had an attack of gout in November; I only knew her during the first of the two months that she was there; and during my illness, which was long, she was discharged. I thought I had one or two letters from the sister, but here is one which bears a little on the case: "Miss F. M. begs her respectful compliments to Dr. Monro, and regrets that she has been so long in receiving her brother's answer, who is fully sensible, with herself, of the kindness and wisdom of the step which Dr. Monro gave her in advising them to pause before removing Miss M. from Bethlehem Hospital, and in her present state they consider she is far better to remain there.—Friday, Camberwell." I was told when she was removed from Bethlehem, during my illness, that it was on some financial account that they wished to get her discharged, or something of that sort; that that was the reason they gave at the time. With reference to myself and the sister, I can honestly assure you there has been nothing but the most amicable and grateful sort of feeling on her part; and that letter, I think, fully bears out what I tell you; she thanks me for all the advice I have given her.

1075. That was while Miss M. was at Bethlehem?—Yes.

1076. Have you had communication with her since?—No; I have never seen her since.

1077. Do you remember Miss M.'s bodily condition at the time she was admitted?—She was in a state of debility, and required a good many things; she had stout, quinine, beef-tea, and all sorts of good things of that kind.

1078. At the time of her admission, had she wounds and abrasions on her?—I do not think she had; the book would tell that at once; the book presented on the Friday describes her admission, and everything of that sort.

1079. Was she free from them?—As far as I knew, and as far as I can remember.

1080. Did you inspect her bodily condition during the time she was under your care?—Do you mean her general health?

1081. Yes; did you inspect any part of her person?—She was not stripped; it was not necessary. I was aware of it all. I saw her, and I made a suggestion as to her diet, and matters of that sort.

1082. You prescribed for her?—Yes.

1083. With what effect?—I had that attack of gout, and went to bed at the end of the first month, and during that month, though she was in a feeble condition, she got so far better that she took her food, which she had refused before her admission; she took her food, and it was appearing rather a hopeful case; before, it was a sort of case I had hardly any hope of.

1084. Can you speak to any wounds or abrasions on her body during the time she stayed in the hospital?—I cannot.

1085. Do you remember what treatment she was subjected to?—She had that generous diet I have spoken to; porter, beef-tea, and, I think, wine and arrowroot.

1086. What ward was she placed in?—I am not sure; just at first she

E. T. Monro, M. D.

10 July 1851.

she was in No. 2. It is difficult to remember, among so many hundred cases; I think she was in No. 2 for a time; I found her quite intractable.

1087. That is the receiving ward?—Yes.

1088. She was afterwards removed to the basement?—Yes.

1089. Do you know by whose order?—I cannot tell.

1090. Not by yours?—No, not by mine, but I saw the propriety of it, or I should have spoken out about it; I saw that she ought to be classified with those cases.

1091. Do you think the basement a fit place for a person in her state of health?—Yes, because I might say that one-third of the cases in the basement are just in that painful, feeble condition in moving about; I thought it a very suitable case for the basement when I saw her there.

1092. Was the bedding on which she lay proper for a person in her state of health?—The bedding? The straw in the female basement is all enclosed in ticks, and they have blankets and rugs.

1093. Enclosed in ticks; was it enclosed in ticks at the time Miss M. was sent down to the basement?—I cannot answer that absolutely, but I should think it was.

1094. If it was not, you would hardly, as a medical man, allow that it was proper for a person in her state of health?—Her health did not strike me as being materially affected; she was in a state of debility.

1095. Was she not suffering under a terrible prolapsus?—It was not mentioned to me at the time; cases of prolapsus are reported to Mr. Lawrence.

1096. If she was your patient you would look to her general health?—I do not remember hearing of any prolapsus; I heard of it the other day.

1097. Was it never reported to you that she had prolapsus?—I cannot remember.

1098. I think you will see, if there are so many cases, and so very many infirmities, that infirmities are more under the direction of Dr. Wood or Mr. Lawrence.

1099. Would you call prolapsus an infirmity?—It would depend on the amount of it.

1100. Did you consult with Mr. Lawrence on this matter?—No.

1101. Did he communicate nothing to you?—No, I think not.

1102. Do you know whether she slept naked on loose straw?—I should conceive not; I never heard that she did; I never imagined it possible.

1103. Did you ever hear that she was subjected to harsh treatment by any nurse?—Never.

1104. Did you order for her any special comforts?—I ordered for her those things, and that generous diet I have already mentioned; I do not remember any other special comforts. I took peculiar interest in her case; her poor sister was so distressed about her that I felt interested; and the sister worked with me about it, and was very grateful to me at the time; she used to come occasionally to speak to me, and ask me how she was going on. I remember seeing her at the gate of the hospital, and in the hall occasionally I saw her, and she was full of gratitude. I rather fancy I was quite on stilts with reference

E. T. Monro, M. D.

10 July 1851.

reference to the case, because the sister was so grateful; and I never dreamt there was any other feeling. I wrote, since I saw Dr. Hume, to make inquiry of a lady at whose house Miss M. was residing at Walworth, when first I saw her. I was quite astonished that there was any sort of complaint. I was anxious to make inquiry.

1105. Have you had communication with the sister since Miss M.'s discharge?—Never.

1106. By whom was Miss M. examined on her discharge?—By the matron and by Dr. Wood; I was ill in bed when she was discharged.

1107. Have you heard any statement made as to her bodily condition at the time of her discharge?—I think there is some statement in the book.

1108. Has any statement been made to you?—I do not remember any; I told you of my going to bed in November, and I did not return to the hospital until the middle of January. She had been gone three weeks or a month before I made my appearance, so that I can hardly answer that question.

1109. Do you remember a patient of the name of E. W.?—Yes, I do; but there have been several W.s.

1110. Do you know where she was placed?—She was at one time in the basement.

1111. Do you know by whose order?—I know she was there at one time, but afterwards she was up-stairs; she got well and went away. I remember the case perfectly, because I remember a little child came to see her one day when I happened to be present; I used to talk to the mother about the child afterwards, and we were on pleasant terms together; she got well.

1112. Did you ever hear of her having been struck or harshly used by any of the nurses?—Never.

1113. Do you know what her mental condition was at the time of her discharge?—I believe she was well when she was discharged.

1114. Have you either seen or heard the letter read that was written to Sir Peter Laurie about Miss M.'s case?—No, I think not; I never heard the facts.

1115. Was it not read to the committee; you attend committees?—Yes, I attend.

1116. Was not that letter read to the committee?—If I were to speak the truth from my heart, I believe not; I do not remember it; I may be wrong; I may not have been present; other arrangements might have hindered me.

1117. On Friday last?—I beg your pardon; I will recall what I just said.

1118. Were you at the committee on Friday last?—I am taxing my memory to the utmost, and upon second thoughts I do remember that Sir Peter Laurie was there last Friday. I know it was the day of the dinner at Bridewell; I think the letter was read; I do remember that; but there were so many letters read that I am not certain; I know Sir Peter mentioned it.

1119. Did not such a letter produce a deep impression on you, she being one of your patients?—I think it was read.

1120. Did it not produce a deep impression on your mind?—I thought

E. T. Monro, M. D.

10 July 1851.

thought there was a grand mistake somewhere, and when I heard of the case I thought it most extraordinary; I had no idea that the feeling of the family was anything but that of gratitude; I cannot satisfy my mind about it at all, whether it was the same statement that Sir Peter made or not; I cannot recollect; I recollect something passed; I know Sir Peter was there.

[The Witness withdrew.

Sir *Alexander Morison*, M.D., called; and having been sworn, was examined by the Commissioners, as follows:

Sir *A. Morison*, M. D.

1121. WHAT office do you hold in Bethlehem Hospital?—Joint Physician.

1122. Will you state to the Commissioners what your duties are?—No; I cannot tell you without looking them over. To attend to the health of the patients; Dr. Monro to receive them one week and I the other; to attend to them to the best of my ability. I cannot tell you without looking at the book; I know them practically.

1123. What are the powers you possess in the administration of your office?—The powers? Why, to administer to the patients; to prescribe for them, and to see that they are treated in the best way possible.

1124. How often do you visit the hospital?—I am obliged to visit it four times a week, but I do visit it occasionally more.

1125. How long do you stop at each visit?—I have no regular time of staying at each visit; I may stop from one to seven hours, or from two to three hours.

1126. On an average, should you say from two to three hours?—Yes; I should think so.

1127. Do you keep an account of the number of hours that you attend?—No.

1128. How, then, do you know you remain the average you speak of?—By the time I go and the time I leave.

1129. You say you keep no account of the number of hours?—I do not keep any account; I keep it in my memory.

1130. You say your average is from two to three hours?—I think so, to the best of my knowledge.

1131. Four times a week?—Yes.

1132. Do you inspect the rooms of the hospital when you go there?—I inspect the patients.

1133. The question was, did you inspect the rooms?—Not particularly.

1134. Do you inspect them?—I do not know what you call inspecting rooms.

1135. Do you go into the rooms and see that they are clean, in proper order, and properly ventilated?—I do.

1136. Do you always inspect the rooms when you go round?—Not always.

1137. How often?—I cannot tell you; but generally to satisfy myself that everything is in proper order; I do not keep any particular account of it.

1138. When

Sir *A. Morison*, M. D.

10 July 1851.

1138. When did you inspect the rooms last?—I was there yesterday; I was not long there; it was not my duty yesterday.

1139. How many rooms did you inspect yesterday?—I do not know.

1140. Did you inspect the greater part of the rooms?—Yes; I went through the whole of the hospital yesterday, except two or three wards in the criminal department.

1141. Did you go into the single rooms; the bed-rooms?—Yes.

1142. Did you, yesterday?—Yes, I did; not into all of them.

1143. Did you inspect the basement yesterday?—Yes.

1144. The female basement?—Yes.

1145. On your inspection, what inquiries do you make?—I seldom have occasion to inquire; I make use of my eyes; I generally satisfy myself as to what I see, and if I am not satisfied I state so.

1146. Are your eyes sufficient to guide you into a knowledge of the condition of all the patients?—I hope they are.

1147. Are your eyes sufficient to guide you into a knowledge whether the patients have bruises or sores?—If they have bruises and sores the attendants inform me, and I look at them.

1148. Are your eyes sufficient to guide you to a knowledge of all the patients; may they not have some internal disorder?—My business is to inquire whether they have any internal disorder.

1149. Do you?—I do, to the best of my ability.

1150. To the best of your ability; you are the Joint Physician, and you receive a salary for the discharge of your duty?—I do.

1151. You are responsible for the care of those patients?—Yes.

1152. When you go over the wards, do you consider the case of each patient separately, and ask the nurses, "Is this patient well?" or "Is that patient well"?—If they tell me what is the matter, I do not; I do, as far as I think it necessary for the well-being of the patient.

1153. How far do you think it necessary?—It depends on the state of the patients, and the number of them; whether I have seen them frequently before or recently; it very much depends upon that.

1154. Do you see all the patients individually?—I see all the patients individually that are under my care. Perhaps some of them are at work in the garden or in the workshop; I go to see them occasionally, but not always.

1155. Do you see the patients individually that are under your care, every time you make a visit?—Yes, and every time all that require me ask.

1156. What means do you take of ascertaining that you have seen every patient that is under your care; do you tick them off in a list?—I have a book containing the cases of all the patients; I generally carry that with me, and I look at it at home very often, to prepare myself for what I have to do at the hospital.

1157. Have you a list of the patients?—Yes, I have a list, but not here.

1158. Do you always take that list with you?—Not always.

1159. How do you know, then, every time, that you have seen all the patients under your care?—I know pretty well by looking at my book before I go; many I pass over without saying anything to.

 1160. Do

Sir *A. Morison*, M. D.

10 July 1851.

1160. Do you make inquiries of the patients themselves?—Oh yes! a great many.

1161. Do you hear all their complaints?—Yes, I do; I make a point of doing it; I make myself master of the case, as far as I can, with the view of doing as much good as I can.

1162. Who goes round with you?—Generally the apothecary, and sometimes the pupils, but not always; either one or the other.

1163. Do you make inquiries in the presence of the attendants, or of the patients alone?—Sometimes with one, and sometimes the other; sometimes when the patients are alone, and sometimes when the attendants are with me.

1164. Is it your habit to make inquiries when the patients are alone?—It is, very much.

1165. Who reports to you any particular cases, or draws your attention to any particular patients?—I generally ask the apothecary if there is anything particular to-day, and then I ask the attendant of each of the wards, "Is there anything particular for me to-day?"

1166. Have you any power over the resident medical officer, matron, or attendants?—I presume they are entirely under the control of the physician when there, and are required to attend to his directions when absent, unless they see any reason to alter it.

1167. Is it part of your duty to ascertain or inquire into the comfort of the patients, such as clothing, diet, and bedding?—Yes, it is.

1168. Do you so inquire?—I do so inquire.

1169. How do you so inquire?—I inquire of the attendants, sometimes of the steward, sometimes of the matron, and of themselves.

1170. Do you know the basement story?—I do.

1171. Do you know the front and back basement?—Of course; I see patients there constantly.

1172. Are you aware that any of the female patients sleep, or have slept, entirely naked on loose straw in the basement?—I am not aware, except they have had the itch; in those cases they have had a blanket. I have seen them naked in a blanket when being rubbed for the itch, but not on loose straw without any blanket; I have never seen that.

1173. Would you take patients in, knowing they had the itch?—No; it sometimes appears after they come in.

1174. Then you are not aware, except in cases of itch you have mentioned, that any of the female patients sleep, or have slept, entirely naked, without any body-linen on, on loose straw, having perhaps only a blanket?—I am not aware of it.

1175. Did you never hear of it until this day?—No; I never heard of it until this day, and I have been a good deal there both night and day; I have often taken the place of the apothecary for a week or two.

1176. What is your opinion, as a medical man of great experience; supposing such a system were to be prevalent, should you consider it to be good or bad?—Bad.

1177. If, then, you were to hear that in Bethlehem Hospital it is the practice in the basement story for some 16 or 17 female patients to sleep night after night without body-linen and on loose straw, you, as a medical man, would condemn it?—Certainly I would, without the blanketing.

Sir *A. Morison*, M. D.

10 July 1851.

1178. Would you, or would you not, as a medical man, condemn the practice, supposing there were to be a blanket laid on the straw, of stripping the women stark naked, and putting them to bed, there to remain the whole night without body-linen?—The women are frequently apt to tear their body-linen.

1179. Should you, or not, approve of that system?—I should not approve of it.

1180. Are you in the habit of going over the basement story?—Every day I go there; more particularly than to any other part.

1181. Do you ever go there at night?—In the evening occasionally; not frequently.

1182. Have you ever seen female patients without body-linen?—Not exactly, except when they had the itch.

1183. Do you ever inspect, for medical purposes, the bodies of the patients, especially when in weak bodily condition, to see whether they have any injuries?—Oh yes; I desire them to let me know if they have any bruises or not.

1184. You make inquiries on the subject?—Yes.

1185. Of whom do you make inquiries?—Of the nurses or attendants.

1186. Are you in the habit of giving directions respecting the sick or other patients to the resident apothecary, the matron, or other attendants?—Yes; I talk to them upon the subject, and generally consult them as to the state of convalescence the patients are in. The great object is to get them well, and I am pretty successful in that.

1187. Do you direct or suggest anything in reference to the restraint or non-restraint of patients, or to what may be called their moral treatment?—I wish no restraint to be used if it can be avoided; but we have very little restraint, unless you call padlocks on the clothes, or canvas drawers instead of their own, a certain degree of restraint. I wish to do away with restraint in all cases where it is not absolutely called for, such as cases in which the patients may injure themselves, or are violent towards others.

1188. How many padlock drawers have you?—Not many.

1189. You used to have a great many strait-waistcoats and leg-locks?—Not in my time; I do not recollect a great many. We had a few strait waistcoats.

1190. Not in your time?—No.

1191. How many years would that cover?—This is my 17th year.

1192. Is it not a fact that within only a few months strait-waistcoats and other instruments of restraint have been removed from the wards?—I have not seen any for a good while, except occasionally a patient refuses his food, when a strait-waistcoat is required, but it is taken off after the operation is performed. I have seen nothing but that.

1193. Is it not a fact that within only the last few months these instruments of restraint have been removed from the wards, having before been within reach of the nurses and attendants, who used them when they pleased?—I did not know that they were within the reach of the nurses and attendants. I know after the use of strait-waistcoats was discontinued, that they had a sort of dress in which the sleeves were inside.

1194. The

Sir *A. Morison*, M. D.

10 July 1851.

1194. The question is about instruments of restraint, strait-waistcoats, leg-locks, and other implements; you say you have been there 17 years, and you are asked whether it is not of recent date that many instruments have been removed from the wards that were formerly within the reach of the attendants, to be used at their discretion?—I was not aware they were within the reach of the attendants; in my time they always applied to the steward for them.

1195. Are you not aware that an order was given by the present treasurer for removal from the wards of all these instruments of restraint?—I am not at all sure about it. I have been so little in the habit of using instruments of restraint to my patients, that it has not come under my knowledge; I recollect the case of two criminals, one of whom was subject to fits.

1196. Are you not aware that an order was given by the present treasurer to remove these instruments of restraint from the wards?—I have no recollection of his giving such an order; it is not within my knowledge that he gave such an order, not before me; nor was it told to me.

1197. How is it that the treasurer, a non-professional man, should give an order for the removal of all instruments of restraint, and you, one of the chief officers, whose duty it is to superintend and control the patients, should not be aware of it?—I do not know, I am sure; I used them so little, that it may have been done without my noticing it. I am not aware of it. The instruments of restraint that I have seen have been in the possession of Mr. Nichols, the steward.

1198. How long have they been in his possession?—I do not know how long; I should think within two or three years.

1199. Do you consider it a right mode of carrying on the affairs of a Royal Hospital like Bethlehem, that the treasurer, a non-professional man, is to give an order for the removal of all instruments of restraint, and you, as a medical man, not be informed of it?—If he made such an order, it did not come within my knowledge. I told you I use them very little.

1200. You are asked your opinion, as a medical man holding a high and responsible situation in Bethlehem Hospital, whether it is a right mode of proceeding that the treasurer is to give an order of that kind, and you are not to be informed of it?—It depends upon whether I was in the habit of using them; if not, it is not likely I should come to know much about them. I do not remember anything about such an order; they have been so little used in my time. I only recollect two cases where they have been used for a long time: one, a man who had killed a woman in his paroxysm, and the other, a man who had injured his brain.

1201. Do you approve of the principle of the treasurer, a non-medical man, giving orders about the treatment of patients?—In the way I understand the question, I do not think it is.

1202. You are asked for your opinion; do you think it right that he should give such an order, and you, the medical man, should not be informed of it?—I think it would be as well to let me know.

1203. We have it in evidence from the treasurer himself, and you are asked again, did you, or did you not, know the fact?—No, I did not.

1204. You

Sir *A. Morison*, M. D.

10 July 1851.

1204. You never heard of it before?—I do not recollect that I did.

1205. You never heard before of the order given by the treasurer for the removal of all instruments of restraint?—I do not recollect ever having heard of it. It may have been mentioned in my orders; but I do not recollect any specific order.

1206. What do you mean by a specific order?—I do not know; I cannot tell. I do not know that the treasurer gave such an order.

1207. And you hear it from me for the first time?—I think I do; I do not remember hearing it before. The treasurer did not communicate it to me.

1208. Do you consider it your duty, particularly in reference to dirty patients, to examine their persons daily, for the purpose of ascertaining whether they are excoriated on their backs, hips, or elbows, and so on?—If I had reason to suppose so, I should; unless I had, I should not.

1209. From your long experience, have you not great reason to suppose that patients become excoriated from lying in wet and dirty straw?—We have not many cases of that kind.

1210. It does not signify whether there are many or one; the question is, should you not, as a medical man, consider it necessary, particularly in reference to dirty patients, to examine their persons daily?—Unless I am satisfied with the report of the apothecary or the matron, I always think it necessary.

1211. Do you then inquire of the matron or the apothecary whether there are excoriations on their backs?—Do you mean any particular case?

1212. The question relates to all wet and dirty patients?—I inquire of the nurses if there are any bruises about them; I do not particularly inquire about excoriations.

1213. You ought to assume there would be excoriations?—I do what I conceive to be my duty.

1214. Let us know what you conceive to be your duty?—To ascertain the state of the patients to the best of my knowledge.

1215. In respect of wet and dirty patients?—To see that they wash them clean, and keep them as dry as they can, and apply some ointment to them.

1216. Is it part of your duty to examine their bodies to see that they are excoriated?—No, I do not think it is part of my duty; it is more part of the duty of the apothecary.

1217. Do you think it no part of your duty as a physician?—If I have any doubt whether it is properly done, then I should do it myself.

1218. But you think it no part of your duty?—Not at all times.

1219. Do you know who classifies or distributes the female patients?—The apothecary, I believe.

1220. The apothecary?—Between the apothecary and the matron.

1221. We want to know who classifies and distributes the female patients; first you say the apothecary, and then you say between the apothecary and the matron; which do you mean?—I think they arrange it; the apothecary is the person who is expected to do so.

1222. Do you ever make a suggestion thereon?—Yes, occasionally.

If

Sir *A. Morison*, M. D.

10 July 1851.

If a patient is placed in a wrong ward, and I think he should be removed to one less noisy and more quiet, I make that suggestion whenever I think proper.

1223. Who, in your opinion, ought to have the classification or distribution of female patients?—I think it ought to be between the matron and the apothecary. There are some cases where the matron may give the apothecary some advice about them that may be useful, sanctioned by the physician afterwards.

1224. Is it your opinion that the matron ought to have the classification of female patients?—Not solely.

1225. To what extent ought she to have the classification?—As far as it appeared right to the apothecary and physicians.

1226. That does not answer the question; you are asked how far the matron alone, without the apothecary, ought to have the classification of female patients?—I think she ought not to have it without the concurrence of the apothecary.

1227. In no case?—In no case.

1228. What should you say if you heard that the treasurer, a non-professional gentleman, had given orders to the matron, and invested her with powers of classification and distribution of female patients?—Without the concurrence of the apothecary?

1229. Quite independent?—I think it is wrong.

1230. Do you think it right that the matron should have the power of removing patients from the upper down to the basement story?—Yes; until the removal is contradicted by the apothecary or physicians. I think she need not wait until she has that approbation, if the apothecary is out of the way.

1231. How soon should it be communicated?—As soon as possible.

1232. Do you think it right that she should have the power, without reference either before or afterwards to the apothecary?—Certainly not; she ought to refer either to the apothecary or physicians as soon as she can

1233. Do you know that she has that power?—I do not know it. I always understood that it was between the apothecary and her; that the apothecary had always the control.

1234. As one of the chief officers of Bethlehem Hospital, have you never heard of that order being given by the treasurer to the matron?—No.

1235. Investing her with full powers of classification and distribution?—Never until you told me.

1236. Do you consider that a proper way of treating persons of respectability, science and experience?—Whenever I saw a patient wrongly placed, I should alter it.

1237. That is not the point; is it right that the treasurer, a non-professional person, should invest the matron with powers of classification and distribution, independent of you and your knowledge on those matters?—No, it is not right; she should consult the medical officer.

1238. We again ask you, is it right that orders of this kind should be given by the treasurer, and not communicated to you as the chief physician?—Certainly not; I think the treasurer should communicate

cate these orders to the medical officer; anything that relates to the arrangement of the patients.

1239. Have you any infirmary for the sick?—No; we have no particular infirmary for the sick; we have separate apartments. I think it would be desirable to have an infirmary, for it would call the attention of the medical officers to the more urgent cases. I think it desirable we should have one; every other asylum has one.

1240. Have you suggested the expediency of an infirmary?—Yes, it has been under consideration for some time.

1241. Have you easy chairs and other comforts of that description?—Yes, we have; I do not think we have so many easy chairs as we might have, but most of our patients do not sit much; we do not require men to be seated; where cases are of long standing, or patients become very feeble and sick, they are discharged.

1242. Have you any special attendants for the sick?—No, we have not. That is a desideratum also; it is a desirable thing that they should not be discharged; whether they are sick or weak they ought to be kept in some part of the establishment, and the reason they are not is, that they take too much of the time of the attendants from the other patients.

1243. Do you recollect whether the Governors, or house committee, or treasurer, or any other person, have issued any and what recent regulations or directions respecting the classification of patients, or their bedding, and so on?—With respect to the classification, I do not recollect that they have issued any rules lately for the attendants; within the last half-year, there have been rules for the attendants.

1244. Do you know what has been done in consequence of those regulations?—No, I do not know particularly; there has been some change among the attendants; I do not know what.

1245. Have you ever heard that any complaints have been made as to the conduct of any nurses towards patients?—I have heard complaints have been made, but I have not seen cause for complaint in any of them.

1246. Have you made any and what suggestions to the Governors, or other authorities of the hospital, for the improvement of the condition of the patients or otherwise?—I have at times.

1247. What is your opinion as to the resident medical staff; do you think it is sufficient?—I should think the resident medical staff, if the two physicians do their duty, is quite sufficient.

1248. Is the straw in the basement story loose?—It is in some of the beds. I do not like that; I like the straw in ticking-cases, but I like the straw better than a stretcher. I think it very bad for excoriating patients.

1249. How long has the straw in the basement story been put into ticking-covers?—Not long; not many years; not above a few years.

1250. Did you hear of the case of Miss H.?—Yes, I did.

1251. Do you remember her?—She was a short time in Bethlehem Hospital.

1252. Do you remember her bodily or mental condition, on her admission?—She was in a weak condition when admitted; she was only there a fortnight, to the best of my recollection, and became still more

Sir *A. Morison*, M. D.

10 July 1851.

more weak and paralysed; she fell down, I think, in a fit, on one occasion.

1253. Had she bruises or wounds on her person?—She had slight bruises, which they showed to me.

1254. She had bruises and wounds on her person when admitted?—Oh no! not when admitted; I am not aware of it. I do not examine them on admission. The bruises I saw were but slight.

1255. During the time she was there, did you inspect her bodily condition?—I saw the bruises she had; they were pointed out to me, and they seemed to me to be principally from falling down and knocking herself about; she had some on her face, legs, and ankles; but the bruises did not seem to me to be of any importance, that I saw, when she was alive.

1256. Did you ever prescribe for her?—I prescribed a little.

1257. Did you direct any particular treatment?—I did; opening medicine, and sick diet, and a little wine. It was not a case that we could retain in the hospital, and her friends appeared anxious to get her away. She had a fit, and was unable to walk, and we thought it better to let her be discharged. I think she was only a fortnight there; hers was one of those cases that there was not any probability of recovery. I was sent by the treasurer after death to examine her body, and I gave a report. The principal thing was excoriations on her body; she had all the lividity about her private parts of incipient decomposition; the bruises seemed to be of very small importance.

1258. She had several wounds on her body?—Not except from scratching.

1259. What was the character of the wounds; why do you assume they were from scratching?—I do not call them wounds.

1260. Why assume they were from scratching?—Because she did scratch herself.

1261. When?—When she was in the hospital.

1262. Who told you so?—I have seen her.

1263. Where did you see her?—In the basement where she was.

1264. On her face?—I think it was on her face; I cannot say I saw a scratching anywhere else.

1265. Do you mean to say she scratched very often on all parts of her body?—No, I did not see her very often.

1266. Because you saw her scratch her lip once or twice, you assume she scratched the whole of her body?—No.

1267. Why do you assume that all those wounds are scratches?—I do not know what wounds you mean; there were very few bruises; bruises I principally observed.

1268. What I mean is abrasions varying from a pea to the size of a fourpenny-piece on her body?—There were but few of them which attracted my notice; but Mr. Lawrence, the surgeon, can tell you more about it; he can describe those things better than I can.

1269. We have had a *post-mortem* examination of the appearances after death?—Have you had my report upon it?

1270. Yes, your report came along with the rest?—I do not remember the appearances.

1271. We want to know why you assume that the abrasions seen on

on the body were the result of scratches?—Because I have often seen similar cases to hers.

1272. Should you altogether reject the opinion others have given, that it arose from points of the straw cutting the body?—I do not think the straw would cut her body; I think the roughness might make punctures, but I do not think the straw would cut her body.

1273. Can you speak as to her bodily condition, as to wounds and abrasions on her body, during the time she stayed in the hospital?—The nurse pointed them out to me; I did not take much notice of them.

1274. Did you order no application?—It was not sufficient to require that, in my opinion.

1275. How often did you see her?—I cannot tell; every day I was there; I think she was there about a fortnight; I must have seen her, I suppose, about six or eight times.

1276. What ward was she placed in?—In the basement, as a dirty patient.

1277. By whose orders?—It is a general order that dirty patients be placed in the basement.

1278. Do you know whether she slept naked, on loose straw?—I do not know that she did; I did not see her in bed.

1279. If she did, should you say that was proper for a person in that state of health?—No, certainly not.

1280. Did you hear that she was subjected to harsh treatment by any nurse?—No.

1281. Did you order any especial comforts for her?—I ordered sick diet and wine; the book will tell that; but the prescription I cannot remember.

1282. Do you know what her bodily state was when she was discharged?—A weak state, and unable to walk by herself.

1283. What was her state on admission; was she singularly emaciated?—Yes, she was very weak and very thin.

1284. Was she very much thinner at the time she went away?—I cannot say that she was; at least it did not strike me.

1285. This is the statement in the Report of the 22d of April: "Bridewell Hospital, One o'clock, p.m. By desire of the treasurer of Bridewell and Bethlehem Hospitals, I have just examined the body of H. H., late a patient in Bethlehem Hospital. I found several superficial bruises on different parts of her body, and redness and tendency to excoriation about the *nates;* none of them at all connected with the cause of her death, which was occasioned by general paralysis. The bruises I consider to be accidental, and in no way to be attributed to want of care and kindness." Is it a general order, that all dirty patients be placed in the basement, without regard to their bodily health?—No, I think if a patient is very weak indeed they should not send her there. Our rule, generally, is to send all patients to No. 2 ward, which is not the basement, and to retain them there if they are not dirty or noisy patients, so as to annoy others of a better description.

1286. Do you consider the back basement a proper place for a patient in weak health?—It depends upon what state she was in; I do not think the back basement a bad place if the bed is properly made.

1287. Is

Sir *A. Morison*, M. D.

10 July 1851.

1287. Is the bedding in the back basement all loose straw?—I think it is.

1288. Do you think loose straw a good kind of bed if a patient is in weak health?—No.

1289. It is all loose straw in the back basement?—Yes.

1290. Do you remember that there was a *post-mortem* examination made by a medical gentleman of the name of Taylor?—No, I do not.

1291. You never heard of it?—I heard of a *post-mortem* examination, but I never heard what it was.

1292. Were not these papers read to the committee?—I was not present; I was otherwise engaged.

1293. Has it been the subject of discussion only one day?—I only met the committee once; the day it was under discussion, when the father of the woman was there, I was absent.

1294. Has not the matter been brought under your notice, as the medical man who had charge of the patient?—Not substantially.

1295. Was it not referred to you?—Not any further than I have stated.

1296. Not for any evidence?—Not for any evidence; I gave all the evidence I could give.

1297. This is the *post-mortem* examination; it states, "On the outer side of the right elbow were several small wounds or abrasions; solution of continuity of the skin had scarcely taken place. On both hips there were the same appearances; namely, several small wounds, varying in size from half the size of a pea to nearly that of a fourpenny piece; being abrasions, some were covered with a small scab; the surrounding skin was red, and slightly inflamed, having an appearance not unlike that produced by pressure in a bed-ridden patient." Did you observe those marks?—I do not remember those particularly; I was not present at that examination.

1298. You were not present; you state you have not observed all those things, and yet you have given a certificate stating all these particulars?—As far as I observed.

1299. It does not appear that you observed with any degree of accuracy; I ask you whether you observed these things on her body?—Enumerate them.

1300. On the body are several wounds?—I do not recollect wounds; scratches, I may have.

1301. One small one on the right *alæ nasi;* one on the right side of the upper lip?—I recollect that.

1302. These wounds were scabbed, and had no surrounding inflammation; there was another wound similar to a scratch on the right cheek, about two-thirds of an inch in length, of the same character as the former?—I recollect that.

1303. You do not mention it?—I thought it was of very little consequence; it appeared to me to be a slight scratch.

1304. "On the outer side of the right elbow were several small wounds, or abrasions; solution of continuity of the skin had scarcely taken place. On both hips there were the same appearances; namely, several small wounds, varying in size from half the size of a pea to nearly that of a fourpenny piece; being abrasions, some were covered with a small scab; the surrounding skin was red, and slightly inflamed,

inflamed, having an appearance not unlike that produced in a bed-ridden patient." Do you mention that?—I do not recollect the wounds; I think I recollect bruises about the knee, little blue marks, and I recollect one on the ankle.

1305. "On each ankle, on the outer side, there was, in particular, one wound about one-third of an inch long by one-eighth in width; these had somewhat the appearance as if produced by the pressure of something bound round the ankles"?—I do not think it was bound up; it appeared to me to be the point of the bone.

1306. Did you see the whole of the body, or only a part?—The whole body, front and back.

1307. Are you aware that the matron considered that these wounds had been caused by the rough portions of the straw on which the patient had laid?—No.

1308. The matron has never stated that to you?—No.

1309. Did you see Miss H. after her discharge from the hospital?—Not until she was dead.

1310. What was your reason for going to see her after she was dead?—The treasurer requested me to go and report thereon.

1311. Did he assign any reason?—He might; I do not remember what it was. He sent a messenger to my house, and I went with the messenger.

1312. Are you quite sure you do not recollect the reason why he sent you?—He did not say more by the messenger than requesting me to go and examine the body of that woman, and I went immediately and sent in that report.

1313. Did you make any other report than that?—Not about that woman.

1314. Have any inquiries been made at the hospital relative to her treatment there?—I dare say there have, but not of me.

1315. Have any attendants or other persons been discharged or reprimanded in consequence of that inquiry?—I cannot tell; I know attendants have been discharged of late; but I do not know on what ground. I do not know why they were discharged.

1316. Do you consider it right after these abrasions were known to be on her person that she should be allowed to sleep on straw?—No, she ought not to have slept on straw with abrasions.

1317. You were superintending the patient, why did you not give an order to that effect?—I was not aware she was sleeping on straw.

1318. How is it that these wet or dirty patients are not constantly examined by you to see whether they ought or ought not to be removed?—I was not aware that she was a dirty patient.

1319. You told us some time ago that the reason she was put in the basement was simply because she was a dirty patient?—I do not know that I told you that; she was not sent as a dirty patient, but as a noisy patient.

1320. Am I to understand from you that when you first attended Miss H. you did not know that she was a dirty patient?—I knew latterly she was a dirty patient.

1321. When you knew it did you then carry on a personal examination, as you ought to have done?—That was just before she was discharged.

Sir *A. Morison.* M. D.

10 July 1851.

1322. When you first saw Miss H. in the basement story, did you or did you not know that she was a dirty patient; on your oath, before God?—On my oath, before God, I do not recollect that I knew she was a dirty patient. When in the basement I saw her in canvas dress. She was one of those paralytic cases going against others, and annoying, and knocking herself about.

1323. Do you recollect an answer you gave to a question some time back, that she was sent to the basement story, and you were asked by whose orders, and you said because all dirty patients are sent to the basement story?—I do not recollect when she was sent to the basement.

1324. We ask you again, and you must answer the question, Yes or No, did you or did you not, when you first saw Miss H. in the basement story, know her to be a dirty patient?—I do not recollect that I did.

1325. Did you inquire whether she was a dirty patient?—No, I did not.

1326. Is it possible that you, a medical man, went to the basement story and never thought it worth while to inquire whether the patient you saw lying upon the straw was a dirty patient or not?—There are a great many patients in the basement story who are not dirty patients.

1327. Is it not your business to inquire whether they are or not?—No, it is not; it is the duty of those who have charge of the patients to inform me.

1328. Did the nurse, or matron, or doctor, or any one communicate to you that she was a dirty patient, or not?—The answer I give to that is, that I cannot recollect.

1329. Did any person communicate to you, we do not ask you whom, but did any person communicate to you or not that Miss H. was a dirty patient?—I do not recollect, *non mi ricordo.*

1330. You again assert to the Commissioners, upon your oath, that you did not know Miss H. to be a dirty patient?—Not at first.

1331. How soon did you first know?—I cannot tell; I do not recollect; I might by looking at my book.

1332. How soon did you first know that she was a dirty patient?—I cannot tell without looking at the Bethlehem book.

1333. Will you refer to your book and communicate to the Commissioners the answers you give to these two questions?—Yes, if you will allow the questions to be put down on paper.

Chairman.] These are the questions: did you, or did you not, know, when you first saw Miss H., that she was a dirty patient? If not, when was the first time you knew that she was a dirty patient?

(A copy of these questions was handed to the witness, to which he was directed to return written answers, to be entered on the minutes.)

[The Witness withdrew.

[*The*

[*The following Letter was subsequently received:*]

Sir *A. Morison*, M. D.

10 July 1851.

"Sir, "Bethlehem Hospital, 12 July 1851.

"On referring to my notes respecting Hannah H. I find that she was a patient in this hospital only from the 4th to the 18th of April, that I was present on her admission, and was informed that she was a mischievous patient, consequently she was placed in the department of the hospital appropriated to such patients. I was not informed that she was a dirty patient.

"Important concerns requiring my presence in the country soon after her admission, the charge of her case was left chiefly to Dr. Wood, with the advice of Dr. Monro, if required.

"On my return on the 16th of April my attention was called to her being in a state of paralysis, and to her having some bruises and marks, stated to have arisen from falls, and from having picked her skin, which she was in the habit of doing.

"On the representation of Dr. Wood, Hannah H. was discharged on the morning of the 18th, and, by desire of the treasurer, I examined her body after death, and gave a report thereof.

"The interruption of my attendance above stated accounts to me for my inability to recollect the circumstances of the case sufficiently to give replies to the queries of the chairman.

"I am, &c.

"R. W. S. Lutwidge, Esq., (signed) "*Alexander Morison.*"
Secretary,
Office of Commissioners of Lunacy,
19, New-street, Spring-gardens."

Peter Northall Laurie, Esq., one of the Governors of Bethlehem Hospital, called in; and, having been sworn, was examined as follows by the Commissioners:

P. N. Laurie, Esq.

1334. How long have you held the office of Governor?—About 17 years.

1335. During the time you have been Governor have you seen many things that you think require amendment, and might be amended most beneficially for Bethlehem Hospital?—During that time I have taken considerable interest in the management of the hospital generally; it is connected with another Bridewell. I take also considerable interest in that; and I have from time to time suggested various alterations at Bethlehem, with respect to the building itself, and the treatment of patients which has been adopted; but I still consider it open to amendment in several matters.

1336. Have you ever framed any plan or scheme for improving the present system of management or supervision of the hospital?—I consider the medical staff of the hospital is hardly on that footing which it deserves; I have long been of opinion that a medical officer, to be an efficient officer of a lunatic asylum, ought to be a resident officer, and that the visiting physicians, having the control of the patients, not being resident, are hardly able, whatever may be their desire, to be efficient medical officers, because I consider that direct medical treatment forms but a small portion of the treatment in a lunatic

P. N. Laurie, Esq.

10 July 1851.

lunatic hospital; that in the moral treatment must be placed the greatest confidence; and that can only be properly superintended by a resident medical officer.

1337. Is it your opinion that physicians coming occasionally to the hospital can give but little individual attention to the several patients? —I think it is almost impossible, whatever may be their desire, to give much valuable attention; they only see through the eyes of the resident medical officer, and hear through his ears; and another great disadvantage that appears to me is that it divides the responsibility; the actual responsibility rests with the superior officer, the physician, who has the least means of really being efficient.

1338. Supposing it to be a good system to have a superintending resident physician, do you think it desirable to have two?—No, I do not.

1339. Would it not be better to have the whole time of one?—Certainly, I think it would, assuming that the number in the hospital is not too large for the attendance of one. I object decidedly to the present attendance by the physicians at Bethlehem, sometimes of one and sometimes of both. Formerly the attendance used to be only twice a week, but the Committee obtained an increase of those visits to four times; still our physicians take patients alternate weeks, and each physician never interferes with the other physician's patients; therefore, although there is the attendance of a physician daily at Bethlehem, the patients are not visited daily; for instance, Dr. Monro's patients are only visited when he attends, and Sir Alexander Morison's in the same way when he attends.

1340. Your notion would be to increase the resident medical staff? —I think, in the present state of Bethlehem, it would almost be desirable to have an additional resident medical officer, and to diminish the control of the physicians.

1341. The consequence of that would be that the resident medical officer then would have more power than he now has?—More power than he has theoretically, but practically our medical officer has the whole power.

1342. Does the treasurer never interfere with him?—The treasurer does not interfere with the medical treatment of patients.

1343. Did you never hear of the treasurer interposing between the medical officer and the matron, and assigning to the matron the power of classification and distribution of female patients, quite irrespective of the medical officer or anybody else?—Yes, I have heard of that; there have been considerable jealousies and differences among the officers and matron; and perhaps for the purpose of keeping peace and quietness, and feeling that the classification of female patients was a matter in which the matron could give judicious advice, he did so. I apprehend that was not relieving her entirely from the control of the medical officer; she was still under the general control of the physicians.

1344. If there were a resident medical officer to superintend, would you give him the absolute power?—I would give the resident medical officer the control of both sides, male and female.

1345. Not allowing the matron to be independent of the medical officer?—Clearly not.

1346. What

P. N. Laurie, Esq.

10 July 1851.

1346. What time do the visiting physicians devote to the inspection of the establishment?—Sir Alexander Morrison devotes a considerable portion of his time; Dr. Monro a very short time, as it appears to me, and I think not by any means sufficient.

1347. Are they paid by fixed salaries?—Yes. Dr. Monro's attendance has been made by me the subject of complaint. He stated in his report, which I believe is before the Honourable Commissioners, that his daily attendance occupied about an hour, or from an hour and a quarter to an hour and a half. I believe it is not more extended now; and that time is wholly inadequate for any physician properly to superintend the number of patients he has. It is not as if his patients were confined in one ward, they are spread over every part of the hospital.

1348. And all recent cases?—They are not all recent cases, only about 200. At all events if they are not recent cases, I put it strongly, if they are all chronic cases, that a physician having charge of an hospital cannot, in my opinion, discharge his duty in anything like a daily visit of an hour and a half.

1349. It is not daily?—Even if it were daily.

1350. The consequence is that the visits of these physicians are not only hasty but imperfect; they do not see and speak to the patients as they ought to do?—It is quite impossible; and a short time ago Dr. Monro's visits were always at the hour of dinner. I made that a subject of complaint, and threatened, unless it was altered, that I would bring it before the Governors publicly; and a promise was made that it should be altered. It appeared to me that the patients, when all collected at dinner, was least of all the proper time to ascertain any peculiar delusions under which they were labouring, and to have proper communication with them.

1351. Perhaps there was less labour in having them all collected?—Exactly so; I am bound to say, as a Governor, that I am not satisfied with the medical treatment; it is of the most slovenly character.

1352. As a Governor, have you had your attention brought to the two cases of Miss M. and Miss H.?—Miss M.'s case was not brought before the Governors, except upon a communication which we had from this Honourable Board through Mr. Lutwidge; I was not aware of it till then. Miss H.'s case I was aware of.

1353. Have you been able to institute any inquiry into Miss M.'s case upon the spot, among the people?—The Governors did not think proper to do so; inasmuch as it was under the consideration of this Board they determined to leave it entirely in the hands of the Board, and to offer every facility in their power to further the investigation.

1354. Did they examine into Miss H.'s case?—They did. Mr. H., the father, attended with his witnesses; he was allowed to examine them, and also to examine every witness connected with the hospital that he thought desirable.

1355. Did he examine Sir Alexander Morison?—He did not; he did not ask to do so.

1356. Is there any improvement you would suggest in the general government of the hospital, with a view to rendering it more effective?—I think that the Governors might improve it in this respect; the committee

P. N. Laurie, Esq.

10 July 1851.

committee is practically an open one. I think it would be desirable not that any Governor should be excluded, but that there should be a distinct committee, to be called the Bethlehem Committee. We have it now in this way: there is a general committee, consisting of 42 Governors, who are appointed for the general management of the hospital; they are required to divide themselves into sections, and that each should be on duty for a calendar month, but that, practically, is a dead letter. I think it would be desirable if a distinct committee were appointed, say 10 or 12, who should be expected to furnish a rough daily report of the proceedings of the hospital; for until the year 1843 there was no report presented to the Governors. I then drew up a report for that year, but we found it impossible to extort one from the physicians; we could get no information at all from them; and the next year I drew up one myself, but the labour is too great. We have now got the physicians to report, but it is merely a short skeleton report, what I call a turnpike-gate road list of those who come in and go out; but as to its being a valuable report, it is neither creditable to the hospital nor of value.

1357. Have you heard different complaints at different times of the misconduct of the present nurses?—Undoubtedly I have.

1358. What is your system of inquiry into charges of that kind; do you think it is good and effective?—Whenever any charge of the sort has been made I have been present, and it has always been inquired into; the charges are generally of a very vague character; there is difficulty in receiving accusations from persons of that description.

1359. In so large an hospital, is not a great portion of the time of the Governors engaged in the financial department?—Yes, in the management of the estates. The seat of the government of the two hospitals of Bethlehem and Bridewell is in Bridges-street, Blackfriars, at Bridewell, where the great hall is, and the office, clerks, and receiver, and where the general management of the business is conducted.

1360. What are the precise duties and practice of the house committee with reference to visitations and inspections in Bethlehem?—The house committee do not visit Bethlehem Hospital at all; the general committee is for the management of the affairs of Bethlehem Hospital, and they never meet except at Bridewell Hospital, unless there is a special inquiry.

1361. Does that committee meet regularly every week?—The Bethlehem committee meet every week, on a Friday.

1362. Is there generally a good attendance?—Generally there is but a small attendance.

1363. Are they, generally speaking, the same people?—No.

1364. Do you consider that to be an evil?—I consider it to be an evil, certainly.

1365. Do you think it would be remedied by your proposition if there was a fixed committee?—I think so, judging from what I have seen. Attached to Bethlehem is an establishment belonging to Bridewell, called "The House of Occupation;" the committee there was of a loose and fluctuating character, but upon my motion a fixed committee was appointed, and we have found it work better, because

we

we find the gentlemen attend more constantly when they are expected to attend; and we avoid all those inconveniences that must attend a fluctuating committee.

1366. Has the treasurer any special authority?—No decided special authority; he has considerable authority, because being the permanent chairman of the fluctuating committee, he necessarily exercises considerable influence; he is always present.

1367. He is the permanent chairman?—Yes.

1368. Did the Bethlehem sub-committee personally inspect the various rooms and wards of the hospital, and converse with the patients?—Some members generally come to every committee. They go round the hospital, and they ask any questions and make any inquiries they think proper.

1369. Do they trust at all, and to any considerable extent, to the representations of the medical officers or matron, as to the comforts necessary for the patients?—Chiefly of the matron and the apothecary, the physicians never accompany them.

1370. Have some improvements been made lately upon the female side, by putting the loose straw into ticks?—Yes.

1371. At whose suggestion was that alteration made?—It was entirely in consequence of the inquiry into the circumstances connected with the treatment of Miss H. There was no doubt that the appearances on her body were occasioned, as reported by the medical officer, from punctures from pieces of straw. We were told, that however unpleasant the sound of putting lunatics on straw might be, notwithstanding that, straw was better for what are ordinarily called dirty patients, and most comfortable for them.

1372. By whom were you told that?—Mr. Wood, the medical officer, gave that opinion, and we understood it was an opinion also given by a professional member of this Board. However, we said, notwithstanding that, after the results that appeared, it should not be the case for the future.

1373. Do you ever yourself go round the hospital?—Frequently.

1374. Have you ever been into the basement ward?—I have.

1375. In the part which is called the back basement?—Yes.

1376. Were you ever aware that patients in the back basement, before they are locked up at night, are stripped perfectly naked, and placed in their cells without any bed clothes whatever?—No, I was not aware of that.

1377. If such a statement had come to your knowledge, would you not have taken measures to alter it?—I would have taken immediate steps to have brought it under the knowledge of the Governors, who I believe would not have tolerated the continuance of such a system for one day.

1378. Does it not occur to you as extraordinary, assuming such a practice to have existed, that it should have taken place without the knowledge of either of the visiting physicians?—It appears almost incomprehensible, and quite inconsistent with the proper discharge of their duties.

1379. What power has the treasurer, with respect to the patients; can he give a general order independent of the committee of Governors?—

P. N. Laurie, Esq.

10 July 1851.

Governors?—No, I am not aware of his possessing any such power.

1380. What steps have you taken with respect to the abolition of restraint?—I reported from time to time to the Bethlehem committee, the progress which the non-restraint system was making at Hanwell and other asylums, being one of the visiting justices, and the facility with which the restraint system had been materially reduced. The physicians resisted it, and reported against it. They said it was fallacious to a great extent, but they would do the best they could to reduce it. At last, however, I threatened if they did not do it, to the extent it had been reduced in other establishments, that I would take means of giving publicity to that state of things; I then found it was done.

1381. Can you give any statement to the Commissioners as to the degree and character of the exercise and reaction allowed to the patients?—I think it is limited too much; I think the industrial occupations for the patients might be increased, especially of the class of incurable patients, in point of education, such as reading and writing and ordinary employment. I think a greater degree of employment might be offered to them than is now. There is a difficulty n the hospital with respect to providing employment for patients who come in and are cured in a very short space of time. I think the permanent class have neither sufficient exercise nor employment.

1382. Have the visiting physicians made any suggestion upon that point?—None whatever; I believe if their annual reports to the Governors for the last 17 years (I will answer for the last two), were referred to, that you will find not a single suggestion has emanated from them upon the point.

1383. Have they not suggested the necessity of having an exclusive portion of the hospital used for an infirmary?—That was after I had forced the suggestion upon them. I also urged strongly upon them the advantage of dividing our wards, which I think much too long, and which leads to a difficulty in the classification. They then recommended that, but with respect to employments their reports are a blank.

1384. Do you know the number of books that they have in Bethlehem?—There is a fine library provided for the patients, both male and female.

1385. Have they access to them?—All the patients have not; it is only for the quiet and better class of patients.

1386. Do you consider that Mr. Wood, the resident medical officer, has too much to do?—Well, I think he has rather too much; I do not say he has too much to do as an officer. I know that at Hanwell, where they have 900 patients, they have but two officers. On one side, there are 450 patients, and Dr. Wood has only that number. The difficulty is, that every medical officer must have an opportunity of leaving for exercise, and then the hospital is practically left without medical supervision. I think the exemption of this hospital from the official visitation of the Commissioners, has not been attended with advantage.

1387. Of what class or description are the nurses and attendants?—I am hardly competent to answer that question. The female attendants

attendants are selected by the matron, and the male attendants by the apothecary. I must say, however, that I think both, but especially the female attendants, are of an inferior description, compared with those I have seen at other places. They have not that kindness of manner about them that they ought to have. Altogether, the attendance is not of such a character as might be obtained for an establishment like Bethlehem, where the attendants have good living, good wages, and every comfort. *P. N. Laurie, Esq.* 10 July 1851.

[The Witness withdrew.

Mr. *Thomas Joseph H.*, called in; and, having been sworn, was Examined, as follows:

1388. WHERE do you live?—At H—Street, Walworth. Mr. *T. J. H.*

1389. Was your daughter an inmate of Bethlehem Hospital?—Yes.

1390. When was she admitted a patient in Bethlehem Hospital?—Upon the 4th of April last.

1391. What was her bodily state of health at that time?—Her bodily state of health was what I considered to be pretty good. I will give you an idea of her state of health. Upon the evening I got her into Bethlehem Hospital I asked my doctor if he thought her system would stand the treatment. He asked me what I meant; I said, "Do you consider that she is strong enough?" He said, she never was in better health.

1392. Your own doctor?—Yes.

1393. Who is he?—Mr. Taylor. He said, "As far as that goes, I will bet you a guinea that they will give your daughter no medicine for any bodily ailment."

1394. Was she bad in her mind at that time?—Yes.

1395. Did you take her to the hospital?—I did.

1396. To whom did you deliver her?—I delivered her into the hands of Elizabeth Cliffin and another nurse of the name of Gott.

1397. Gott, or Code?—No; there are two nurses who took in the patients.

1398. Did they say anything when you delivered her to them?—When they came back to examine her clothes, they said, "She is of dirty habits, is she not?" Her mother made answer, and said, "No, only within the last day or two."

1399. Did her mother go with you?—Yes.

1400. What occurred then?—We left the hospital.

1401. Did you see Mrs. Hunter, the matron?—They took my daughter to a private door apparently, and some lady came out who, I afterwards knew, was Mrs. Hunter, but she merely looked at my daughter as they took her before the door; they then took my daughter away, and I saw no more of her.

1402. Did Mrs. Hunter say anything to you?—No.

1403. Did she examine your daughter at all?—No.

1404. What occurred next?—I felt very unhappy; I asked when I could see my daughter, and I was told I could not see her under a month.

1405. Who

Mr. *T. J. H.*

10 July 1851.

1405. Who told you that?—The porter at the gate and the parties inside.

1406. What parties?—The nurse.

1407. Cliffin?—No, another nurse. I believe Cliffin did mention it; I asked when the clothes were being examined, and they told me I might inquire after her health in eight or nine days.

1408. They said you could not see her for a month, but that you might inquire after her health in eight or nine days?—Yes, in eight or nine days after her admission.

1409. That would be upon the 12th of April?—Yes. When I went I saw Dr. Wood and likewise the nurse Cliffin; I asked after my daughter, and they both stated that she was somewhat better; that she was eating her food better.

1410. Did you know before that time that she would not take her food well?—She took sufficient. Occasionally she would refuse it, but at other times she took quite sufficient.

1411. What did Dr. Wood or Cliffin say?—Dr. Wood said my daughter was somewhat better; that she was very bad when she came in, but was somewhat better now; she took her food better. I asked Cliffin about it, and she said she took quite sufficient food.

1412. Was that in the presence of Dr. Wood?—No. She further said, "There is one thing I have found out, that if she chooses to take it I let her, if not I leave it;" which I thought a very strange observation to make; "But," says she, "she takes sufficient."

1413. Did you see her on that occasion?—No.

1414. Did you ask to see her?—It was against the rules; I did not ask.

1415. How did you know it was against the rule?—I was told it.

1416. Did anybody say anything to you about the rules?—I begged pardon of Dr. Wood; I said I hoped he would not deem me troublesome, but how often might I call to inquire after my daughter; and he said, "Well, Mr. H., you can call when you like, and we will let you know how she is."

1417. Was anything said upon that day about your seeing her?—Nothing at all.

1418. Was it a positive refusal to see her?—I think it was against the rule.

1419. That was upon the 12th?—Yes.

1420. Did you make some application about five days after that?—On the Thursday night I heard that she had called for her mother.

1421. Five days afterwards, in fact, would be about 13 days after she had been placed in the hospital?—Yes.

1422. What did you hear?—I heard that she had called for her mother.

1423. From whom did you hear that?—From one of the male attendants.

1424. Did you then write to Dr. Wood?—I felt very uneasy and could not rest, and when I reached my office where I am employed I wrote a letter to him.

1425. You were uneasy, and you wrote a letter to Dr. Wood; what was the effect of that letter?—The effect of the letter was, that if any bad

Mr. *T. J. H.*

10 July 1851.

bad symptoms occurred I begged Dr. Wood to inform me, in order that her mother might be present in case anything happened.

1426. Did you deliver that letter at the hospital?—I did.

1427. What part of the day; in the middle of the day?—No, at six o'clock in the morning.

1428. When did you hear from Dr. Wood?—At half-past two in the afternoon I received this letter from Dr. Wood: "Bethlehem Hospital, 18 April. Dr. Wood regrets to inform Mr. H. that his daughter is in a very precarious state of health, with such symptoms of paralysis that it has been thought better to discharge her, there being very little hope of her recovery, and it being presumed from Mr. H.'s note that her parents would wish her to be with them in the event of a fatal termination, which it is feared there is every reason to anticipate."

1429. That is the letter you received from Dr. Wood?—Yes.

1430. What did you do thereupon?—I immediately took that letter to my medical man, Mr. Taylor, and showed it to him, and he asked me what I intended doing, and I said, decidedly to bring her away.

1431. Did you then go there?—Yes; myself and her mother took a cab, and the cab was kept waiting an hour before my daughter was brought up.

1432. What time of the day was it?—It was 20 minutes after four when I went to fetch the cab, and it was half-past five when we left.

1433. Did you and your wife take your daughter home that evening?—We did. Upon my daughter being brought up from her ward, we heard her cry "Oh dear me," and when she came up, her nose was bleeding.

1434. Was it bleeding freely, or a scratch?—No, it was not a scratch, the blood was coming from one of her nostrils.

1435. So as to trickle down as far as her chin?—It was down to her mouth.

1436. In what condition did she appear?—She was not able to stand.

1437. Was she otherwise altered?—Yes, she had a cut upon her left or right cheek, I am not positive which, and likewise a wound upon her upper lip.

1438. Was she able to stand?—No.

1439. Did she know you or her mother?—Yes; she put her arm round her mother's neck, and said, "This is my dear mother," and looked at the keeper in a way which I construed into a look of defiance; she said "This is my dear mother," and she kissed her.

1440. Did you take her home?—Yes.

1441. Did she bear the journey very well?—She smiled, and I asked her if she was glad that she was going home, and she said "Very glad," and she put her feet into my lap, as I sat opposite to her, and she said "This is my dear father."

1442. When you got home did you put her to bed, or did her mother examine her person?—Her mother, with other parties, undressed her.

1443. Some females?—Yes. I would also mention that we were obliged

Mr. *T. J. H.*
10 July 1851.

obliged to carry her to the cab, and from the cab, and when she got in doors she knew everybody.

1444. Your wife and some females put her to bed?—Yes.

1445. And examined her body?—They undressed her, and I was called up stairs, and I saw her as far as here (*describing it*); her stays were not off, but her arms had several punctured wounds, and her elbows, the bones were nearly through her skin.

1446. Was she far thinner than when she went?—Sir, she was an object as to flesh; she was gaining flesh when she went to the hospital.

1447. Was she gaining flesh?—Yes, the remark made was that her frock would not come to.

1448. Was she in fair flesh?—She was in fair flesh; she was a very small-boned young woman, but what you call fleshy for so small a size.

1449. Not at all emaciated?—Oh, dear, no; that I believe I can prove by several witnesses.

1450. The change for the worse, then, was very great?—So perceptible that I set it down that she was a dead girl.

1451. Did you call in any medical advice?—Immediately.

1452. Whom did you call in?—Mr. Taylor, and likewise his partner, Mr. Frederick Crisp.

1453. What did they do; did they examine her?—Yes, and they expressed deep regret and surprise to see her so very much reduced, and so emaciated; they said they never could have thought it.

1454. Did they express any opinion?—Yes; that she had been ill-treated; that she had never been fairly dealt with.

1455. Did they order medicine for her?—No, they did not order medicine at first; the first thing they ordered was a new-laid egg in brandy, which she ate with great relish.

1456. Did they apply anything to her body?—Not then; she went to sleep, and slept for five hours, and snored like a baby.

1457. When she awoke was any application made to the sores?—I believe she had a dose of medicine which was sent by Mr. Taylor, but I cannot speak to that. After that, I went to my office; the next day, Saturday, when I came home, she was shown more to me; her elbows, arms, and legs; I immediately went off to the Bethlehem Hospital, and asked to see the matron; I saw her, and I told her the state of the poor girl's body; she seemed to express great surprise, and asked me what I thought the wounds were done with; I said they looked as if done with a whip or small thong, or a series of thongs.

1458. What did she say?—She said such a thing was not possible; that she never saw such a thing she left me for half-an-hour by myself, so long that I thought she was not coming back; she then came with Cliffin, and they both stated the cause of the wounds.

1459. What cause did they state?—That the wounds on the elbow and nose and over the body were caused by the knots that were in the straw.

1460. Both the matron and Cliffin stated that?—They both stated that. I then spoke about her clothes, and I asked for them; they said I could not have them; I could have a portion, but some

some were wet; I said I had every convenience at home for drying them; they said if I insisted upon it, I could have the clothes, but if I thought proper to leave them there, I could have them on Monday dry.

1461. Did you take the clothes home?—Yes; a portion of them were wet.

1462. Did your daughter talk rationally at all times after she came home?—Yes, she expressed a wish on Sunday to see the minister she had sat under.

1463. Did she always talk rationally after she came home?—Yes, what little she did talk.

1464. Did she ever, when in that condition, complain of having been ill-treated or beaten?—Yes, she did.

1465. What did she say?—That she had been beaten by a woman.

1466. Did she specify the woman's name?—No.

1467. Did she say they had called her bad names?—Upon Monday morning her mother was very tired, and I was lying down by the side of the bed, and I had a conversation with my poor girl; she then said that she had had very bad language used towards her; I asked her what, and she said "Father, I don't like to tell you."

1468. She did not say who used the bad language?—No, she said a woman.

1469. What did her doctor do during this time?—The doctor came on Saturday night, and asked me what I intended doing, as he considered my daughter had evidently been very badly treated.

1470. Was that Mr. Taylor?—Yes; that was at half-past eight o'clock; he asked me if I thought we could see any one if we went to Bethlehem; I told him that Dr. Wood was out of town.

1471. Did he go to Bethlehem?—He did, and I went with him; he asked me.

1472. When was that?—Upon the Saturday night, at nine o'clock.

1473. Whom did you see?—He told me he saw the matron; I could hear them talk; I knew the voice, because I was merely outside the door. The door was open.

1474. Did he state to you the result of the conversation?—That he was very much dissatisfied with the reasons that were given. He wished to know when he could see Dr. Wood, or if he could see any medical man; and he was told that there was no medical man upon the premises. When we went to the gate, we asked to see the medical man, and we were told there was none upon the premises.

1475. Did you, then, come home?—Yes. Mr. Taylor was nearly an hour with the matron. We were told that there was no medical man upon the premises, and had not been since two o'clock that day. Mr. Taylor observed that he thought it was very wrong; he always understood that it was the medical man's duty to be upon the premises.

1476. Did your daughter get gradually worse?—Yes.

1477. Did she die upon the Monday?—Yes, upon Monday night at nine o'clock, and she expressed herself in these very words, that she had been cruelly beaten by a woman, not only to me and my wife, but likewise to four or five different parties whom I produced before the authorities of Bethlehem, and they spoke to the fact.

1478. In

Mr. *T. J. H.*

10 July 1851.

1478. In the meantime, upon the Sunday and Monday, did Mr. Taylor direct you to give her nourishing things?—Mr. Taylor attended her up to her death.

1479. Did he direct you to give her what nourishing things you could?—Yes.

1480. Did he express any opinion as to her condition?—He felt very much dissatisfied altogether.

1481. As to her treatment in Bethlehem?—Yes.

1482. After her death, was an examination of her body made by Dr. Taylor and his partner?—Yes.

1483. A *post mortem* examination, what we call a medical examination, of the body was made by Mr. Taylor and his partner?—Yes; and just as they were going to commence, Dr. Wood knocked at the door.

1484. What did he say; did he apply to be present at the examination?—No, he did not. When he came in, I opened the door myself, and Mr. Taylor said, "Good morning, sir." I told Mr. Taylor who he was, and Mr. Taylor informed him that he was just going to make a *post mortem* examination of the body, and he invited Dr. Wood to come in; he did so, and the *post mortem* examination was performed.

1485. In Dr. Wood's presence?—Yes. Then they came down stairs, and Dr. Wood asked me if I would leave the parlour, for they wanted to write something.

1486. Who wanted to write something?—Dr. Wood and Dr. Taylor; they did so, but they only read a portion of it to me.

1487. You were called in again, and they read a portion to you?—Yes.

1488. Did Dr. Wood say anything to you about the case?—Yes.

1489. What did he say?—Dr. Wood came down, and tried to pacify me.

1490. In what way?—By saying that he was very sorry that I had made a complaint against the authorities of Bethlehem. I told him I had not done so without a cause, and I was determined to follow it up, let the sacrifice be what it would.

1491. What complaint had you made at that time?—I had written that letter to Sir Peter Laurie (*handing it in*).

1492. When did you make a complaint to Sir Peter Laurie?—Upon the Monday previous to my daughter's death.

1493. As to her treatment in the hospital?—Yes, asking Sir Peter Laurie to condescend to call at my humble abode.

1494. Do you remember the day when the *post mortem* examination was made?—Yes.

1495. What day was it?—I think it was upon the Wednesday as she died upon the Monday.

1496. How long did she live after leaving the hospital?—Only two or three days.

1497. On what day did she die?—I brought her out on the Friday, and she died at nine o'clock in the evening of Monday.

1498. That would be the 21st of April?—Yes.

1499. Upon Wednesday, Dr. Wood came?—Yes. I wrote to Sir Peter Laurie on the Monday, and upon the Tuesday I received a reply.

Mr. *T. J. H.*
——
10 July 1851.

reply. I then made it my business to wait upon the treasurer at Bridewell Hospital, and I stated to him the case; I think it was upon the Tuesday, and he said that he would send some medical man to examine the body.

1500. Did the treasurer say so?—Yes, which was immediately done; in fact, by the time I got home I saw a cab at the door, which was my own doctor's, and while he was talking with me, Sir Alexander Morison came.

1501. Was this upon the Tuesday?—I think it was.

1502. Did Sir Alexander Morison see the body?—Yes, after death.

1503. Did he see it before Dr. Wood saw it?—Yes.

1504. What did Sir Alexander Morison say or do?—He treated the case in a very abrupt way, indeed.

1505. In what way?—Why, in a way that I felt myself insulted.

1506. What did he say or do?—In fact, he did not look at the body altogether. He said, "Oh, that is nothing but natural; the patient has knocked herself about."

1507. Did you say he did not see the whole of the body?—He did not wait to look at it.

1508. Were you with him the whole of the time?—Yes, and Mr. Taylor.

1509. How long was he in the room?—Only three minutes.

1510. When you say he did not see the whole of the body, why do you say so?—He seemed to treat the thing very cavalierly.

1511. How did you know he did not see the whole of the body?—I was at the foot of the bed; I saw everything he did.

1512. Did he turn the body over?—No.

1513. Did he see the back at all?—The mother showed him the back, but he did not turn the body over.

1514. Was the body turned over for his inspection?—Yes, it was; but he scarcely looked at it. He treated me so abruptly, that I threatened I would have an inquest; I felt myself hurt.

1515. What did he say when you spoke of an inquest?—He said "Well, sir, you can do that, if you like."

1516. Did anything further occur?—Not between me and Sir, Alexander Morison.

1517. What happened on the next day, when the *post mortem* examination took place?—Then another doctor came.

1518. From Bethlehem Hospital?—Yes, Mr. Lawrence.

1519. When was this?—The same day.

1520. Upon the Tuesday?—I think it was the Tuesday, but I have had so much trouble since that I do not recollect.

1521. What did he say or do?—He pointed out two bruises upon the ankle. I said, I thought she had been bound. He said, Well, she might have been, but he did not think so.

1522. What else?—He did not express to me his opinion about it any further than that it was possible the patient might have done it herself, but he did not say positively whether she had or had not.

1523. Mr. Lawrence states, in a letter that has been handed in at the

Mr. *T. J. H.*
—
10 July 1851.

the conclusion, that she had been in a violent state for two or three weeks before her death?—That I deny.

1524. While she was in Bethlehem Hospital was she Sir Alexander Morison's patient?—Yes, so I understood.

The following Documents were referred to in the Examination of this Witness:

"Bethlehem Hospital, 18th April.

"Dr. Wood regrets to inform Mr. H. that his daughter is in a very precarious state of health, with such symptoms of paralysis that it has been thought better to discharge her, there being very little hope of her recovery, and it being presumed, from Mr. H.'s note, that her parents would wish her to be with them in the event of a fatal termination, which it is feared there is every reason to anticipate."

"H—Street, Walworth,

"Worshipful Sir, 21 April 1851.

"Knowing from my boyhood your kindness and urbanity, and your ever ready wish to redress abuse or wrong in any shape inflicted, more particularly in any establishment in which you have any control, I think I am only doing my duty as a parent, in the first place, and in the second, to the heads of an establishment who I am sure, would never tolerate cruelty in any shape to be practised towards a poor lunatic; and thirdly, to the public.

"I now, Sir, bring to your notice a case of either cruelty or wanton neglect, in which my poor girl, our only child, has fallen a sacrifice, caused by or through the neglect of one of the female nurses or keepers belonging to Bethlehem Hospital.

"Now, Sir, for the facts, which can be verified by very respectable witnesses.

"On Friday, April 4th, my daughter was admitted a patient into Bethlehem Hospital. On leaving her I was informed I might call in eight or nine days and inquire how she was; I called on April 12th, which was eight days. I saw both the doctor and the nurse, and was told she was somewhat better, that she took her food better; I went away satisfied. On the following Thursday I could not rest, something seemed to haunt my mind my daughter was worse. I consequently wrote a note to Dr. Wood, stating my fears, and begging of him if any bad symptoms appeared to let me know, that her mother might be with her. Dr. Wood was kind enough to forward me a note in return to mine, informing me bad symptoms had appeared, and that my poor girl was discharged. Me and her mother immediately went to the hospital, saw Dr. Wood, who rang for my daughter; she was brought up to us, what our feelings were I hardly can tell, my poor girl could not stand, and was a complete idiot. But, sir, what was my horror when called up stairs by her mother and others when they had undressed her to put

put her to bed, her body, her legs and her arms, had above 20 wounds and lacerations on them, two also on her face, her bones ready to start through the skin; how caused or inflicted no one who has seen her but wish and desire to know; her medical attendant can speak as to her condition, both before her admission and since her return. And if, Sir Peter, you would condescend to pay my humble abode a visit, you would there see I have not made the case one iota worse than it really is; in fact my pen but feebly tells the sad tale. I have no doubt ere these lines reach you my poor girl will be in her coffin, but that shall not prevent your satisfying yourself as to the truth of my statement.

Mr. *T. J. H.*
10 July 1851.

"Permit me, &c.
(signed) "*T. J. H.*"

"Sir Peter Laurie presents his compliments to Mr. H., and begs to say, that he has forwarded his letter to Dr. Wood, and begged of him to report about the case as soon as possible to the treasurer or himself.

"Sir Peter Laurie is extremely sorry to hear of the distressing state of Mr. H.'s daughter.

"7, Park-square, 22 April 1851."

"Friday, 4 April 1851.

"Hannah H., who had been under my care about three weeks with symptoms of cerebral disease, tending to mania, left her home, being admitted a patient of Bethlehem Hospital. At this time, although spare, her face and limbs were firm, and had an average amount of flesh, she being but little thinner than during her ordinary state of health. She had on two or three occasions been violent, but was restrained by attendants, one day the use of a strait-jacket being had recourse to. There was then no wound or abrasion of skin about the body.

"Friday, 18th April, I was requested again to see her, understanding she was brought home from Bethlehem Hospital. Her state at this time was as follows:—Her appearance is much altered, being very emaciated, her bones almost protruding through the skin. On the body are several wounds; one small one on the right *ala nasi*, one on the right side of the upper lip (these I was told by the matron had been produced by an accident, the patient having been fed out of a cup or saucer which had a small triangular piece broken out of it); these wounds were scabbed, and had no surrounding inflammation; there was another wound, similar to a scratch, on the right cheek, about two-thirds of an inch in length, of the same character as the former. On the outer side of the right elbow were several small wounds, or abrasions; solution of continuity of the skin had scarcely taken place. On both hips there were the same appearances; namely, several small wounds, varying in size from half the size of a pea to nearly that of a fourpenny piece, being abrasions;

Mr. *T. J. H.*
10 July 1851.

some were covered with a small scab, the surrounding skin was red, and slightly inflamed, having an appearance not unlike that produced by pressure in a bed-ridden patient. On the knees, over the patella, and on the outer side were some small wounds of the same character; also on each ankle, on the outer side, there was in particular one wound, about one-third of an inch long by one-eighth in width; these had somewhat the appearance as if produced by the pressure of something bound round the ankles. The several wounds were accounted for variously, those of the face have been already alluded to. The matron considered they had been caused by the cut-ends and rough portions of the straw on which the patient had lain. Sir Alexander Morison, whom I had the honour of meeting at the patient's residence, considered they were produced by the patient knocking herself about. Dr. Wood, who was present at the *post mortem* inspection, was of opinion that they were self-inflicted by picking. The patient's mind at this time was collected. She answered questions slowly, put her tongue out, and held her hand out to shake mine, and said, "Good night." She moved all her limbs, although feebly. The left eye was more prominent than the right, the lid of the latter not being readily raised. The right pupil largely dilated, the left one contracted. She was suffering from constant diarrhœa.

(signed) "*Charles Taylor*,
M.R.C.S., & L.A.C."

"4, Bethel-place, Camberwell,
25 April 1851."

"Bridewell Hospital, 22 April 1851.

"One o'clock, P. M.

"By desire of the treasurer of Bridewell and Bethlehem Hospital, I have just examined the body of Hannah H., late a patient in Bethlehem Hospital. I found several superficial bruises on different parts of her body, and redness and tendency to excoriation about the nates, none of them at all connected with the cause of her death, which was occasioned by general paralysis. The causes I consider to be accidental, and in no way to be attributed to want of care and kindness.

(signed) "*Alexander Morison*, M. D."

"Dear Sir, Whitehall-place, 22 April 1851.

I have inspected the body of the young woman lately discharged from Bethlehem now lying at H—— Street, Walworth, and could see nothing leading to the conclusion, or even the suspicion, that she had met with ill-usage before death; there had been no open sore at the time of death; the buttocks were red and slightly excoriated from having been wetted with urine, as generally happens in dirty patients, and the hips were in a nearly similar state, the bones having become very prominent in consequence of the patient's considerable

considerable emaciation, and the skin having conesquently been fretted by the position of the body, and probably by the restlessness of the patient: there were four or five brownish and quite dry marks where the skin had been probably excoriated, principally on the legs; and there was a very faint bruise mark near one of these. The surrounding skin in all these situations was of its natural pale colour; such appearances, and probably to a greater extent, would almost invariably be found on the body of a patient who had been in a violent state for two or three weeks before death.

Mr. *T. J. H.*
10 July 1851.

"I remain, &c.

"J. E. Johnson, Esq." (signed) "*Wm. Lawrence.*"

"EXAMINATION of the Body of *Hannah H.*

"23 April 1851.

"Body emaciated; some superficial abrasions on the surface of the lower extremities, probably owing to the scratching or picking of the skin; slight ecchymosis under back part of scalp; a small chronic abscess in the integument of the right side of head, apparently connected with an old wound, the scar of which was obvious, but must have been healed some months.

"On removing the calvarium, the arachnoid was found universally opaque, the pia mater loaded with serum, the ventricles considerably distended with fluid, capable of holding from two to three ounces each; nothing further morbid observed in the brain, which was of average firmness; some fluid remained in the case of the skull after the brain was removed. The lungs were healthy; some old adhesion existed in the left pleura. Heart rather flabby. Abdominal viscera healthy.

"We are of opinion that the death of the deceased was clearly referable to the disease observed within the skull, which had existed some months; and there was no evidence to show that she had sustained any injury which could any way have hastened her death.

(signed) "*Wm. Wood*, M.D., Licentiate of the Royal College of Physicians.
Frederick Augustus Crisp, M.R.C.S. & L.A.C.
Chas. Taylor, M.R.C.S. & L.A.C."

[The Witness withdrew.

Elinor W., called in; and, having been sworn, was examined by the Commissioners as follows:

Elinor W.

1525. WHERE do you live?—No. 12, —— street, Westminster.

1526. Were you a patient for some time in Bethlehem Hospital?—From the 22d or 24th of March last.

1527. When did you come out?—I have been out a month to-morrow.

1528. Do you mean by a month four weeks, or the same day of the month?—It is four weeks to-morrow; I came out on a Friday.

Elinor W.

10 July 1851.

1529. Whose patient were you?—Dr. Monro's.

1530. In what part of the hospital were you placed?—In No. 2 ward.

1531. How long did you remain there?—A few days; I cannot say how many days.

1532. Were you removed?—Yes.

1533. Where to?—Down to the basement.

1534. By whose order?—I do not know whose order it was.

1535. What nurse were you placed under?—Ellen Code, one nurse was called.

1536. Who besides?—Elizabeth Cliffin and Ellen were two, and Mrs. Turner and Mrs. Sanderson. There were four nurses in the basement ward.

1537. Who took care of you particularly?—Ellen was my nurse.

1538. Do you remember Mr. H.'s daughter being there?—Very well indeed when she was brought there first.

1539. Did you see her the first day she came into the hospital?—Yes, she was brought into the same room as a bad patient; I was in the sitting-room. She came in a black frock; that was the dress I saw her in.

1540. Was she taken first to No. 2?—I saw her in this room; I cannot say whether she was taken there first.

1541. Was that in the basement?—Yes, it was in the basement where I saw her.

1542. In what state was she when she was brought in?—She was very quiet, very still; she chiefly stood. I never saw her sit, unless they pushed her down; then she would sit a little while.

1543. Under whose care was she placed?—Under Ellen's.

1544. Did she sleep near to you?—Yes, in the basement, about three rooms from me.

1545. Did you ever see her violent while she was there?—Never; very quiet indeed.

1546. State what you saw done to her; how was she treated by the nurses?—Do you mean when she was going to have her food?

1547. No, generally?—When she had her food given to her she was fed from a bowl. Several times I saw her laid on her back, and the nurses kneel on her and feed her.

1548. Where was she placed?—In this room; she was fed in the sitting-room.

1549. Was she placed on her back?—She was laid on her back, and the nurses put their knee on each arm; and they stood like over her.

1550. The two nurses?—Only one could feed her.

1551. Did she rest her knee on her breast?—No, she leant over her; that was the form in which she fed her.

1552. Did she resist very much?—No, she was very quiet. I think they do it to feed the patients quickly, and not to take any pains over them. The food was put into a great bowl.

1553. Before they laid her on her back to feed her, did they try to feed her while she was sitting up?—I never saw them.

1554. Did they never try to feed her in the ordinary way?—

Several

Elinor W.

10 July 1851.

Several times; they gave her bits of bread and butter, and tea from half-pint jugs.

1555. Did you ever see her take her food voluntarily, willingly?—When they would give it in her hand she would take it; tea, and thin bread and butter.

1556. What was the food they gave her when they laid her down?—Bread soaked in tea, in a bowl.

1557. Was it breakfast?—Breakfast or tea.

1558. How was she fed for dinner?—From a plate in the same way; if she did not take it sitting up, they would lay her down and feed her in the same way.

1559. If she would not feed herself, they would lay her down?—Yes; no other nurse fed the patients like that, but this Ellen.

1560. Did Ellen feed other patients in the same way?—One more, Mrs. S——, an elderly lady; I have seen her at times fed in the same way.

1561. Did Mrs. S. refuse her food?—She did refuse it sometimes.

1562. Was it upon these occasions that Ellen administered food in the way you have described?—Yes, sometimes it was given to her in that way when she did not refuse.

1563. You never knew her ask the old lady to have it?—I never knew her to ask the old lady.

1564. Then Ellen always, or generally, although not refused, put Mrs. S. on her back, and gave her food in the way you have described?—Yes, from a bowl.

1565. And a spoon?—No; the nurse took it with her own hand, and put it into the patient's mouth; if it was bread and milk it was all the same, and what they did not take from the hand was thrown into the bowl.

1566. Did you ever see Miss H. or Mrs. S. resist this?—No, only they did not like it.

1567. Did you ever hear them complain of it?—They were almost strangled when they did get up; when they had done feeding her I could see it running out of their mouths, and their eyes seemed ready to start from their heads.

1568. Was any nurse present when Ellen did this?—I never saw one.

1569. Was she the only nurse in the room?—She was the only nurse in the room when they fed the patients; the other nurse, Sanderson, who belonged to the basement, was generally out at that time.

1570. Was this in the sitting-room?—I never saw them fed in the bed-room; I think she used to do that, because it would give her less trouble.

1571. Was any complaint made upon the subject of the mode in which the patients were fed?—I never heard any complain of it.

1572. Did you never see another nurse present when Ellen did this?—No, I never saw one present.

1573. Did Cliffin come into this part of the ward often?—She often came against the sitting-room door, when Mrs. Hunter came round.

1574. Did Cliffin ever come to see into the condition of the beds

Elinor W.

10 July 1851.

in which the patients slept?—No, I never saw her in my life round the basement.

1575. Then Cliffin could not tell whether the beds were clean or dirty, or how they were made up?—No.

1576. Or how the patients were; whether they were comfortable or not in bed?—No, she never was round the basement once to my knowledge, not where the patients slept.

1577. Is she the principal nurse of the ward?—Yes.

1578. At what time were the patients sent to bed?—From about half-past five to six, never later than six.

1579. And they remained in the wards till what time?—Till half-past six, and sometimes later in the morning.

1580. Did any patients remain up as long as eight o'clock in that ward?—Two or three of the picked ones.

1581. But generally the bad patients in the ward went to bed before six o'clock?—Yes.

1582. And remained locked up in their separate beds until half-past six, or later, the next morning?—Yes.

1583. Of what did the beds consist of in this part of the basement-story?—Of straw.

1584. Loose straw?—Loose straw; some were in troughs.

1585. Where you and Miss H. slept?—She slept in a trough, as I call it; I slept in a bedstead with naked straw in it.

1586. Loose straw?—Yes.

1587. Some had troughs, and some had bedsteads?—Yes.

1588. How many patients slept on that kind of bed?—Sometimes there were seven, or eight, or nine, or ten; not at all times alike.

1589. How were the patients put to bed; had they any night clothes?—None at all.

1590. Neither you nor Miss H.?—I had none for a week or two; I do not recollect that Miss H. slept in her chemise once, but I had my chemise.

1591. Do you know whether she had anything between her body and the straw?—There was a blanket spread on the straw.

1592. A good large blanket?—Very small.

1593. So as scarcely to cover the straw?—Very narrow indeed.

1594. What was over the patient?—A quilt.

1595. The patients were naked?—Yes, quite naked.

1596. Do you know whether the patients sometimes get into the straw itself, so that they lie naked upon the straw?—Yes, very likely.

1597. Do you know that it was so; have you ever known a case where the blanket was moved below?—I believe Miss H. slept upon naked straw, because her clothes always seemed to be in such a heap.

1598. Then she slept frequently, you think, upon straw with nothing between her and the straw?—She must have slept so, because the straw was filthy.

1599. Have you not upon some occasions gone into Miss H.'s room and helped to get her up?—I have gone to the door; I went once into the room to look at her; I could not make her out exactly, it was some person I thought dead when I looked in, she was so still

and

Elinor W.

10 July 1851.

and quiet, lying in the same state or posture as she was put to bed in the evening.

1600. Was she lying upon the blanket, or upon the straw?—Upon the straw; her face was lying towards the door.

1601. Was her head upon the straw, or on the blanket put on the straw?—I cannot say for certain.

1602. Did anybody ever come and look into her bedroom at night?—I never heard anybody unlock a door once in my life; they never unlocked mine.

1603. During the time you were there, did the matron, Mrs. Hunter, ever come into the sleeping rooms at night?—No, never once.

1604. Did Dr. Wood ever come?—Never once.

1605. After the patients were locked up for the night?—Never.

1606. Did Ellen Cliffin?—I never saw her.

1607. Did you ever hear the night nurses come round?—I used to hear them about in the basement; I used to hear them speak; I think there were two, but they never opened the doors.

1608. The night nurses never opened the doors of the cells?—Never once.

1609. In the morning, when the dirty patients were got up, how were they washed and cleansed?—They were washed from a pail with a mop out upon the stones, the stones which they stood upon.

1610. Was this in the gallery?—This was in the basement; they were taken out from the rooms on to the stones.

1611. On to the flags?—Yes.

1612. Is that the gallery where you walk up and down?—Yes.

1613. Were they laid down upon the stones and washed?—Yes, with a mop.

1614. Were they laid down, or were they standing?—Laid down, they were so very filthy. Those that were filthy were laid down, and two nurses washed them; sometimes a person of the name of Saunderson and Ellen.

1615. Which nurses; Ellen and Saunderson?—Saunderson was one, and Ellen the other. Saunderson held the patients, and Ellen took the mop and washed them with water from the pail.

1616. Where did they get the water?—At the top, from a pump or tank.

1617. Was there any warm water mixed with it?—No, because I have used the same water myself to cleanse a bowl.

1618. Was it cold?—Yes.

1619. Was it cold weather sometimes when this took place?—Last March and April were very cold; I was so cold in my feet that I have sat for hours rubbing them.

1620. After they were washed and mopped with the cold water were they dried?—Never.

1621. Was any towel or cloth used for the purpose of drying them?—I never saw such a thing.

1622. Were they then dressed?—They put their clothes on directly.

1623. Were the clothes put on while they were wet?—Yes.

 1624. Had

Elinor W.

10 July 1851.

1624. Had you a towel to wash yourself?—I could come round and wash myself at the water-closet adjoining the sitting-room.

1625. Had you cloths to dry yourself?—Yes.

1626. How many patients have you ever seen washed in that way with the mop?—Why there was a person of the name of Miss G.; there have been as many as five or six washed like that.

1627. In a day?—Yes.

1628. Give us the names of those five or six?—I only recollect Miss G. and Miss H.; there was one who was discharged, but I have forgotten her name.

1629. Did any other nurses than Ellen Code and Saunderson mop the patients in that way with cold water?—No, only those two.

1630. Did Mrs. Turner?—No, she had no business in the basement; they were the only two.

1631. Did the matron ever come into the ward while the patients were being washed in the basement?—I never saw her there in my life.

1632. Did any other nurse see the patients mopped in that way?—No.

1633. Did Ellen Cliffin come in?—I never saw her there in my life.

1634. When the patients are put to bed at night naked, what becomes of their clothes?—They are put outside upon a little place, upon a little stool outside the door, everything.

1635. So that they could not get at them?—They could not get at a thing.

1636. Did you ever see the patients in any other part of the basement struck or ill-treated by any nurse?—They will drag them along very fast if they cannot walk.

1637. Did you ever see any of them struck with a broom?—No; I was struck with the broom once.

1638. Who struck you?—Mrs. Turner.

1639. Did you ever see her strike anyone else?—No.

1640. What kind of a blow was it?—She hit my knuckles as hard as she could hit them.

1641. What for?—Because I climbed up to the window.

1642. Did you ever see Ellen strike any of them?—No; only push them about.

1643. Did you ever see any of the nurses strike Miss H.?—I cannot say I ever saw them strike her.

1644. Did you ever see any of the patients strike her?—No, none of the patients ever touched her.

1645. Did you ever see any of the nurses angry with Miss H., and impatient?—They were very cross sometimes.

1646. Who?—Ellen was the most that was so.

1647. Did they ever threaten her?—They only threatened, if she were not more clean, how they would serve her.

1648. How would they serve her?—They would lock her up by herself.

1649. Did you ever hear any of them call her offensive names?—Yes; they called her "a stubborn Westminster whore."

1650. Who

Elinor W.

10 July 1851.

1650. Who called her that?—Ellen.

1651. Did any other nurse use bad language to the patients?—I never heard them.

1652. Did Ellen use any bad language to other patients as well?—Yes, she used it to me.

1653. What language did she make use of?—That I was "a rotten Westminster whore." That was her frequent language.

1654. Did Cliffin ever strike you, or did you ever see her strike anybody else?—No.

1655. Not with any keys?—No.

1656. Did you ever see any nurse strike any of the patients with keys?—I do not recollect it.

1657. Did you not say upon a former occasion that the nurses sometimes struck a patient with keys?—A young girl, of the name of Elizabeth W., told me that they used to beat her dreadfully with the keys.

1658. Was she a patient with you?—She was.

1659. Has she complained that she has been cruelly beaten by Cliffin with the keys?—She said she had wounds from the keys which she could show, and that she had been ill-treated as well.

1660. Do you mean cruelly treated in other ways besides?—I think so.

1661. Did Elizabeth W. complain of Cliffin's treatment to Mrs. Hunter?—Yes.

1662. What complaint did she make?—She said she was cruelly treated by Cliffin; that she was beaten with keys, and hurt very much, and there was something the matter with her finger. Mrs. Hunter said she wished she would let it rest.

1663. Did Mrs. Hunter say this in your presence?—No; W. told me.

1664. All you know about what she complained of to Mrs. Hunter is what she told you?—No, I was present..

1665. Were you present when she complained to Mrs. Hunter about Cliffin's treatment?—Yes.

1666. Did not you yourself complain to Mrs. Hunter about your treatment?—I did. I asked her why I was kept upon straw so long.

1667. What did she say?—She said I should be removed; that she was not aware I had been so long upon straw.

1668. Did you complain to Mrs. Hunter at that time that you had been ill-treated or beaten?—No.

1669. You did not complain to her of having been beaten with a broom?—Not when I was down stairs.

1670. Did you at any time complain to Mrs. Hunter of the treatment of the nurses towards you?—No. I told her what I had seen done to other patients, and she told me it would be better to let it rest. I told her I would tell the committee. Mrs. Hunter said, "You had better let it rest."

[The Witness withdrew.

[Adjourned to Thursday next, at One o'clock.

Thursday, 17 *July* 1851.

B. W. PROCTER, Esq., in the Chair.

C. Taylor, Esq., Surgeon, called; and, having been sworn, was examined by the Commissioners as follows:

C. Taylor, Esq.

17 July 1851.

1671. Where do you reside?—At No. 4, Bethell-place, Camberwell.

1672. Did you know the daughter of Mr. Thomas Joseph H.?—Yes.

1673. What was her name?—Hannah.

1674. Had you been in the habit of attending her medically before she went to Bethlehem Hospital?—For some time.

1675. Do you recollect when she went to Bethlehem Hospital?—I have made a memorandum of the date in case I should want to refer to it.

1676. Was it on the 4th April?—I think it was on Friday the 4th of April.

1677. On that day what was her bodily state?—She had been ill for some time. I think I had been in close attendance upon her for about three weeks. She was naturally thin, and of course she was thinner when she went into the hospital, but she was not greatly emaciated. She had the average amount of flesh and strength for an invalid.

1678. When was that memorandum made that you hold in your hand?—I copied this from a note-book of entries made prior to her leaving home. She was thin, but still she had an average amount of flesh and strength. She would not speak when spoken to, although we believed that she understood questions. It is my belief that there were no wounds on her body at that time. I did not have her stripped and examined. I did not suspect there were any wounds, I imagined there were none.

1679. Did you make any inquiry whether there were any wounds or abrasions on her body at that time?—No.

1680. Did you examine her body?—Certainly not. I had been in daily attendance upon her, and I presume if there had been anything of that sort, my attention would have been called to it.

1681. What do you mean by the word "average"?—By the word "average" I mean the flesh she had had during the two years I had attended her; she had somewhat fallen away.

1682. She had somewhere about the amount of flesh that she had had for two years, is that what you mean by the word "average"?—Yes.

1683. Was she materially worse at the expiration of the two years than she was at the commencement of the two years?—At this time I did not anticipate any danger to her life.

1684. Then

C. Taylor, Esq.

17 July 1851.

1684. Then she was not materially worse in point of bodily health, at the expiration of the two years, than she was at the commencement? —No, and a month before that I should say she was in good health.

1685. Did you make any statement to the authorities of the hospital, as to her mental and bodily state on her admission?—Yes, I filled up the usual papers concerning her admission into Bethlehem.

1686. Do you remember of what that statement consisted?—It is so long back that I really cannot remember the particulars of these things. If you have the paper and would ask me any questions concerning it, I could safely answer.

1687. In the paper you sent to Bethlehem Hospital, what did you describe her condition to be?—I believe I described her condition at that time, and my opinion that for two or three weeks she had been gradually changing her mind. She was not of sound mind. She was at that time violent, and once or twice had struck her mother.

1688. With respect to her bodily condition, what was the general tenour of your statement?—That her bodily health was tolerably good. My impression at that time was somewhat doubtful as to whether it was a case of hysterical mania, or mania depending upon the least chance of cerebral disease; but she was hysterical.

1689. Did you mention her having had various attacks of vomiting blood?—Yes.

1690. Did you consider the vomitings of blood to have acted as vicarious discharges?—I consider them as such.

1691. Have you any reason to believe there were any external wounds or sores before she was admitted into Bethlehem Hospital?—Certainly not. In respect of the formal paper I signed for her admission into Bethlehem, I would remark that I felt that hers was a case which would be admissible, and I answered every question straightforward, and without reserve, so that if they would not have admitted her if there had been any particular objection, and as usual I gave a short account of her case, in about a dozen lines.

1692. You have mentioned that she did not answer questions; had she become fatuous?—Yes.

1693. Did you not suspect very strongly that she had disease of the brain?—In reply to that, I would observe that a few days before Dr. Hughes, one of the assistant physicians at Guy's, was visiting a patient in my neighbourhood with me, I said I had got an interesting case, and asked him to see her. He saw her and examined her, and talked to her, and he was quite of my opinion that she was hysterical. He was more inclined to that opinion than anything else, and said, "Send her up to Guy's." I asked him if she would be taken in there, and he replied, "I will try to take her in." He took her there, and she walked up stairs into the ward. I was not then in the ward, but shortly after she had been up she screamed and cried violently, and wanted to go home to her mother. The consequence was, that they could not keep her, and she returned home the same day. I should imagine she was not in the ward half an hour.

1694. When was that, how long before she went to Bethlehem Hospital?—It was on the 4th April she went to Bethlehem Hospital, and this was March, about a week before; not more than that. She was admitted, and taken in at Guy's; but being noisy, it was contrary

C. Taylor, Esq.

17 July 1851.

trary to the rules of the place, and they will not keep patients who are a nuisance to others.

1695. Was she admitted into the general ward?—Yes.

1696. She was taken into the hospital, and then rejected?—She was sent out because she was noisy. I mention these particulars to show that during the long time of her illness there were a great many symptoms, hysterical symptoms, with vicarious discharges and vomiting of blood; and Dr. Hughes was inclined to be of opinion that it was hysteria.

1697. Had she been violent on two occasions, before she was sent to Bethlehem Hospital?—Yes.

1698. Had she been subject to restraint?—I put her on a strait-jacket the day before she went to Bethlehem.

1699. For the first time?—Yes; and this was merely because she had not people about her who could restrain her.

1700. You never suspected that she was a lunatic?—She was a temporary lunatic; she was a lunatic at the time.

1701. Did you see the strait-jacket on?—I helped to put it on.

1702. Was it tied in such a way as to occasion any marks on her body?—Certainly not.

1703. Before she went to Bethlehem, did her father ask you any questions as to the propriety of her being sent there?—I had advised him for a fortnight before that, if possible, she should be sent away from home. I thought it was temporary mental aberration, and that absence from home would be beneficial to her, and that she would recover.

1704. Did he ask you whether her bodily health would stand any treatment that she might be subjected to in the hospital?—I do not remember any particular question of that kind. He might, however, have done so. She went into Bethlehem with my full concurrence.

1705. Do you or do you not recollect his asking whether she was strong enough to undergo any medical treatment that she might be subjected to in the hospital?—I do not remember. For some days before she went in I did not put her under any special treatment for this mental aberration. The fact is, that she would not take medicine or food, at least not much, and I thought that a temporary absence from home for a certain time would be a very great circumstance in itself, and would be of use; and I think I said to Mr. H. that I thought it probable she would not be put under any special treatment. That was in reference to any course of medicine. My idea was that she would have mild mercurial treatment.

1706. Did she refuse her food before she went to Bethlehem Hospital?—Yes, she did.

1707. For what time?—For two or three days. I think she took some. She was not absolutely without nourishment during that space; it might be three or four days.

1708. Do you remember stating that her bodily health was so good that you thought it improbable they would give her medicine in the hospital for any bodily ailment?—I do not remember that I said anything particular about it.

1709. When did you next see her?—The evening she came out of the Bethlehem Hospital. I think it was on the 18th April. I have a memorandum

a memorandum here: "April 18th. Saw her on her return from Bethlehem in the evening." They requested me to see her.

1710. That was the day she was discharged from the hospital?—Yes; I saw her in the evening.

1711. How long was she in Bethlehem Hospital?—From the 4th of April to the 18th.

1712. And you saw her on her return?—Yes; very shortly afterwards.

1713. What was her bodily condition on the 18th?—She struck me as being very much altered.

1714. Where did you see her?—In her father's house, lying on the bed.

1715. You say she struck you as being very much altered?—Very much altered in appearance, and very emaciated. She was very much thinner than when she went in; and as I have said in my memorandum, "Her bones were almost projecting through her skin." Her mind was much less wandering than before she went in; if spoken to, she answered rationally, and when I said to her, "How do you do, Hannah?" she put her hand out and shook hands with me, and put her tongue out. Her countenance was very anxious and dejected, and she looked miserable altogether. My memorandum goes on, "She never speaks except when spoken to, and then there was some little hesitation about her answering. She moved all her limbs perfectly well, for I took care to examine her; there was no appearance of paralysis; the left eye was a little more prominent than the right eye; there was a slight, but very slight difference between the two. I observed occasionally a little tendency to squinting, which I had never noticed before she went into the hospital. I understood that she had had diarrhœa during the previous part of the day that she came home, and when I saw her in the evening, it was then continuing."

1716. Was she passing fetid stools unconsciously or involuntarily?—I can scarcely say, because the motions were loose and watery, and ran from her body. I heard of wounds that night, I think.

1717. Did you see anything?—I did not examine her.

1718. Did you see her face?—Yes.

1719. Did you observe on her face or any part of her body, cuts, bruises, or wounds?—I forget whether I noticed them that evening or not. My impression is that it was the next morning that I examined her; it might have been that evening.

1720. Was it very soon after she came home?—Yes.

1721. Was it within a day or so?—It was either the same evening, or between nine or 10 o'clock the next morning.

1722. What did you perceive?—I thoroughly examined her. Her mother said, "Oh! Mr. Taylor, my girl has been terribly ill-treated, and I wish you to look at her." I then particularly examined her body all over, and I have a written account of it, I know, somewhere.

1723. State it to the best of your recollection?—On referring to the memorandum I have with me, I find I have not mentioned the particular places which I did in the memorandum I wrote at the time, and Mr. H. had a copy of it.

1724. State to the best of your recollection, what was the condition

C. Taylor, Esq.

17 July 1851.

tion of her body when you examined her the next day?—To the best of my memory, there was a place on her upper lip.

1725. That is, while she was alive?—Yes; there was a place on her upper lip, and one on her cheek also.

1726. Had you seen that the day before?—I had not noticed it, as I told you before; I forget whether I examined her in the evening, or early the next morning. They were not very large places.

1727. Had she an eruption on her lip that she had been picking?—Not so much that I should have noticed it particularly.

1728. What time the preceding evening did you see her; was it dusk?—It was late in the evening on the 18th April.

1729. When you examined her body, what did you find?—On the outer part of each ankle there was a wound, and I think on both knees. I do not know whether on one or both knees. They were on the outer part.

1730. What do you mean by a wound?—That requires explanation; it was not an open wound; it was a kind of scab, and not a wound as if severe injury had been inflicted; it was dried up, and there was no discharge from it.

1731. Did it look like a scab or an abrasion?—Yes; it was not simply one only, there was one about the size of a fourpenny piece, and one or two the size of a pin's point, or the size of a pea.

1732. Were there several small abrasions and other scabs?—Yes.

1733. And on the outer part of the knees?—I do not know whether on one or on both; I rather think on one more than the other; on the outer part, and one on each side. I do not know whether the elbows were free. I think not quite free; there was a little there.

1734. What was on the side or hips?—Several places and excoriations.

1735. Same as on the knees?—More than there was on the knees.

1736. And inflamed round the edges?—Yes, there was some degree of redness; there were no sores on her back.

1737. No body sores?—No.

1738. Was that all?—I forget whether there were any about her shoulders or not.

1739. These were what you saw when she was alive?—Yes.

1740. How long did she live after you saw her for the first time?—She died on the 22d, which was four days afterwards.

1741. Did you see her several times between the 18th and 22d April?—Yes, daily; several times.

1742. What happened after she died?—We examined her body.

1743. Who do you mean by "we"?—Dr. Wood, the resident apothecary of Bethlehem Hospital, my partner Mr. Crisp, and myself.

1744. Did she appear to be gradually dying from the first time you saw her?—The immediate cause of her sinking no doubt was diarrhœa, and the want of food; she died from want of nourishment; she was worn out.

1745. Did she continue to refuse food at that time?—No; she took arrowroot and brandy.

1746. Then she did not refuse her food after her return?—I particularly spoke to her, and said, "Hannah, now you must take what I tell you." She said that she would, and she did.

1747. She

1747. She took what you prescribed, and you gave her what you thought necessary to sustain her?—Yes.

1748. Do you not think diarrhœa sufficient to exhaust her without starvation; you say she died from want of food?—When I say want of food, I don't mean to say she was starved; but I mean the combined effects of taking very little nourishment for some time, with constant diarrhœa going on 20 or 30 times a day, as I understood it was for two or three days, and continuing after she came out, completely exhausted her. I do not know what brought on the diarrhœa; but she had it on when she came out.

1749. Do you think she died from diarrhœa and exhaustion?—Yes.

1750. You do not know of your own knowledge that she had no food?—No.

1751. You think she died of diarrhœa, which diarrhœa she had before she came home?—Yes.

1752. She was labouring under diarrhœa when she came home?—Yes.

1753. Was she paralyzed at all?—No; I specially mentioned that just now.

1754. She died, you say, on the 22d of April?—Yes; she died at nine o'clock in the evening.

1755. What took place then?—On the following morning myself and partner were going on with the *post mortem* examination, and while doing so Dr. Wood came in.

1756. Yourself and your partner were the operators?—Yes; we were the operators, and Dr. Wood came in by chance.

1757. Describe to the Commissioners what was the external appearance of the body after death?—The body was very emaciated, and the several wounds I have described.

1758. Any other wounds?—No others. There was a good deal of redness about the lower part of the back, which was produced by diarrhœa; but there were no sores.

1759. About the knees?—Yes.

1760. Were there no body sores on the rump?—No.

1761. But you say there were scabs and abrasions on the body?—Yes.

1762. What do you think those resulted from?—I really do not know what to say they arose from.

1763. What is your opinion?—I have told you I do not know what to think they were caused by.

1764. Give your opinion upon your oath; it is a matter of great importance. Were they caused by harsh treatment, or by her tumbling about the floor; or were they caused by her scratching or picking herself?—The places on her ankles caused me to suspect whether she had not been bound.

1765. You are asked your opinion?—Well, I thought she had been bound, by the places on her ankles.

1766. Did they look as if they had been tied?—Yes, as if something had been tied round her ankles.

1767. Upon what part of the ankles, above or below?—Upon the external part of the ankle bone.

1768. Have you any doubt in your own mind that those injuries were

C. Taylor, Esq.

17 July 1851.

were caused by some sort of fetter, or bandage of some kind being applied to the ankles?—If you ask me if I have any doubt, I must really confess that I have not sufficient knowledge of lunatics.

1769. Did it appear to be so?—Yes.

1770. It had been done by some ligature?—Evidently there must have been; but half a dozen different persons might all give different opinions.

1771. The other parts could not be from ligatures?—No.

1772. What produced it?—I really do not know.

1773. Do you not know how they were produced?—I do not know.

1774. Can you form no opinion?—They were not body sores.

1775. They could not come of themselves?—No.

1776. They must have come from some violence or external application?—Yes, I know that; but it is much more easy to give a negative opinion than an affirmative one.

1777. Answer this question: did you suppose they were produced by scratching or picking?—I did not; but as to saying I have no doubt about it, that I certainly cannot. My impression was, that she had been ill-treated; that these wounds were produced in some way, but I could not say in what way.

1778. By tumbling about?—By tumbling about, or being struck or bruised, or something of that sort; but I could not say.

1779. Were there places on the elbows?—Yes, a little.

1780. And on the hips?—It was all the outer part.

1781. She might have been rubbed on the floor probably?—It might have been that; I don't know.

1782. You did not think they were done by picking?—I did not think they were self-inflicted, decidedly not, nor the result of body sores.

1783. They were not done by herself?—That was and is my belief.

1784. Did you see a scratch or wound or cut on her cheek?—Yes, there was one on her cheek and lip.

1785. Were they there when she came from the hospital?—Yes.

1786. You did not mention that?—I do not remember whether I noticed it.

1787. Was it not a remarkable sore?—It was not moist.

1788. Was it like a scratch?—A dried scab; neither of these places on her face required treatment.

1789. Was it a cut or a scratch?—Not a cut, if you mean a clean incised wound.

1790. A cut with a blunt instrument, a piece of broken cup; that is the way it has been stated to have been done?—So I was told.

1791. It did not attract your attention as of much consequence?—No; it did not require any interference.

1792. You have signed a paper here, in which you say, "We are of opinion that the death of the deceased clearly referred to the disease observed within the skull, which had existed some months, and there was no evidence to show that she had sustained any injury which could in any way have hastened her death." Is that your opinion now?—I believe so still; these wounds on her body were not sufficient to hasten her death.

1793. How long after death was it that Sir Alexander Morrison saw the body?—The day after she died.

1794. The

1794. The body then was running into decomposition?—It was changing.

1795. You state in that report your opinion that the death of the deceased was clearly referable to the disease observed in the skull?—Yes.

1796. Did you not state that death was owing to diarrhœa?—I would perhaps qualify that, by saying the disease in the skull was the cause of death, but the immediate cause of death was diarrhœa.

1797. Who drew up that certificate?—We three sat together.

1798. Who actually wrote it?—I wrote it.

1799. Did you write it, in a great measure, by the dictation of Dr. Wood?—Not exactly by his dictation; we all sat together, and concurred in that opinion.

1800. Was there difference of opinion?—Dr. Wood did suggest that we should wind up with that part; that we considered the death was not caused by the treatment.

1801. Did you not protest against that?—No; we did not protest against it.

1802. You and your partner and Dr. Wood were present?—Yes.

1803. Was not Dr. Wood in conversation with you and your partner before you agreed to the latter part of that report?—There was some conversation.

1804. Were you not rather over-persuaded by Dr. Wood to sign that, which of your own free will and pleasure you were not disposed to do?—To that question I decidedly cannot answer yes or no. I will tell you what Dr. Wood said to me: "I think we can fairly see that there is no evidence here of any treatment having caused death." I think Mr. Crisp and I said, "We do not want to say anything about it; let us give simply a statement of the *post-mortem* examination;" and after a little more conversation, he says, "Well, we will concur in that." We did concur in it, and I believe in it now.

1805. Did you ever say to Mr. H., some days afterwards, or use words to the effect, that you were very glad he had been firm in his opinion, and that he had not been in any way talked over, as you had been, by Dr. Wood?—No. I never said I had been talked over.

1806. Did you ever say to Mr. H., that you were glad he had not been over-persuaded, out of courtesy to the opinions of Dr. Wood, or any other person, not wishing to be hard on Bethlehem Hospital; that you had been induced, but that you were glad to find that he had not been so induced?—Decidedly not.

1807. It is not true?—I never said so.

1808. It is not a fact then, that you had been talked over?—No.

1809. Did you never admit that you had been talked over?—No.

1810. You gave your opinion like an honest man?—I did; and I would sign that paper now, at this very moment.

1811. Have you seen a statement of Mr. H.'s?—No; I have not.

1812. After all that you have heard, and all that has passed, is it your opinion now that Hannah H. was not harshly used in the hospital; on your oath?—I think she was.

1813. After the death of Hannah H., did you go to Bethlehem Hospital?—No, the night after she came out; she was living then.

C. Taylor, Esq.

17 July 1851.

1814. You went to Bethlehem Hospital?--Yes.

1815. For what purpose did you go there?—Merely, if I saw Dr. Wood, to ask him if he could give me some information about these wounds and places on her person, but Dr. Wood was not within.

1816. Who did you see?—I saw the matron.

1817. Did you put any questions to her as to the causes of these abrasions and wounds?—I did; and she said she believed that it was from the cut ends of the straw, and that she had known patients have similar kinds of places from that.

1818. Did she know that there had been any injury?—She did not.

1819. When you described them to her, she said, that probably they may have been caused by the cut ends of the straw; she did not know of them before?—She knew of them at the time because, I think, that H. had told her.

1820. When you first spoke to the matron about straw injuries, did she or did she not say, that she was not aware of them previously?—She had been told of them since.

1821. That she had been told since, but that she did not know that the patient had any injuries when she left the hospital?—Yes; she did not know that the patient had any injuries when she left the hospital, but that she had been told of them since.

1822. Did Hannah H., whilst she was living, complain to you of any ill treatment after she came from the hospital?—Not to me.

1823. After she came out of Bethlehem Hospital, did Hannah H., in your presence, state that she had been called bad names?—She never told me; I heard it from her father and mother.

1824. If Dr. Wood had not been present, would you have signed that certificate in the words and formh in whcih it appears?—I should not have written so much. I should not have written one at all to begin with; there would have been no object in doing it.

1825. You were called on by Dr. Wood?—Dr. Wood said, "Now, Mr. Taylor, you can have no objection to write out an account of the *post-mortem* examination," and the result of that was this paper.

1826. Before the paper was signed, was there some considerable difference of opinion between you and Dr. Wood?—There was a little hesitation on the part of one and the other.

1827. Is it not the custom, when you have a *post-mortem* examination, to put down a report of what takes place?—In my own note-book I wrote a rough statement of it; there was no judicial inquiry here concerned; there was no idea of a coroner's inquest. We asked Mr. H. to let us have a *post-mortem* examination, and he refused for some time. We said we should like to have it as a matter of professional interest, and then he consented; if Dr. Wood had not happened to come in, we should have examined the body and gone away home.

1828. But independent of the opinion you have expressed, are there the appearances that presented themselves to you on the examination of the body?—Yes.

1829. You can swear to that?—That I will decidedly. I will swear now, that my opinion is that her death was not caused or much hastened, if at all, by her treatment. I think her death arose from disease; and my impression was rather that she had been ill treated,

or

C. Taylor, Esq.
17 July 1851.

or that there had been great neglect and want of care; that is what I thought; and with regard to these wounds, I thought they were rather produced by very great neglect, or by somebody striking her or doing something to her to produce it.

1830. You have signed that they were produced by scratching?—Dr. Wood suggested that; he said she might.

1831. I suppose you knew your profession as well as Dr. Wood?—I cannot say what he knows.

1832. You had no reason to be influenced by Dr. Wood?—No.

1833. Before the paper was drawn up, was there some discussion between yourself, your partner, and Dr. Wood, as to what it should contain, or whether or not you should attribute the injuries and her bodily condition to any particular cause?—Yes, there was a conversation to that effect.

1834. If Dr. Wood had not been there, and you had drawn up that paper, would you have stated, as your opinion, as to the causes of these injuries, that they resulted from ill treatment?—If Dr. Wood had not been there, I should not have drawn up that paper; if I had been applied to afterwards by the authorities of the hospital for, I should not have hazarded, an opinion.

1835. Did you not propose to Dr. Wood to insert those causes in that paper?—I do not remember that I did.

1836. Did you state to Dr. Wood that you believed she had been ill-treated in the hospital?—I told him, I believed there might have been great want of care, and great neglect. Dr. Wood asked me to write this statement.

1837. On what grounds did he ask you to write it?—He happened to be present.

1838. What was his object?—I do not know.

1839. What reason did he assign?—Merely to show it to the authorities of Bethlehem, I presume.

1840. Did he not suggest that you should conclude the *post-mortem* statement with that opinion?—He did suggest that.

[The Witness withdrew.

Mrs. *Elizabeth W.* called; and, having been sworn, was examined by the Commissioners, as follows:

Mrs. *E. W.*

1841. WHERE do you live?—Ball's Pond, Islington.

1842. Had you a daughter who was a patient in Bethlehem Hospital?—Yes.

1843. What is her Christian name?—Mary Isabella.

1844. When was she sent to Bethlehem Hospital as a patient?—On the 9th January last.

1845. In what state was her bodily health when she went?—Her health was delicate; she had had an illness for some time before that.

1846. What was her bodily condition?—She had had an inflammation of the throat before, and a cough and cold; she had not been very well since her illness.

1847. Was she thin?—Yes; she had fallen away; she was pretty well, but she was thinner than she generally is.

Mrs. *E. W.*

17 July 1851.

1848. Had she any bruises or marks on her body when she went in?—Oh, no.

1849. Had she been violent?—She was violent; she was high, but not to do any mischief.

1850. Had you ever caused her to be restrained in any way by a strait-jacket, or any thing of that sort?—No, nothing of the kind.

1851. When did you see her, after her admission?—I think it must have been two months before I could see her. I went, but I was not allowed to see her; it was after the proper time.

1852. How was it after the proper time?—You cannot see them for a month. I went before the time, and they would not allow me; and some of my friends also went, but they could not see her. Afterwards, at the proper time, I went with my sister, and then the nurse said that I could not see her.

1853. How long was that after her admission?—I think it may have been a month after her admission; perhaps the month might not have been up when I first went, but when I went again it was the proper time. I saw the nurse, and she said I could not see her; I said, "Cannot see her! I must see her; I am her mother;" she said, "I cannot help that; you cannot see her."

1854. Do you know the name of the nurse?—No, I do not know her name; she was a stout person.

1855. Your daughter was out of her mind when she was sent to Bethlehem Hospital?—Oh, yes, I am sorry to say she was.

1856. When did you see her, in fact?—I think it must have been about two months. I do not think I saw her before.

1857. Did you make inquiry as to when you might see her?—Not then; I did not. I knew I could see her in a fortnight afterwards.

1858. Then you went?—Yes.

1859. And did you see her?—Yes.

1860. How did she appear to be?—She appeared to be in great distress; she cried bitterly, and I intreated her not to do so; she said, "I cannot help it; I cry all night." She said, "Look at my fingers," one of which was very much swollen; and I said, "What is the cause of that?" "Oh," she said, "it is one of the nurses;" then she said, "Look at my bruises," and she showed me them.

1861. Where were they?—All down the side; and I believe more than that; but I did not see more. I said, "Why do you not complain to Dr. Wood?" and she said, "It is of use to make complaints." Dr. Wood happened to come up at the time, and he said, "What is the matter?" I said, "She has had one of her fingers very much hurt?" he said, "How was that?" and she told him it was one of the nurses. She then said, "Look at my side," and she showed him the bruises.

1862. And her side was bruised?—I saw it was.

1863. Was it very much bruised?—There appeared to be a good many. I did not see all.

1864. Had she been tumbling about?—No, it was done by the nurse; the least thing would make her tumble; she was so weak after what had been given to her, the least thing would throw her down.

1865. Were they bruises, or were any of them wounds?—Oh, no they

Mrs. *E. W.*

17 July 1851.

they were not wounds; she had the misfortune to fall down and hurt her hip, and was bad for a long while; and when she over-exerted herself sometimes it would come out. She told Dr. Wood that she had a feeling at times as if her hip came in and out; and he said, "Oh, no, you could not walk if it were so."

1866. Did Dr. Wood say anything about the bruises?—One of the nurses came in, and he said to her, "How is this?" pointing to her finger. The nurse looked at it, and she said, "Oh, that is an old affair."

1867. Was it an old affair?—I never saw it before.

1868. Was the finger swollen?—The joint of the finger was swollen very much.

1869. Was there any discoloration?—I did not perceive anything of the kind.

1870. Did it look black and blue?—No.

1871. Can you give the Commissioners the name of the nurse?—The name of the nurse, I think, was Elizabeth; my daughter said it was not her, but she said, "She has struck me with the keys."

1872. Elizabeth?—Yes.

1873. The nurse that made the remark about the finger was Elizabeth?—Yes, I think it was Elizabeth.

1874. Do you know her other name?—No.

1875. Was your daughter in what is called the basement story?—Yes; she was kept there three months.

1876. Did you see what she slept on?—No; but she told me that she slept on nothing but bare straw.

1877. And naked?—Yes; no night clothes on at all.

1878. Did you see the state that your daughter was in; did she smell of urine?—Oh, no, nothing of the kind.

1879. Did she dirty herself?—I am not aware of it.

1880. Did she ever do so before she went into Bethlehem?—No; never.

1881. Before she went into the hospital was she in the habit of bruising herself in any way?—She used to knock her chest for a day or two in that way (*describing it*), but she did not bruise herself.

1882. She did not fall?—Oh, no.

1883. When you went to the hospital were you shown into the basement where she slept?—No, into the gallery; a small one; not so large as the second gallery.

1884. Were you admitted into the place where she was living?—No.

1885. They brought her out of the room into the gallery to visit you?—Yes.

1886. You did not see her where she actually was?—No.

1887. Then you had no opportunity of examining her bed or bedding?—No, not any thing.

1888. Did you know in what part of the hospital she was confined?—The lower part; the basement.

1889. Did you know that?—Yes.

1890. How long after you went to the hospital and asked to see her, was she brought to you?—Not long.

Mrs. *E. W.*

17 July 1851.

1891. How long did you wait?—A little while; I suppose while she had her clothes put on.

1892. Not very long?—No.

1893. Was she clean when she came to you?—She was not what she used to be; she had got a shawl on, but her hair was very bad indeed; her hair was almost all cut off, and they had taken her combs and brushes away.

1894. Do you think her clothes were put on for the purpose of her being brought up and shown to you?—She said they were put on for the occasion.

1895. Did she say that in the presence of the nurse?—She must have heard it; she spoke very loud.

1896. Was any reason given to you, why she was placed in the basement ward?—Not any.

1897. Do you know why she was placed in the basement ward?—I do not; she was not long in the hospital before she was taken down there.

1898. When you saw her at this visit, was she tolerably rational; could she talk on any subject?—At times she did, and then she wandered again.

1899. When you say she was out of her mind, describe to the Commissioners in what way. Had she delusions about any particular thing, or in what way was she out of her mind before she went to the hospital?—Oh, dear, she was violent, and fancied there were different things in the house.

1900. What sort of things?—She fancied somebody was kept up stairs that we would not let her see, and she fancied she was going out of the country.

1901. How long did you remain with your daughter, on your first visit?—I think about an hour.

1902. And then you left her?—Then I left her.

1903. How soon after that did you see her again?—I cannot say whether I went the next fortnight, or if it was a month after that, because there were other relations who went to see her.

1904. Was the next time you went within a month?—It might have been.

1905. In what condition was she then?—She appeared very much the same; she wanted to come home very bad.

1906. Was her mind better?—I think her mind was.

1907. It was better on your second visit than on the first?—Yes.

1908. Was her bodily condition just the same?—Much about the same.

1909. Did you see the matron at either visit?—I never did.

1910. Did you see Dr. Wood, on the second visit?—Yes, I asked him what he thought of her, and he said she was going on pretty well.

1911. Did she complain of ill treatment on your second visit?—Indeed she did, every time; we thought it was a delusion.

1912. Did she show you any marks or bruises on your second visit?— She said that one of them had pulled her by the hair of her head; that she had been awake all night, and she had overslept herself a little; and when the nurse came in, she took hold of her by the hair

hair of her head and shook her so much that she did not know where she was, and it brought on a fit of coughing.

1913. Was it in order to make her get up?—Yes.

1914. Did she say which nurse did that?—I think she said a person of the name of Turner.

1915. You said a little while ago, that your daughter, in the presence of one of the nurses, said that she had beaten her with the keys?—That the nurse had struck her with the keys.

1916. She said that in the presence of the nurse?—The nurse was going away; she said, "It was not you who did this;" but she said, "She struck me with the keys."

1917. Did you visit her after that again?—Yes, I visited her two or three times.

1918. Did you ever see any other marks upon her?—No her face appeared very much swollen.

1919. In what way?—I suppose it was with crying so much.

1920. Did she make complaints on your other visits?— No, I do not recollect that she did; she wanted very much to come home.

1921. Did you ever speak to Dr. Wood or the matron about her ill-treatment?—I spoke that morning.

1922. Not again?—No.

1923. Nor to Mrs. Hunter, the matron?—I never saw the matron, she was never to be seen; I never saw her.

1924. Was your daughter discharged recovered from her mental disease?—Yes, in June.

1925. Do you remember the date?—I think it was the 6th or 7th of June.

1926. Was she recovered?—Yes.

1927. And as sensible as ever she was?—Yes, she was a mild creature.

1928. What was the condition of her body: was she fat, or thin, or emaciated, or dirty or clean; how did she appear; was she better looking and cleaner when she went in?—She looked better when I took her out; when I saw her at first she was looking very ill, but when I took her out she was much better.

1929. Better in her appearance; in short, looking more like herself?—Yes, more like herself.

1930. Cleaned, and her hair combed?—Yes.

1931. Were there there any bruises on her body then?—No, I saw no bruises.

1932. They had got well?—That is why I thought she was kept in the basement so long, that they should get well.

1933. Did you visit her shortly before she was discharged?—I think it was a fortnight.

1934. Did she appear tolerably rational?—Yes, she said she was going to have her discharge.

1935. Upon that visit did she tell you anything as to the treatment that the nurses had exhibited towards her?—Yes, she did; she said she should certainly make a complaint when she went before the committee; that she fully intended to have done it, but Mrs. Hunter, the matron, begged she would not do it; they could hear her say it all through the gallery; she begged her not to do it, for she said that

Mrs. *E. W.*
17 July 1851.

Elizabeth (the nurse) had got a mother to keep; and my daughter; being a feeling young person, felt if she had a mother to keep what she should do in a similar situation.

1936. Not Turner, but Elizabeth?—Not Elizabeth; it was the matron herself.

1937. Your daughter was going to make a complaint to the Committee, and Mrs. Hunter begged her not to do so because this Elizabeth had a mother to keep?—Yes; and she stood beside my daughter, while she was being examined.

1938. To prevent it?—Yes, so that she could not say any thing.

1939. Did your daughter tell you that?—Yes, since she has been home.

1940. That the matron stood beside her, when she was before the Committee?—Yes.

1941. Where is your daughter now?—She is in the country.

1942. Where?—In Somersetshire.

1943. In what part?—I have not got the direction with me.

1944. Is she well now?—I hope so; I have not heard from her this last fortnight.

1945. Do you expect her back again?—Yes, in a month or two; she has gone on a visit for a change of air; we thought it might be of service to her.

1946. What part of Somersetshire is she in?—I cannot tell; I did not bring the direction with me.

1947. How soon is she coming back?—I do not know how soon she is coming back; she has been gone a fortnight to-day.

1948. Is she with relations of her own?—No, they are not her own relations; they are her brother's wife's relations.

1949. Whereabouts is she in Somersetshire?—I cannot tell; I have got the direction at home.

1950. Near what town?—I do not know whether it is Haddington or not, but you shall have her direction; I have not got it with me.

1951. Has your daughter put down in writing any thing about this treatment of her in the hospital?—No; but if writing would do, we would get her to write a letter and you should have it; she has not put any thing down in writing.

1952. She might do that at first?—I am afraid it would so agitate her that I am fearful of bringing her here.

1953. From what you have seen of her during the time she was in Bethlehem, do you believe her to have been ill-treated?—I certainly do, because she had not bruises when she went there, and they might pull her about; and another thing, she was going to take a bath on one occasion while she was there, and whether she did not do it properly herself or not, I cannot say, but she said that no less than three nurses forced her in again and ill-treated her very much, and she begged never to be put into a bath again.

1954. Did she make complaints of their calling her bad names?—Oh, most shocking names.

1955. The nurses?—I don't know whether it was the nurses or the poor creatures, but it was very bad language.

1956. Did she state any thing to you as to the mode in which she had been washed in a morning?—I understood she washed herself.

1957. Have

Mrs. *E. W.*

17 July 1851.

1957. Have you a son, a medical man?—I have.

1958. What is his christian name?—George.

1959. Where does he live?—No. L—— Road.

1960. Did he go and see his sister, while she was in Bethlehem?—Yes, he went first of all to see her, and was very much overcome.

1961. Could he give important evidence upon this subject?—Well, he saw her first.

1962. Was he very much hurt at the way in which she had been used?—Yes; at what he heard from her and the way she was in.

1963. Did your son see Dr. Wood upon the subject?—I cannot say.

1964. Do you know whose patient your daughter was?—Sir Alexander Morrison's, and he was very kind to her.

1965. Since your daughter has come out, has she or has any of your family made any representation or complaint to the Governors of Bethlehem upon the subject of her treatment?—Not the least.

1966. Why have you not?—We did not know whether what she stated was right.

1967. Your son, being a medical man, would be able to tell us about it?—He would, certainly.

1968. What kind of an education has your daughter received, can she read and write?—Oh dear, yes.

1969. Has she ever been a servant?—Oh, no.

1970. She is in the middle classes of life?—Yes, she has been brought up respectably.

1971. Did she appear to know and recollect distinctly the events that took place in Bethlehem?—Oh, yes.

1972. Has she an accurate memory?—Yes, she has a very good memory.

1973. Is she quite well?—Yes, I hope so.

[The Witness withdrew.

[Adjourned.

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24 *July* 1851.

The EARL of SHAFTESBURY in the Chair.

John Ogle Else, Surgeon, called in; and, having been sworn, was examined by the Commissioners, as follows:

J. O. Else.

24 July 1851.

1974. Where do you reside?—At 308, Albany-road, Camberwell.

1975. Do you remember seeing Miss A. M. upon the 28th day of December, in the year 1850?—Yes.

1976. Do you recollect examining her, and then signing a certificate?—Yes.

1977. In

J. O. Else, Esq.

24 July 1851.

1977. In what state was she when you saw her?—She was in a state of excessive lowness; in fact, she was in so low a condition of health that I appended a certificate to the paper I signed, stating as much to the medical man at Northampton, where she was to be passed on to. In fact, so bad was her condition of health, that I questioned, if she undertook the journey, whether she would survive it.

1978. Where did you see her?—At Camberwell.

1979. Was it at her father's house?—It was at the house of a relation, a Mrs. M.; I think, her grandmother by the second marriage, but I am not certain of the nature of the relationship.

1980. Had you ever seen Miss M. before?—I had seen her once before, upon the 6th October, upon a Sunday morning, when I also signed for her to go into Bethlehem.

1981. In what state was she when you signed the paper for her to go into the Bethlehem Hospital?—She was in a very impaired state of bodily health, and appeared to me to be suffering from a description of low fever; she was in anything but a good state of health.

1982. What was the state of her bodily health when she came out?—When she went into Bethlehem, I did not apprehend but that she might be restored both mentally and bodily; but when I saw her upon the second occasion, she was very much depressed, and I doubted her living 24 hours.

1983. Did you see her during the time she was in Bethlehem?—Not at all.

1984. Have you any note of the state in which she was before she went into Bethlehem?—I have no note whatever, but I have a perfect recollection of her condition of health, both before she went to and after she left Bethlehem.

1985. Did you make any examination of her person when she came out?—No, I did not; the time allowed was so exceedingly short; she was ready dressed, and prepared for her journey to Northampton, so that I really had not an opportunity; and she not being under my medical care, or confided to me, I did not think it exactly judicious to do so.

1986. Did you see any marks of scratches or bruises upon her body?—No; but she made a complaint that she had a sore upon her side, as I have stated in that paper. It was reported to me by the family that there were sores about her, but I did not see them myself.

1987. Did they make a report at the time?—They did not; she did herself.

1988. What complaint did she make?—That she had a sore on her side; but it was positively seen by the servant in the house, and her own family.

1989. Did she tell how it had been caused?—No, she did not.

1990. Do you remember fixing this marginal note: "A. M. is in a very critical state of health"?—Certainly I do; that is the note to which I refer, when they first mentioned her case to me about her reception into Northampton Asylum.

1991. Did you form a notion yourself as to the cause of the low state of health in which she was?—No, she was a perfect stranger to

J. O. Else, Esq.

24 July 1851.

to me. The first occasion of my seeing her was when she went into Bethlehem, and the second was when she came out; I had never seen her except on the Sunday, when I signed the certificate, and also upon the 28th of December, when she was removed. Those are the only two occasions upon which I had seen her.

1992. Did she tell you anything about her treatment?—No, she did not.

1993. Did she complain to you?—No, she was so very taciturn, that I had great difficulty in getting her to speak; she was so low, that she seemed very much disinclined to open her mouth at all. It was a completely forced conversation that I had with her.

1994. When she stated that she had a sore upon her body, did you make any inquiry upon the subject to ascertain the extent of it?—I mentioned it to her family up-stairs, and said, "She complains of having a sore place; shall I examine her, or what will you do?" I remember I strongly persuaded them not to have her removed; and, indeed, I proposed that she should have a private lodging, or some accommodation in the house of her relative, where she might stop a few days, so that I could see the upshot of the case. But being dressed, and on the eve of a journey, her family were determined that she should be removed that very day, so that I thought I thought I should be standing in the way of that object by proposing any delay.

1995. Did there appear to you to be any material difference in her bodily condition between the first and second time you saw her?—Oh, unquestionably; I observed that at my first interview I should have taken her as a casual common patient, and I should have hoped to have saved both her body and mind. Her condition, previously to her being received into Bethlehem, was anything but good; but it was not so bad but what it might be amended.

1996. This was about a month or two before?—I think one was the 6th of October, and the other on the 28th of December; that was the exact interval.

1997. Have you a paper or memorandum that you wish to hand in?—I have here the report of the family; I do not know whether it is material I should give it in.

1998. When did you make that memorandum?—This morning. That is a statement from the mouth of her relative, the elder Mrs. M. She stated to me certain facts, but I cannot confirm them.

1999. When did you draw that paper up?—I drew it up this morning.

2000. When did you see Mrs. M.?—I had an interview with the elder Mrs. M., a lady 80 years of age, yesterday.

2001. In whose house was it?—In her own; ——— Cottage belongs to her. From a conversation I had with the family, it appears that A. M. is a very irritable and very uncomfortable person to live with; that once, when she was at L., in Suffolk, she had attempted two or three times to throw herself into the sea, and once actually threw herself from the window. These are the reports made to me by the family, and that paper contains points that I have collected from her friends. She is of a peculiar disposition, which renders

J. O. Else, Esq.

24 July 1851.

renders her not an eligible person to reside with, and also that she had made these attempts upon her life.

2002. You knew her when she was a resident at Bethlehem?—Yes.

2003. Did you draw any conclusion as to the mode of treatment she had experienced while she was there?—I could not do that; I was not aware of any treatment that had been pursued. I certainly found her in a different condition when she came out from what she was when she went in.

2004. From that did you conclude she had been ill-treated?—I could not do that; it might have been from natural causes.

2005. Was the sister of A. M. present when you examined her?—Upon the first occasion?

2006. No, after she left Bethlehem?—No, I do not think she was in the house at the time I called; I was perfectly alone; the servant announced my visit, and I went into her room.

2007. By whom had you been called in?—By the sister, and by the grandmother, if I may call her so, the elder Miss M.

2008. Did you know anything at the time, as to her having been well or ill treated?—No, not the least; I am ignorant why they removed her from Bethlehem. I had no information upon that point. I was merely told to go and certify for her admission into the Northampton Asylum. I have a memorandum of certain facts; and one of the points stated is that she was very much depressed, and that I did not think she would survive the journey.

2009. You signed the certificate upon her going into Bethlehem?—Yes.

2010. Was there anything particular, or out of the common way, in the certificate which you made on that occasion; did you make any note?—I do not recollect that I did. I thought the case by no means a strong case for a lunatic asylum.

[The Witness withdrew.

P. R. Nesbitt, M. D., called in; and, having been sworn, was examined by the Commissioners, as follows:

P. R. Nesbitt, M. D.

2011. Did you receive Miss M. into the Northampton Asylum?—I did.

2012. When?—I received her upon the 29th of December.

2013. Have you made a note of the state of bodily health in which she was when she arrived?—Yes, I have communicated, at the request of the Commissioners in Lunacy, the condition in which she was when she was received, she was in an extremely feeble condition. Her legs were œdematous, she had prolapsus of the uterus and anus, she was bedridden, and she had various sores about her person; moreover, her hair was very much matted and entangled, and there was a great number of vermin in her head.

2014. What had been the interval between her quitting Bethlehem Hospital and her coming to the Northampton Asylum?—I do not know, about 24 or 48 hours; some such period as that.

2015. Upon what day did she arrive?—Upon the 29th of December she came to us.

2016. Did

2016. Did you make a note of that at the time?—I did.

2017. Did you, upon that, draw any conclusion as to the treatment she must have experienced in Bethlehem Hospital?—It appeared to me as if she had been neglected somewhere.

2018. Do you think the collection of vermin was the result of neglect?—Yes, even if I could have put a different interpretation upon the character of the sores.

2019. Did the state of her body exhibit any evidences of neglect?—I should say so.

2020. Describe in what respect?—I think the sores which I witnessed were the result of her having lain upon a bed of straw, and I think the vermin in the head was the consequence of not having her head attended to.

2021. The question refers more particularly to the state of her body?—There were three or four sores of a large description, about the size of half a crown; and upon the hips, her back, and her heel there was a number of small abrasions, not perhaps larger than a split pea in different parts, which appeared to me to be the result of her lying naked on straw, or a coarse bed.

2022. Are these two letters which you received from this office, and your replies thereto?—Yes.

2023. Are the contents of those letters, written by you, true?—Yes.

2024. Have you anything to add to those letters?—No.

The following are the letters referred to:—

"Office of Commissioners in Lunacy,
19, New-street, Spring Gardens, 9 May 1851.

"Dear Sir,

"You will oblige the Commissioners in Lunacy by favouring them with a statement of the present condition, mental and bodily, of Miss A. M., with any particulars which you may deem material relative to her state upon admission, and subsequent progress.

(signed) "*R. W. S. Lutwidge*,
"Secretary.

"Dr. Nesbitt, Medical Superintendent,
Northampton Hospital."

"Hospital for the Insane, Northampton,
"Dear Sir, May 11.

Miss A. M.'s mental state is that of rationality, propriety, and decorum, and her bodily health is completely re-established. Her continuance here is now more a matter of prudence and convenience than of necessity, but she will certainly leave us next month.

"Her state upon admission was most deplorable; with an attenuated frame, her system was so enfeebled that she was unable to sit up; she had prolapsus of the uterus and anus, with great mucous discharges, and suffered severely from tenesmus. Her lower extremities were livid and œdematous, and their motion paralysed; on the hips and

P. R. Nesbitt, M. D.

24 July 1851.

and *nates* were a great many abrasions of the surface, varying in size from a millet-seed to a split pea. She had, also, on different parts of her body copper-coloured eruptions; she was quite unconscious of the calls of nature, and her urine and fæces passed under her.

"The treatment pursued was, in the first place, to give her a comfortable bed, and to attend to her infirmities by frequent changes of linen. Morphia, the hydriodate of potass, and the local application of oak bark decoction, with generous diet, enabled her to get up in the course of three weeks, and from that time to this her course has been one of progressive improvement. She was always a quiet patient, and grateful for attention, and after one month's residence all her faulty habits entirely left her. Her mental state was chiefly characterised by delusions of a religious nature; she thought she was a lost and wretched woman, and that she should never die. Thus limiting myself strictly to the scope of your inquiries,

"I am, dear Sir, yours faithfully,
(signed) "*P. R. Nesbitt.*

"R. W. T. Lutwidge, Esq."

"Office of Commissioners in Lunacy,
19, New-street, Spring Gardens, 13 May 1851.

"Dear Sir,

"The Commissioners in Lunacy desire me to thank you for the information which you have furnished in answer to their inquiry respecting Miss A. M. You will further oblige them by stating to what cause were the abrasions and sores to which you refer attributable. I am to request the favour of a reply by return of post.

(signed) "*R. W. S. Lutwidge,*
"Dr. Nesbitt, Northampton Asylum." "Secretary.

"Hospital for the Insane, Northampton,
"Dear Sir, 14 May 1851.

As the Commissioners have asked for my opinion of the cause of abrasions and sores on the body of Miss A. M., I have no longer any hesitation in stating that such appearances were referable to neglect.

"The patient has uniformly complained of the treatment to which she was subjected in Bethlehem Hospital; that she had nothing but straw to lie upon, and that there was no attempt to interpose any kind of protection between her body and the straw; that it hurt her much, and that she had no clothes even to cover her. She described her whole treatment to have been "harsh and coarse," and the recollection of it to inspire her with horror; that the nurses were in the habit of giving her nicknames, derived either from the colour of her skin or from her habits, and that they treated her like a brute.

"As the patient is remarkable for truthfulness, and more desirous of burying in oblivion that part of her life spent in Bethlehem, I cannot arrive at any other conclusion than that the abrasions were referable

referable to the straw which, in both its wet and dry state, would produce an irritation of the surface exactly calculated to lead to a solution of continuity in a bed-ridden patient, and in connexion with her want of cleanliness. *P. R. Nesbitt*, M.D. 24 July 1851.

"During the time she has been under my care she h s never evinced any picking propensities.

"I am, &c.

"R. W. S. Lutwidge, Esq." (signed) "*P. R. Nesbitt.*

Thursday, 14 *August* 1851.

The EARL of SHAFTESBURY in the Chair.

John Webster, M.D., F.R.S., and F.R.C.P., was called in; and, having been sworn, was examined, as follows:

2025. You are one of the Governors of Bethlehem Hospital?—Yes, and I have been so upwards of ten years. *J. Webster*, M.D., F.R.S., and F.R.C.P. 14 Aug. 1851.

2026. Have you paid much attention to the internal affairs of that hospital?—I have taken an interest in them, and assisted with other governors in the management of the hospital.

2027. Have you had opportunities of knowing the state of things in that hospital?—I should mention to the Commissioners that, being a physician practising in London, I have felt some delicacy upon this subject. I have seldom gone round with the physicians, and I have avoided giving any opinion with regard to the medical treatment of the patients.

2028. Have you constantly attended the hospital as a member of the committee?—Yes, I have attended the Board, which meets on Friday, very frequently, and have taken general interest in the affairs of the hospital.

2029. Have you given some consideration to the general management of the hospital?—Yes.

2030. Have you ever considered in what way the general system pursued there might be improved?—Yes; and as a medical man I have expressed to several influential governors of the hospital my decided opinion, that we have not a sufficient number of resident medical officers in that institution, considering it is so large an establishment. I have felt we should have more than one resident medical officer; since one must necessarily be occasionally absent, and there should be always one present. I have farther advocated the principle that we ought to have a resident physician, who should be solely responsible to the governors for every transaction in that hospital.

2031. One who should give his time and attention exclusively to the business of the hospital?—Yes, I think he should give his whole time to the duties of the hospital. I should also mention what I have said

J. Webster, M.D., F.R.S., and F.R.C.P.

14 Aug. 1851.

said before elsewhere, that, having a consulting surgeon, namely, Mr. Lawrence, who is called in to cases of surgical disease, I think we ought also to have a consulting general physician who might be called in, for example, whenever any epidemic or medical disease prevails in the hospital. This is the case in Scotland, and I believe in many foreign asylums.

2032. Have you ever made these propositions to the committee? Yes, I have mentioned them to the president and to the treasurer, as also to other governors.

2033. Have you ever formally made these propositions in committee?—Not formally, but I have mentioned the subject verbally in committee.

2034. Have you ever put them in writing before the committee?—No, but I have said it was my conviction such things ought to be done.

2035. Have you met with any obstacles to those improvements?—With regard to anything that I have ever suggested, I never experienced much difficulty, and I found there was great anxiety on the part of the managing committee to improve so far as in their power; indeed I may mention that, some years ago, when I suggested the propriety of admitting medical pupils to Bethlehem Hospital, so that it might become a school for clinical practical instruction to the profession, although the propositions were a little novel, ultimately they were received, considered, and acted upon, so that now pupils to any number may be admitted at a diminished price.

2036. As a member of the committee, did you ever hear of arrangements that were made, whereby the medical men were subjected in a great measure to the control and suggestions of the treasurer?—I am not aware with regard to the medical treatment. The treasurer is a superior officer, and next to the president in the general management of the hospital.

2037. Would it be right, in your opinion, that the treasurer should exercise any influence over a medical man as to the medical treatment, or, for example, as to the removal from one ward to another of any of the patients?—I forget whether the treasurer has any such power; I am not aware that he has, therefore I am unable to give a correct answer upon that point.

2038. When sitting in committee, have you frequently heard complaints and statements of abuses which existed and which ought to be remedied?—I have heard occasionally statements made by the friends of patients that they had complaints to make. The committee have very carefully gone into the matter, and did everything they could to ascertain whether there was any foundation for the complaint, in order to remedy it. That has been so when I was present.

2039. Generally speaking, what are the attendances at the committees?—I should state that the committee consists of 42, who attend in rotas month about. I think the attendance has been, upon an average, from three to five; but I have seen seven or nine upon occasions.

2039.* What number constitutes a quorum?—I cannot tell exactly; the treasurer is generally present. At this season there are not

not so many as in the early part of the year, when I should say the numbers averaged from five to seven; but, in case there was anything particular, I have seen more present.

2040. If there was a resident physician, he being a man of eminence and character, should you then think the services of the visiting physicians necessary?—I have already stated the hospital should have a visiting or consulting physician in general practice, who should be called in to medical cases, especially if any epidemic made its appearance; in the same way that Mr. Lawrence now attends surgical complaints.

2041. Supposing you had a resident medical man of eminence and character, do you think it would be necessary to have visiting physicians to look in periodically?—If there were two resident medical men I do not think they would be necessary.

2042. Or proper?—I do not think it would; but the hospital should always have one medical person present.

2043. I presume you mean by visiting physician, a physician to be called in, in any case of emergency?—Yes, a general physician, as in Scotland; suppose, for instance, a fever broke out. I would also take the liberty to suggest, that it would be a great advantage to have resident pupils. I feel very strongly in regard to the advancement of medical science, and think we should imitate France; that is to say, we should provide accommodation for at least two pupils during six months, who would assist the medical officers, at the same time they were studying mental disease. I may mention that I have paid some attention to these things as they exist in France, and have often remarked in the asylums of that country, which possess resident pupils, or "*internes*," the patients are always better attended to, and were less under restraint. This proves of great benefit, not only to the institution, but it gives opportunities to young medical men of seeing a very important class of maladies.

2044. With regard to those resident pupils, would they be placed upon the funds of the foundation, or would they be pupils paying for their education?—I should not give them any salary, but they ought to have a residence and rations, say for six months.

2045. They would be on the same footing as resident pupils in any other hospital?—Pretty much the same.

2046. Are there any lectures now given at the hospital?—Lectures were given three years ago by Mr. Lawrence, and likewise by Sir Alexander Morison. Those delivered by Mr. Lawrence were upon the pathology of insanity, and questions immediately connected. Last year Dr. Monro lectured on the treatment of mental diseases.

2047. Were they written lectures?—I was not present when Dr. Monro gave them; but I attended Mr. Lawrence, who lectured from a book before him, and from memory.

2048. Were they with reference to individual cases in the asylum, or otherwise?—He often alluded to cases which had been in the hospital, especially respecting the *post mortem* examinations; and all his lectures were most admirable.

2049. What number of pupils attended those lectures?—Upon an average,

J. Webster, M.D., F.R.S., and F.R.C.P.

14 Aug. 1851.

average, from 10 to 12; and once there were, I think, 15. I understood that last year the number varied from eight to ten.

2050. Upon what terms were they admitted or received as pupils? —Formerly each physician could only take one pupil, when the fee was large; now it is very small, being three guineas for a term, which lasts about four months.

2051. There are no lectures this year, are there?—I think not.

2052. For what reason?—I have understood no pupils entered.

2053. Have you heard any reason assigned why they have not entered?—I have not distinctly.

2054. Who receives the fees on these occasions; do they go to the hospital or to the lecturer?—They go to the lecturers.

2055. Who would have been the lecturer for this year?—I think it would have been Sir Alexander Morison, Dr. Monro having lectured last year.

2056. Have you any other suggestions to offer to the Commissioners?—Only to repeat my opinion that we ought to have two resident medical officers; and I further think that the resident physician should have the sole direction of all treatment, as also of everything connected with the management of patients, for which he is held responsible to the committee.

2057. That he should have the management both morally and physically?—Both morally and medically.

2058. Have you had occasion to interfere much upon the subject of restraint?—I have taken much interest in that question, and often looked to the returns of restraint, which are always examined.

2059. Have you found it, according to your notions, excessive?—I certainly consider there is a great deal less now than there was some time ago, judging from the returns that have been made.

2060. What periods do you compare?—A return has been published, showing the recent diminution of restraint; and I have taken a great interest respecting that question. In 1841 the weekly average of patients under restraint was nine, or a little more than 2½ per cent.; in 1844 it was 1½ patients, or 0·33 per cent.

2061. The numbers continuing the same?—Pretty much the same; and in 1850 restraint was about a quarter of the former ratio. According to the returns officially made, there has been a decided diminution.

2062. That is within your recollection?—Yes; within 10 years.

2063. You have not seen any bad consequences resulting to the hospital or to the condition of the patients from the diminution of restraint?—On the contrary, it has been beneficial.

2064. Who judges of the fitness of a patient for admission?—The letter of recommendation is brought before the committee on the Friday; if the case is not very urgent, the physician of that week sees the patient, and reports upon the party's fitness for admission. Dr. Monro or Sir Alexander Morison, who are usually both present, perform this duty.

2065. Do they both see the patient on the Friday?—No; one sees him, and he is asked whether it is a proper case; but they may have a consultation.

2066. Is

J. Webster, M.D., F.R.S., and F.R.C.P.

14 Aug. 1851.

2066. Is it the fact that all the applications are brought before the committee?—It might happen the new case was very much excited, and it may be important he should be admitted prior; patients are then received under the authority of the treasurer, having a medical certificate and the usual letter; but with the physician's sanction, the matter being subsequently reported to the committee.

2067. Has it not happened that complaints have been made that Dr. Monro took upon himself to adjudicate upon those cases without the matter coming before the committee?—I am not aware he does.

2068. Have you any other suggestion to make?—None.

2069. Where does the committee meet?—The committee for admission meets in the Board-room of Bethlehem Hospital every Friday.

2070. When you talked of another committee, you meant a committee that met somewhere else, did you not?—The committee for the general management of both hospitals consists of 42, besides the president and treasurer. They meet at Bridewell usually once a month; any governor may, however, attend at Bethlehem, where a portion of that committee is summoned every Friday.

2071. It is a sub-committee?—Yes, a sub-committee for admission, but any governor may attend and take a part in the proceedings.

2072. Of the 42?—Yes, or any one of the whole 300 governors; and it happens sometimes that governors not members of the committee are present at Bethlehem.

2073. Are there 300 governors?—I think there are about that number.

2074. When you said that the committee consisted of 42, what committee did you refer to?—The committee of management of the estates and property of the hospital. This committee meets on Monday. At the Bethlehem sub-committee any governor not a member of the general committee may attend, as already stated.

2075. The sub-committee does not consist of the whole 42?—It is divided into six rotas; hence every member serves two months; perhaps they all attend, but any governor may be present at this sub-committee.

2076. Has the treasurer, by the laws of the hospital, any greater power in regard to the management, not of the funds, but of the house, than you and the other members of the committee?—I should say that he is the authority to whom matters of detail, in regard to the hospital, are often referred.

2077. I mean with regard to the patients, not with respect to finance, or building, or other arrangements, but with regard to the patients?—I do not know if he has any other power than an individual governor in that respect.

2078. Can he make rules and regulations independently of the committee?—I am not aware of that; the rules are made by the general committee, confirmed by the Court of Governors, and printed.

2079. Have you been in the habit of going round the house and visiting through it?—I have done so occasionally.

2080. Is there any house committee whose duty it is to visit the house from time to time?—Every Friday, after the meeting of the sub-committee, governors often go round; if there happen to be strangers,

J. Webster, M.D., F.R.S., and F.R.C.P.

14 Aug. 1851.

strangers, they do so likewise; but a governor may go when he pleases, and can also accompany visitors introduced by himself.

2081. Have you, in fact, gone round frequently, independently of the Friday visits?—Yes, sometimes.

2082. When you have gone round, have you talked with the patients, or merely walked through the building?—I have talked to the patients generally, and inquired into their condition, but I have not done that of late very frequently.

2083. Have you gone and examined their bedding or clothing?—When going round on the Friday, after the meeting of the committee, I have looked at the bedding.

2084. Have you ever turned it up?—Yes.

2085. Have you ever inquired as to the mode of cleaning and washing dirty patients?—I have certainly not.

2086. Have you ever gone down to the basement story, and seen the state it was in where the worst class of females are placed?—I have been there.

2087. Have you examined the bedding there?—I really cannot now say, exactly.

2088. Can you say what kind of beds and bedsteads they have there?—I do not remember at present.

2089. Is there any organized system of visitation of the house, by any house committee, or any members of the Board at all; any regular duty imposed upon any members of the committee, to examine into the state and condition of the house and the patients?—The committee which meets at Bethlehem Hospital very frequently go round.

2090. Is it part of their duty, as appears by any rules, to make an inspection or examination at any stated or other times?—It is certainly part of their practice.

2091. You do not say that they go regularly?—I am not prepared to say so.

2092. Do they go round on any days but the stated Friday when they meet, or are there any other days or times when it becomes part of the duty of any members of the Board or the committee, to go and inspect the condition of the rooms and the patients?—I cannot tell whether it is their duty, but I think governors sometimes do go, because I have myself.

2093. When you do so, and when you find anything objectionable, what is the common course that is taken to get it remedied?—There is a book open for the purpose, so that governors may make suggestions, or report anything which they disapprove of; they are written in this book.

2094. By whom?—By governors, and the matter is annually brought before the committee at their next meeting.

2095. Did you ever put anything in that book?—I have occasionally written in that book, approving of things I have seen during my visit.

2096. Is not that book a laudatory book generally; have you ever known any matters of complaint introduced into that book?—It is very difficult to answer that question from memory.

2097. You

2097. You do not recollect?—I think governors have suggested alterations in that book.

2098. Is that laid before the Board?—Yes.

2099. Is that the same book which I or any other visitor who goes there is shown?—No, there are two books; one for the visitors, and one for governors.

2100. What is the book called?—I think it is called the governors' visiting book, but both are lying on the table at committee meetings.

2101. Have you ever written in that book, with your own pen, anything in which you found fault with any portion of the establishment or the servants?—I believe not myself individually.

2102. Do you remember ever to have seen anything written by any other governor, except in praise of the establishment?—I have.

2103. Do they ever make reports, or would it be proper to report on the misconduct of a servant or a nurse for using unnecessary violence or harsh language, or for having their ward in an untidy state?—It would be proper, but I must mention that last year I was not a member of the committee.

2104. Have you repeatedly visited the basement story, and can you say what the people sleep on in that basement story; on mattresses, or what?—There are the dirty wards, and several cells are covered with Kamptulikon, an elastic composition, made of India-rubber and cork.

2105. Do they sleep on loose straw in that ward?—I am not aware of that, and I have never seen them.

2106. Have you never looked?—The time I have visited has been generally in the middle or after part of the day.

2107. You never went at night?—Never.

2108. You stated that as a medical man you felt a certain delicacy in interfering?—I said that I did not presume to make suggestions regarding the medical treatment of patients to gentlemen who were my professional superiors in knowledge and experience.

2109. But you go there not as a medical man, but as a governor?—Yes, I went there as a governor.

2110. Are you aware in what state the patients who lie upon the straw are placed upon that straw at night as to their body-clothing?—No.

2111. You are not aware that any of them have been placed in those straw beds stark naked?—No.

2112. Is to-day the first time that you have learnt that the custom has been to place from 16 to 18 patients on those straw beds perfectly naked?—I have heard something said recently.

2113. You never heard of this before?—Not specifically.

2114. Is it ever the custom for any members of the committee to visit the establishment at night, to see what state those patients are in after they are placed in bed?—That I cannot say; I have never visited them at night.

2115. Does Dr. Wood reside very constantly at the hospital?—Always.

2116. Are you aware of any misfortune ever having occurred in consequence of his occasional absence?—As to an accident happening

J. Webster, M.D., F.R.S., and F.R.C.P.

14 Aug. 1851.

ing in consequence of his absence, I am not aware, although one did occur whilst he was not present. When Dr. Wood leaves the hospital, there is a medical gentleman in the neighbourhood with whom he has arranged to be in attendance, if wanted for any emergency.

2117. Did not an accident happen by a man falling from a window in Dr. Wood's apartments while cleaning the windows, and which took place during his absence?—No doubt it happened while he was absent; and the accident arose from one of the attendants allowing this person to clean the windows contrary to Dr. Wood's orders. The matter was investigated by the committee; Dr. Wood's absence was only temporary, and the medical gentleman I have referred to was sent for immediately, as he lives just opposite; and it is an understanding with Dr. Wood, should he be out, they are to send for the same practitioner when necessary.

2118. What was the result of that accident?—The man died.

2119. Was he a patient?—Yes, but was allowed to clean the windows, contrary to the express desire of Dr. Wood.

2120. When did this happen?—I think about two or three months ago.

2121. The matter was investigated by the committee; what was done with reference to the keeper acting contrary to Dr. Wood's orders?—A strong resolution was passed on his conduct, and I believe he is no longer in the hospital.

2122. Was there an inquest?—Yes.

2123. You personally have never so minutely inspected the hospital as to be able to say anything relative to the treatment of patients in the lower basement?—As I said before, I am only a governor, and do not give my time to the medical treatment of patients in Bethlehem Hospital.

2124. I understood you to say that there is no particular body of persons on whom is imposed the duty of visiting and inspecting the house, and that it is left to discretion very much?—I believe the treasurer considers himself bound, and he more assiduously visits than many others; but governors forming the committee also do it frequently; the late Lord Shaftesbury often visited.

2125. There is no set of persons appointed for the purpose?—Not for that specific purpose.

2126. You do not know that they do visit periodically?—They do, frequently.

2127. With regard to complaints which are brought before the committee, are they very frequently brought before the committee and considered, such as complaints of the conduct of servants or nurses?—They are occasionally, and then are always very carefully investigated; the committee being most anxious to remedy any defect.

2128. Who brings them before the committee?—It is on the report of a governor, a medical officer, or others; but I cannot tell always.

2129. Is Mr. Anderton a governor?—Yes.

2130. Is he an active governor?—Very, and lately a member of the committee.

[The Witness withdrew.

Mr. *Nathaniel Nicholls,* was called in; and having been sworn, was examined as follows:

Mr. *N. Nicholls.*

14 Aug. 1851.

2131. You are steward at Bethlehem Hospital?—Yes, I am.

2132. How long have you held that situation?—Thirty-two years last March.

2133. Will you explain to the Commissioners what your duties are?—They are set forth in the rules and orders of the hospital. They are rather the provisioning of the hospital now. Until some months ago, I had something to do with the management of the patients, and had the management of all the servants of the house; but some months ago, the attendance and supervision of them was taken from me, which has much curtailed my duties in the hospital. I have only now merely to confine myself to those duties which naturally come under the head of steward of the hospital, and keeping of the accounts.

2134. To whom was that supervision transferred?—The resident medical officer had always the management of the patients, and of course gave directions; and I shared it in some measure with him. At that time the rule was, that I supervised all the male servants of the house, but that was taken from me.

2135. You mean both attendants and servants?—All the male servants of the house, not the female, except those that came under my department.

2136. Then you at one time had something to do with the management of the patients?—When I had the superintendence of the male servants of the house, I considered myself in some measure responsible that their duties were properly performed.

2137. In what year was the alteration made?—In the early part of this year.

2138. Was it made under the new rules?—Yes.

2139. Your duties now are confined to the steward's department, provisioning the hospital, and so on?—Yes; and keeping the accounts of the house, and the supply of stores.

2140. Have you anything to do with the meetings of the committees?—At Bethlehem, I have.

2141. What is your duty in respect to them?—I attend to the committees.

2142. Do you mean in the capacity of clerk?—No; merely in my capacity as steward of the hospital.

2143. You attend to answer questions, not as a member of the committees?—I have no voice there; I am there as a servant of the etablishm ent.

2144. Are you present at all the discussions?—Yes; unless upon special occasions when any inquiry is going on, then I am necessarily absent.

2145. You do not officiate as clerk to take minutes?—Not at all; a clerk is there; I have occasionally acted as his *locum tenens.*

2146. Is the clerk the same as the secretary?—There is no person called the secretary.

2147. What is the name of the clerk?—Mr. Welton.

 2148. Does

Mr. *N. Nicholls.*

14 Aug. 1851.

2148. Does he attend only on committee meetings?—He attends there only on committee meetings; he comes there as clerk to take minutes.

2149. Do you reside in the hospital?—Yes, I do.

2150. Does the clerk reside in the hospital?—No; he has nothing to do with the hospital.

2151. Is he a servant in your department besides?—No. Formerly there was a clerk and solicitor. He is also the clerk at the office at Bridewell; he is clerk for the two hospitals.

2152. How long have you been in the habit of attending committees?—Ever since I came to the hospital.

2153. What is the rule for attendance on committees; the members of the whole body consist of 42, do they not?—The whole of them consist of 42. They subdivide themselves, and I believe a rota is formed out of them, and they generally consider that some of those gentlemen on the rotas should attend, so that there should be always a sufficient number.

2154. Of how many does each rota consist?—I do not recollect.

2155. How many governors are there?—Upwards of 300.

2156. They have the same power as the members of the committee, and vote, do they not?—To a certain extent. The sub-committee reports all its proceedings to the general committee at Bridewell.

2157. That is as to the 42?—They meet once a month at Bridewell.

2158. The special committee reports to the general committee of 42?—Yes; their proceedings are not valid until confirmed by them, except in ordinary matters.

2159. Did you say that there are upwards of 300 governors?—I think so; there was a larger number formerly.

2160. What is the average attendance at Bethlehem?—Four, five and six.

2161. What is the average, should you say?—From four to five.

2162. Is there a quorum, three or four?—Any one makes a quorum, of necessity, on the days for the admission of patients,—those taken in in the intermediate week. The president takes the chair if he is there, and in his absence the treasurer.

2163. How many governors attend?—Several drop in occasionally.

2164. Do you find any benefit from those occasional visits?—I cannot say; I find no inconvenience.

2165. Have you never known any great body of the governors brought together for the especial purpose of superseding any useful recommendations of the sub-committee?—Certainly not; because whatever they do, does not become law until it is confirmed by the general committee. It would be obvious, that where there is an open committee which has the regulation of things, that there should be a controlling power.

2166. The governors cannot attend the general committee, can they?—No; only 42, with the president and treasurer.

2167. Is there any committee to visit the house?—It is understood that the list musters once a week.

2168. Does that appear in any rule or regulation?—I think it does.

2169. Who judges of the propriety of the admission of a patient with reference to his circumstances?—The committee generally.

2170. Is

2170. Is every case brought before the committee when an application is made for the admission of a patient?—Every patient's petition is read by me to the committees, and his case is considered.

2171. Have you known any case, within the last five years, where a patient's application for admission, or the application of friends for admission, was decided upon without having been previously submitted to the committee with reference to his pecuniary circumstances not being satisfactory?—Most decidedly, that question has never been determined by any one but the committee.

2172. In no one case?—Not to my knowledge; to the best of my recollection, I say that such a case has never occurred.

2173. Does Dr. Wood reside constantly there?—Yes; in the house, like myself.

2174. Is he frequently or occasionally absent?—Not without leave.

2175. How long has he had leave for, at any one time, do you recollect?—I think the utmost has been a month.

2176. When he goes away, is any other person put in his place?—He has some gentleman, when absent above a day, to be there.

2177. To live in the place?—Yes, except for unexpected cases; I have known likewise that Sir Alexander Morrison has stopped a night or two at the hospital during his absence.

2178. Do you go round with the physicians in their visits?—Never. I may occasionally; I am not required officially to do so.

2179. You do not remember any one member of the committee ever visiting at night, do you, after the patients were in bed, to see the state of the patients?—I recollect that Alderman Wilson came once or twice for the purpose, and I had some little conversation with him upon the subject a short time ago, calling it to his recollection.

2180. How many years ago was that?—Many years ago.

2181. Twenty?—Yes.

2182. It has not happened within the last twenty years?—No; I now only speak from recollection.

2183. Has it come within your knowledge that any opportunity has been taken by any of the Governors to make themselves acquainted with the state of the patients in the basement story on the female side at night?—Certainly not; they do not go round; I can only say that to my knowledge they have never been round.

2184. You personally know nothing of that side of the building, and are not acquainted with the manner in which any of the patients on the basement story are kept at night?—It would be obvious that I could not.

2185. You make a weekly report, I understand, to the committee, do you not, as to the number of cases?—Always, and the apothecary does the same.

2186. What is your report?—It is of the consumption of provisions, and the number of patients who have been in the house, and the number who have been discharged and received; and there are business papers and accounts, which I should have much pleasure in sending the Commissioners.

2187. Do you make any report as to the changes of the servants?—The females are usually reported to the treasurer by the matron, and the males, up to a certain period, used to be reported by the apothecary

Mr. *N. Nicholls.*

14 Aug. 1851.

apothecary and myself. I had authority over the male servants in conjunction with him, and dismissed them, or recommended their dismissal. Since the new regulations the attendants are hired upon the recommendation of the apothecary to the treasurer. The tradesmen and the other domestic male servants, together with the cook and the kitchen maid, are hired at my recommendation.

2188. Do you pay the servants?—No, the servants are paid, excepting on occasions when a servant leaves the hospital before the end of the quarter, quarterly, by the receiver at the hospital, who brings the money over to it for the purpose. I am always present when they are paid, and I may say they are paid in conjunction with myself.

2189. There seem to have been very frequent changes among the attendants during the last year or two, both male and female?—Dr. Wood spoke to me about it, and he made a return that I think has explained all the reasons for their leaving.

2190. How do you explain it?—As regards the attendants, it is not in my department.

2191. It was in your department up to a recent time, was it not?—Yes, but I think you have taken the changes for the last year or two. I believe, as far as my knowledge goes, an explanation has been given as regards the men; as to the females, I think the changes have been much greater; I cannot explain it.

2192. You have nothing to do with the means and instruments of restraint, have you?—They were placed in my custody a short time since, with special directions to give them out to no person without the written orders of the medical officer, and they have not been given out since, at all.

[Adjourned.

Wednesday, 8 *October* 1851.

B. W. PROCTER, Esq., in the Chair

Thomas Spencer Capel, Esq., a Governor of Bethlehem Hospital; having been sworn, was examined.

T. S. Capel, Esq.

8 Oct. 1851.

2193. Have you taken an active part in the management of Bethlehem Hospital?—Not a very active part; I have very frequently attended there, and have felt great interest in the establishment, and have sent several patients there.

2194. Various matters connected with the management have come under your cognizance, have they not?—Yes.

2195. Do you go round the house often?—I have frequently gone round the house.

2196. With any other governors?—When I have attended the Friday's committee I have gone round the house.

2197. On those occasions have you gone into the basement story?—Yes.

2198. Have

T. S. Capel, Esq.

8 Oct. 1851.

2198. Have you inspected the comforts or condition of the patients?—Yes.

2199. Have you seen their bedding?—Yes.

2200. Have you ever been in the refractory ward in the female basement?—Yes.

2201. Have you ever observed their bedding?—Yes.

2202. Have you turned the bedding down in the day-time?—I do not know that I have done that; when I have gone, I have generally liked to dispense with the attendance of any of the principal officers; I have gone with a nurse; there is a sort of restraint over you.

2203. Have you ever been on either of the committees?—Never.

2204. Your visits have been as an individual governor?—Yes.

2205. You never visited by night?—Never.

2206. Did you ever hear any complaints made against any of the attendants by any of the patients?—No; on the contrary. I was there yesterday. I went into the convalescent ward, and I had a great deal of conversation with several of the patients, without any attendant being by me, and I received a satisfactory reply from all of them as to the kindness of their treatment.

2207. Had you ever any conversation with patients in the basement without any attendant being present as witness?—Generally speaking, those people are in that state that you can hardly have a conversation with them; but I never had the least objection made to my having a conversation with them.

2208. Who settles the terms of the admission upon each patient's being received at Bethlehem?—The committee.

2209. Some patients, I believe, pay, and some do not?—I do not know as to the financial part of it.

2210. Have you never been upon the committees?—No. There are certain governors' committees.

2211. How are they elected?—That I do not know.

2212. Do the same governors generally form members of the committees?—I think they do; and they, perhaps, go out according to rota. I never made any application to be on a committee, therefore I cannot speak much upon that subject.

2213. Is not the committee appointed by the general board of governors once in a year?—That I do not know. There are printed rules of the establishment which regulate it all. I never made any application to be on a committee; I have not wished it. If I had made an application to be on a committee, I should have been, I dare say. I was never invited, and I never requested. I think Bethlehem is excellently managed, as far as the comfort of the patients is concerned; and all those persons who have recovered, that have been there, that I have felt any interest in sending there, have expressed to me most decidedly their satisfaction.

[A portion of Mr. Capel's evidence is omitted, as it referred to a matter, which, on consideration, the Commissioners in Lunacy conceived not to fall properly within the scope of their investigation, and which, therefore, they did not pursue.]

[The Witness withdrew.

Mr. *Nathaniel Nicholls*, further examined.

Mr. *N. Nicholls.*

8 Oct. 1851.

2214. UNTIL lately it was a portion of your duty, was it not, to supervise the general attendants of the hospital?—All the male servants.

2215. As part of that duty, did you consider it necessary to inquire into their conduct during the night, and to examine the condition of their particular wards?—Not exactly as regarded the mental condition of the patients.

2216. I mean their bodily comfort?—Yes. I occasionally went round in the middle of the night to see that the windows were all shut, and that they had their proper quantity of clothing; and I have, occasionally, in very cold weather, directed their stockings to be put on; in very severe weather. I did not make a constant practice of it, because I did not think it fit to disturb the patients; but up to a certain period I did do so, now and then, so that the servants were never sure whether I was coming down or not.

2217. When you went into the wards, at night, did you always observe the attendants upon their duty; in the regular performance of their duty?—The night watch.

2218. Supposing you went in the evening?—My answer had reference to after the attendants had gone to bed; and even when I went into the wards on other occasions, I may say, generally speaking, that I found the male attendants always attentive to their duty with their patients. I cannot say but I may have occasionally found the contrary, but if it was, it was an exception to the general rule, and it does not strike my memory at the present moment. The best answer that I can give, as to the men being in general attendance, is, that we never heard of any casualties arising from their non-attendance.

2219. Did you ever inspect the female wards?—Certainly not; it was not in my department at all, especially at night.

2220. There was no regular organized system of night visitation by anybody?—There was always a night watchman.

2221. Those watchmen were never supervised or overlooked by any superior officer of the establishment, were they?—I always considered, while I had to supervise all the attendants of the house, and servants of the house, that I was in some measure responsible that everything was conducted properly; and I took, what I thought, all the necessary precautions to see that they were in attendance upon their duty; for instance, it was only till late years that we had not night registers, and before they were established, it became still more my duty to go round to see that the night watchman was on his duty.

2222. Was any superior officer of the establishment in the habit of visiting the wards at night, after the patients were in bed, female as well as male, to ascertain whether they were comfortably lodged, and had a proper quantity of clothes?—I can only answer for myself. The apothecary who was at the institution before the present one might have gone round, and I dare say, if he had a sick patient to visit, did go round. It is now the rule of the hospital, since the present apothecary has been appointed, that he should go round of a night to see to the patients; in the book it will be seen that it is his duty, and he is enjoined to go round the hospital at night.

2223. His

Mr. *N. Nicholls.*

8 Oct. 1851.

2223. His duties, I suppose, are not minutely specified?—That part of them is specified: "To make occasional visits at certain times," &c. —(*Reading the same.*)—When those duties were put on the medical officer, I considered that, as far as regarded my duty, I was exonerated; even up to the period after those rules were made, and until the general supervision of the attendants of the hospital was taken from under my care, I did consider it my duty now and then to go round to make the inquiries that I have already spoken of.

2224. You do not know whether Dr. Wood, in the performance of this particular duty, ever investigated the bedding and the comforts of the patients after they were in bed; whether they had enough clothes, and whether they slept on straw, or naked?—It would not, as a matter of course, come within my knowledge.

2225. Did you ever inquire whether any of the patients were put to bed naked, males or females?—The female patients I did not inquire about, but the males, I took care to see that they had a proper and sufficient quantity of clothing; that was one object of my visit. I went round in the colder weather to see that they were properly provided for.

2226. Here is the diet table (*handing the same to the Witness*); will you look at it, and tell us whether that is the diet table now in use? —Yes, it is.

2227. You verify that?—Yes.

2228. Marked with the letter X?—Yes; I should say, if it is necessary to verify this, that it is in some measure a little modified, according to circumstances.

2229. We have been furnished with a list of the attendants who are or have been in the service of Bethlehem Hospital recently, and in that list there is a number of persons who are stated to have resigned; referring to the list of females, there is a great number of them; there are seven who have resigned in the course of this last six or eight months?—Yes.

2230. Does resigning mean that they gave notice to leave?—I cannot speak to the females, excepting with my own information, as changes are very frequent. If you take the male servants, you will find that it is more especially among the older ones the changes are very unfrequent.

2231. They are frequent among the women, but not among the men? —Yes.

2232. You know nothing about what reasons were assigned for the resignation of the females?—I cannot say; I know nothing of my own knowledge.

2233. Some questions were put to you, on the last occasion, as to the absences of Dr. Wood; have those absences been frequent, or not?— Not so frequent of late as they have been.

2234. How long since has the frequency ceased; take it before the present year, for instance?—I think his absences have not been so frequent of late years; but, perhaps, in the first three years of his coming, I think his absences were frequent.

2235. Is any record kept of his absence or presence in any way?— He ought to keep a record of his own absences. I believe there is a book at the hospital in which he records his attendances daily, and if that

Mr. *N. Nicholls.*

8 Oct. 1851.

that book is kept up, it would show it; I never see the book, and therefore I know nothing about it.

2236. He is never absent without leave, is he?—I should suppose not; I think not.

2237. Who has power to give him leave?—The president or the treasurer.

2238. May he not absent himself for a single day without leave?—He ought not to do so; I do not think he has done it.

2239. When he absents himself there is a gentleman who acts as his substitute, is there not?—I think I said that when his absences were for a short time, and unexpected, he asked either the physician of the hospital, or some gentleman, to attend in case of casualties. Mr. Lawrence, for instance, has been asked, and Sir Alexander Morison; Sir Alexander Morison is very kind; I have known him occasionally, on an emergency, at my request, to sleep at the hospital; and perhaps at Dr. Wood's request too; but I, on one or two occasions, asked myself, that no difficulty should occur, and Sir Alexander Morison has done so very kindly.

2240. Is there no arrangement for giving Dr. Wood a vacation at any time?—Yes; and he has now been absent, partly from ill health, a month every year.

2241. What arrangement is then made?—A permanent and stricter arrangement is made that some gentleman shall come.

2242. Who appoints him?—I believe himself. The last gentleman was Dr. Richardson.

2243. Does he come to reside in the house?—Yes, he sleeps in the house.

2244. Who was the last gentleman?—Dr. Richardson was the substitute the last time.

2245. Before the present year, were there any complaints made as to the frequency of his absences by anybody; the governors, or any other person?—I cannot fix it in my recollection at present.

2246. You do not recollect at any time any complaints having been made of Dr. Wood's absence?—I do not fix my memory with them just at the present moment.

2247. When another person comes for a month, who pays him?—I believe Dr. Wood does, if he is paid at all.

2248. It is not charged to the hospital?—No.

2249. He has his rations, which Dr. Wood would have had otherwise?—There has been of late a change with the governors. Formerly myself, the apothecary, and the matron had a limited allowance of provisions; but there was some inconvenience felt with respect to that, in consequence of the limit not being exactly kept, and it was exceedingly unpleasant to be finding fault in consequence. Now they have made an allowance instead.

2250. The amount does not appear, of course. In the list of officers, with their salaries for 1850, they are put down as having board and lodging, but that would not be correct now?—No; I think the alteration was made in March this year. We are boarded and lodged, because the amount given us is about the sum that is calculated as the value of the provisions.

2251. You recollect, do you not, when a person threw himself out of

of a window at the time of Dr. Wood's absence, and that the conduct of the keeper was very much animadverted upon?—Yes.

2252. Do you recollect whether the absence of Dr. Wood upon that occasion was adverted to or censured?—I think not. I was in the hospital at the time that the accident happened.

2253. Does the matron reside constantly, or is she sometimes away also?—She is away generally once a year for a month.

2254. With that exception, she resides constantly there?—Yes.

2255. I understand from you that it is the duty of the matron to inspect the female wards at night, and to ascertain the comfort and the general condition of the patients throughout?—Certainly; but obviously the steward of the hospital would be quite out of his place to be seen there, unless it was a case of emergency.

2256. You have no power over the attendants at present?—No.

2257. No power to suspend them?—None. It was formerly the custom that no male servant of the house went out of the gate without my permission. Now there has been a division made, and the attendants go out with the permission of the apothecary, and the other servants of the house go out with my permission. The female attendants always went out under the direction of the matron, and that remains so still.

2258. I see that these rules are dated February 1851; were they passed at that time?—They were passed somewhere about that time.

2259. Were there any circumstances which had given rise to the passing of those rules at that time?—I cannot say what weighed in the breasts of the gentlemen, the governors of the hospital.

2260. Had there been any accusations of mismanagement or ill-treatment in the wards which were likely to render these rules necessary?—I never heard of any.

2261. Had there been any accusations that the patients were not well clothed?—I never heard of any.

2262. Had you not heard of the case of Miss H.?—I think not then; Miss H. did not go out till April. Those were rather framed as a matter of wisdom and expediency, without any reference to any occurrence that had taken place.

2263. Would it come necessarily within your knowledge if the duty of inspecting the wards at night, by the apothecary on the one side, and the matron on the other, were neglected?—The rule of the hospital is, that the apothecary is, at his discretion, to visit the hospital at intervals; therefore what those intervals were, or when he thought he ought to go round, would hardly come within my knowledge. If there was a specified time, and that was not kept up, I dare say the matter would reach my ears in some way or other; but as there is no specified time, and it is not my duty to make inquiries as to the performance of his duty, it would not come within my knowledge. He may have gone round. I do not know whether he has or has not.

2264. You do not know of your own knowledge, or from hearsay, whether the apothecary or matron have performed those duties or not; you never heard any complaint?—It is their duty to make occasional visits.

2265. Is there a rule that they should report the results of those night visits?—"And to report those visits," &c., (*reading the same to the words*) "next sub-committee."

2266. Who

Mr. *N. Nicholls.*

8 Oct. 1851.

2266. Who keeps that book?—I never saw any such report, or heard of any such reports being made.

2267. Who would have the custody of that book in which those reports are entered?—He would have. And if the reports were made according to this direction they were to be laid before the Bethlehem sub-committee.

2268. If laid before the sub-committee, would you be cognizant of the fact of their being made?—Yes.

2269. No such reports have been made?—I say that no such reports have been made.

2270. There have been no complaints or statements that such visits have not been made?—I never heard of any. No official complaints that such visits have not been made.

2271. How are the committee of 42 elected?—Annually, by the general court of governors.

2272. Every governor may attend?—At the general court of governors every governor is summoned to attend, and he may attend if he pleases. The committee is elected for this year, and a certain number go out by rotation every year.

2273. That would be six every year?—Yes; I think there are 42, without the president and treasurer; I will not be sure. The committee must of necessity go out for a year, whoever has served his time out, and the vacancies are usually supplied from those who formerly had been on the committee, and who have been absent for a year.

2274. Then the 42 committee are a committee for the management both of Bethlehem and Bridewell?—Yes.

2275. Then there is a sub-committee chosen, as I understand, with special reference to Bethlehem?—Yes.

2276. Of how many does that consist?—"The committee is to be subdivided," &c., (*reading the same to the word*) "meeting."

2277. When you say "open," they may attend without voting, may they not?—Any governor may attend and vote.

2278. Even at a sub-committee?—Yes, and vote. It is an open committee, but the proceedings of that committee are not valid until they are confirmed by the general committee; then they become law. As to the general committee of 42, their proceedings are nothing until they are confirmed ultimately by the general court.

2279. What constitutes a governor?—A donation of 50*l.* if nominated by a governor who has served the office of steward, otherwise 100*l.*; or if nominated by the president, and he has the power for the time being, as the president, of appointing two governors annually, and the treasurer one, without any payment and without any election; he has the privilege of appointing.

2280. Is that generally exercised?—It has been until the election of the present treasurer, who has not exercised his right in that respect. The president always does.

2281. As I understand it, the patients who are not State patients are gratuitous patients?—Entirely so, and pay nothing.

2282. Not for clothing?—No.

2283. Nor for medical attendance?—No.

2284. Is there any fee or charge payable to the doctor, or either of the

Mr. *N. Nicholls.*

8 Oct. 1851.

the medical attendants?—Certainly not; it is contrary to the rules of the hospital.

2285. Is there any report made of what may be called the financial accounts of the hospital?—Yes, quite distinct; they are published and sent round to all the governors; they are very full and very elaborate.

2286. I understand that there are 42 governors, who form a general committee, and that six of those go out every year?—Yes, in rotation.

2287. How are the six made up?—The deficiency is usually supplied from those who previously have been on the committee, and been out a year.

2288. Who votes them in?—The governors; the general committee recommend a list to the general body of governors.

2289. Are there generally on that committee gentlemen who have been appointed by the president and the treasurer, or do the committee consist of the general governors?—That is as it may be.

2290. Have not the same persons been on the committee for some considerable time past?—With those changes.

2291. They are merely changed by old committee-men?—There are generally vacancies by death; and if a committee-man has not attended during the whole time, he is not considered eligible to be re elected; some resign, and some come back again, and there is generally a succession of new ones.

2292. At the expiration of the seven years for which the 42 are elected, there is an infusion of new governors?—Constantly; I think there is scarcely any election in a year but what two or three new governors come in.

2293. Do you publish a list of the governors in the report?—No, not in that report.

2294. Has not the president the power of nominating governors without pay?—Yes, two; not to be elected, but appointing them; after a nomination they must be elected, but they are appointed at once; one is appointed, and the other is nominated for election.

2295. Appointed for life?—Yes.

2296. In the Report on Bethlehem made by the medical gentlemen, I find this expression used, "out on leave;" what is meant by that expression?—When patients are in a state of convalescence, it is considered advisable to send them home for a trial, and the change very often is beneficial; they could not discharge them "well," for at that time they are not quite well, but they are sent out on leave for a month, and at the expiration of the time they are either discharged, or the leave of absence is extended. We must always have some out on leave; and when the annual statement is made out, there is always a certain number of patients remaining out on leave, and we are obliged to bring those two numbers together, otherwise the return, which is usually made out by myself, would be incomplete; I must account for the whole number.

2297. I presume that those who are sent out on leave are recommended by the medical officers?—Yes, it must be.

2298. For what length of time?—They sometimes go on for five, six, or eight months; and it happens sometimes when they are sent out on leave that they come back again.

 2299. That

Mr. *N. Nicholls.*

8 Oct. 1851.

2299. That is to say, you admit them back without a fresh petition, and without a fresh certificate?—Yes; they continue patients of the hospital, and are carried on from one end of the year to the other.

2300. Do you clothe the patients as well as feed them?—When a patient is admitted into the hospital he must bring a list of clothing, and that in many cases is merely sufficient for a year; and their friends, when they visit them, sometimes bring them little articles of clothing, and it is much more consonant to the feelings of the patients themselves that they should wear their own clothing; but when they destroy them, then they are replaced by the hospital; and when they are worn out, and their friends are poor and cannot supply them, we give them; so that there is no charge under any circumstances to any patient for any clothing. For those who are violent and destroy the things of the hospital, we have clothes appropriated in the gallery for their use which are replaced as they are worn out.

2301. Who records the proceedings of the general committees?—They are kept by the clerk of the hospital, and recorded there.

2302. Will this annual account that you have, show the average cost of the patients?—Every penny expended, under the proper head.

2303. It shows the cost of the patients?—Yes.

2304. Who gives out the stores?—I do.

2305. To whom do you give them?—Which stores?

2306. There are provisions and stores; the clothing and bedding?—I give them out to the persons in charge of the different galleries, the attendants.

2307. Are there a good many supplies of provisions, such as tea and sugar, which are not consumed by the patients from day to day, and if so what becomes of those?—All that I give out are taken to be consumed by the patients; they ought to be.

2308. Have you ever heard that they are not?—It is of no use disguising the fact, because I detected a nurse taking out tea from the hospital; I was watching her for three, four, or five months, and I was rather anxious, as I was afraid it was a practice that was going on more than it ought to do. Not to strike the blow till I was quite sure, therefore I had the woman watched for a considerable time, and she was detected in taking the stores out, tea and sugar and cooked meat, and taking them away; she had been in the habit of doing it, and I was anxious to put an end to the system, and under the directions of the authorities of the hospital, I had the woman apprehended and taken before a police magistrate.

2309. How long ago was this?—Twelve months ago.

2310. Was she an inferior nurse or head nurse?—She may be called an inferior nurse.

2311. How had she obtained access to those stores?—They were at that time left in a very loose way; the allowance of tea was certainly more than they could consume, but since that the allowance has been curtailed to a reasonable amount, and one person is now in each gallery made chargeable for those stores.

2312. What was the duty of the nurses at that time with respect to the tea or sugar that was not actually consumed?—They ought to have brought it back to me.

2313. What plea did the nurse make?—That there was more, and that

Mr. *N Nicholls.* 8 Oct. 1851.

that it was a sort of perquisite she had a right to; there were three nurses, and one did not take it; it was a sort of cupboard left for any one of them to go to whenever they pleased, which is now remedied, and it cannot happen again under any circumstances.

2314. Did she allege that she was permitted to do so?—She made a plea before the magistrate that she considered herself in some measure to have had permission; perhaps from the nurse who was in the gallery, or some one else, and that was her excuse for taking it; I do not know that she had any right to do it, and I told them all when I gave the tea out, "If there is more than you want you are to bring it back again."

2315. The supervision of the female servants was left to the matron, was it not?—Yes, entirely; but this matter so far affected me in the economy of the hospital, that I considered it my duty, independently of the matron, to have her apprehended.

2316. How was your attention first directed to it?—By her taking out a bundle every night.

2317. How much tea was allowed to each patient?—An ounce and three quarters; now it is an ounce and a half. The tea is very good, and it is made in large quantities.

2318. Do you deliver the stores direct to the nurses in the wards, or are they delivered first to the matron?—No; the nurse comes herself, and they are delivered under my directions. I am generally present; it is, in fact, under my supervision.

2319. Do you issue tea daily?—No, once a week.

2320. Have there been any lectures given this spring or summer in the hospital?—I think there have been this spring. I will not be sure. I am almost ashamed to give an answer of that sort.

2321. They are not numerously attended, are they?—No.

2322. Are the cases entered in the case-book from time to time by the medical officer?—The state of the book will show you that.

2323. Or is there a final statement made on the discharge?—I think the case-book will show.—(*A book was handed in.*)

2324. With regard to State patients, and their condition and treatment in the asylum; in what respect do those differ, if at all, from the treatment of ordinary patients; are they kept separate or mixed?—They are kept in quite a distinct building.

2325. Are they under more strict restraint or supervision?—The building is more prison-like than a hospital. It is, in fact, a prison.

2326. Have you a greater number of attendants in proportion?—I should think we had.

2327. Have any escaped?—We have had one or two.

2328. In point of fact, you have 105 patients, and for those you charge the Government nine attendants?—Yes.

2329. And those, I presume, are attendants who really attend to them, and nothing else?—Excepting inasmuch as they, like the other servants of the house, watch; their general duties are confined entirely to that department.

2330. How is the medical visitation of those patients carried on?—There is no distinction made. The physicians go and visit them; they are bound to visit them in common with all the others.

2331. Is their diet the same?—Yes; entirely.

 2332. And

Mr. *N. Nicholls.*

8 Oct. 1851.

2332. And their dress?—They are all dressed by the hospital. They have the hospital dress; it is just made of army cloth, and a flannel and worsted stockings, and it is very excellent warm clothing.

2333. Are the duties of the medical officers in reference to those patients exactly the same?—Entirely.

2334. They are visited in the same way, and the rooms examined?—Yes; the governors go round, and see them just the same as they do with the others. In fact, criminals being great objects of curiosity to most visitors, and having had very notorious characters there, they are as much looked after as the others.

2335. Is the privilege of visiting very much exercised?—No; we keep it as much within bounds as possible.

2336. Can any governor give an order for admission?—No.

2337. Who can?—The president, the treasurer, and the Secretary of State, to visit the hospital.

2338. On ordinary days, or on a particular day of the week?—Every day excepting Saturday, Sunday and Monday. Some years ago we allowed visitors all days in the week, but Saturday, being a leisure day, we were inundated with visitors.

2339. Was not it formerly the case that any governor could take any one through?—Now he can.

2340. Who can give written orders?—Only the president, the treasurer, and the Secretary of State.

2341. But a governor may come at any time?—Yes.

2342. Is that carried to any great extent?—No.

2343. Do many scientific or literary foreigners come?—Yes; more especially medical foreigners visit our hospital; and medical gentlemen of eminence we do not refuse.

2344. In the class of State lunatics there are a number of persons who have been guilty of crimes of violence, and offences against property, many of which may be larceny or slight offences; are they all kept together?—Yes.

2345. You do not put any of them with the curables?—No; there is a distinct building for them; they are all kept together.

2346. There is only one class of male criminal lunatics?—There are four galleries, but there is no difference as regards their crimes.

2347. As to the probability of their cure, is there a different kind of treatment that they receive?—If a patient is getting better, for instance, those who are getting better under sentence of transportation, when they get well, they go back to the hulks; but if there are any mitigating circumstances, the Secretary of State will not send them back to the hulks. Some have been acquitted on the ground of insanity, and if the crime has been a serious crime, the Secretary of State does not let them loose.

2348. Have the governors or committee ever interfered to procure the release or enlargement of persons of that description?—I think not; not in my recollection. The governors are exceedingly tenacious of exercising any interference in regard to that.

2349. I suppose that some have been enlarged in your time; persons who have been acquitted on the ground of insanity?—Yes. I know of one or two very serious offences, and under the circumstances

Mr. *N. Nicholls.*

8 Oct. 1851

stances which have been made known to the Secretary of State, he has thought it wise to do so.

2350. Is there any visitation of the State patients on the part of the Home Office?—Yes. Mr. Everest, and formerly Mr. Capper, always comes once a quarter, and looks at them; he is the clerk for the criminal business in the Home Department.

2351. But is there any medical examination of them on behalf of the Home Department?—The Secretary of State, I presume, considers the physicians of the hospital his medical attendants, as regards the criminal department; and once a quarter they send a report to the Secretary of State of the state of the lunatics, bodily and mentally.

2352. Are they assigned as what I may call private patients to Drs. Monro and Morison?—No, I manage that part. I always keep an equal number for each of them.

2353. Has each of them so many?—Yes, an equal number.

2354. What is the accommodation in the criminal wards of the hospital? How many patients could be accommodated?—It holds about 88. We are too full now, but 12 are going, which will reduce the number. The course is this: when the number exceeds what the building is intended to hold, I have a personal communication with Mr. Everest upon the subject, and I tell him how many I think may be fit to go.

2355. How many at one time, under the arrangements with the Home Office, are you bound to receive?—Somewhere about what the building will hold. The criminal building has, since I have been there, been very much enlarged. It was only for 45.

2356. When was it enlarged?—Several years ago.

2357. Is it in contemplation to enlarge it further?—Certainly not.

2358. Have you considered the question yourself about the best mode of disposing of criminal lunatics?—Yes.

2359. What is your own opinion?—I think that criminal lunatics ought not to be dispersed all over the country as they are now; but that they should be confined either in one establishment, or in separate establishments, set apart for them in different parts of the country.

2360. Including every description of criminal lunatics?—I mean all those that come under the class of criminal offenders.

2361. Have you ever found the patients of Bethlehem complain, or feel it a grievance, that they are put in an establishment which is of a criminal character?—No, I have not; no recent complaint. I have heard, as it is common with all lunatics to say, that they are put in the place though they have committed no offence; but it is a subject about which they are so little informed, that there is no ground of complaint with them.

[Adjourned.

Wednesday, 22 October 1851.

J. W. MYLNE, Esq., IN THE CHAIR.

Mary Isabella W——; examined.

M. I. W—.
22 Oct. 1851.

2362. You went to Bethlehem about January last, did you not?—Yes, I did.

2363. Do you recollect the exact day?—No.

2364. Nor the exact day when you came away?—No.

2365. Were you not comfortable there when you first went?—Yes; pretty comfortable.

2366. The Commissioners have heard some complaints about the nurses, and they understand that they did not behave very well to you; and they wish to ascertain exactly how it was, as far as you can recollect, with regard to a nurse who had the care of the basement ward in which you were?—Yes; part of the time.

2367. And her name was Elizabeth Cliffin?—Yes; I think that was her name.

2368. The head nurse?—Yes.

2369. There was a woman of the name of Turner there also, a nurse, was there not?—Yes.

2370. And a woman of the name of Code, a nurse, there, while you were there?—There was another woman; I do not know her name.

2371. She was a nurse also?—Yes.

2372. When your mother first saw you after you went to Bethlehem, you showed her a finger that was bad, did you not?—I do not recollect.

2373. Do not you recollect having a bad finger?—I do not recollect.

2374. The Commissioners asked your mother how you were when she first saw you, and she said this: "She appeared to be in great distress, &c. [Answer to Question 1860 was read to the witness.] Do you recollect now showing your mother those bruises on the finger?—My little finger was hurt.

2375. Were there not bruises upon your body?—(*No answer.*)

2376. Then your mother was asked, "Was the finger swollen?" And she said, "The joint of the finger was swollen very much." Do you recollect any of the nurses pulling you out of bed?—No.

2377. Do you recollect one of them striking you with a key?—(*No answer.*)

2378. Do you recollect a woman of the name of Turner?—Yes; she struck me once.

2379. Turner did strike you once?—Yes.

2380. Where?—On my back.

2381. What with?—Her hand.

2382. Turner

M. I. W—.

22 Oct. 1851.

2382. Her fist?—No.

2383. What was that for?—I cannot tell.

2384. Did Cliffin ever strike you?—No.

2385. You do not recollect her pulling you out of bed because you overslept, or lay longer than usual?—No.

2386. Do you recollect your mode of sleeping in the basement?—Yes.

2387. You slept on straw, did you not?—Yes.

2388. On loose straw?—Yes.

2389. And without any clothes?—Yes; we had blankets.

2390. But no night-clothes?—No.

2391. Had you a blanket above and below?—No; we had one large blanket.

2392. Which served for both upper and under?—Yes.

2393. Otherwise you had no clothes on at all?—No.

2394. Did you see much of Mrs. Hunter when you were in Bethlehem?—She used to come round.

2395. At what time did she come round?—At different times.

2396. Did she ever come round at night?—No, not that I know of.

2397. She never saw whether you were in bed or not?—Not that I know of.

2398. She did not know that you slept without clothes?—I do not know.

2399. Do you remember, before you went away, telling Mrs. Hunter that you should complain about Cliffin, and she advised you not to do so, because she had got a mother, and therefore that you should not complain, and that Mrs. Hunter stood beside you when you were examined by the committee?—It was Mrs. Hunter.

2400. Do you recollect her advising you not to complain against Cliffin?—No.

2401. Just before you left Bethlehem your mother visited you, and your mother was asked whether you at that time told her, &c. [Here the answers of Mrs. E. W. to Questions 1935 and 1937 were read to the witness.] Do you recollect that?—I do not remember that.

2402. Is there anything you can tell us of what happened there; did you see any patient ill-treated; it is said that they used you very ill in Bethlehem; is that true?—I was struck once.

2403. Not more than once?—Not that I remember.

2404. You are quite well now?—Yes.

2405. And you sleep well?—Yes.

2406. Did the nurses behave cruelly to you?—Turner struck me once.

2407. Not Elizabeth?—No, I do not think she did.

2408. Was your finger very bad?—I do not know.

2409. Your mother says that you were all black and blue?—I do not remember that.

2410. Were the nurses coarse to other people as well as to you; do you recollect that?—No.

2411. There is a kindness in manner as well as in acts; did you hear any of the nurses use any bad language to anybody?—No.

M. I. W—.
22 Oct. 1851.

2412. Did they abuse you or annoy you by calling one another awful names?—No.

2413. They never called you by such names?—No.

2414. If a nurse had been very cross to you, you would have recollected it, would you not?—Yes, I think so.

2415. You slept upon straw, did you not?—Yes.

2416. Quite naked?—Yes.

2417. Without any clothes on at all; without even a shift?—Yes.*

William Marsons worn, and examined.

W. Marson.

2417*. WHERE do you live?—No. 28, Brunswick-street, Collingwood-street, Blackfriars-road.

2418. What are you?—I am only a labouring man in the optician business, at Messrs. Dollond's, in St. Paul's Churchyard.

2419. In what capacity have you obtained the means of knowing anything about Bethlehem Hospital?—I was an attendant in Bethlehem for upwards of four years.

2420. An attendant upon the patients?—Yes.

2421. At what time was this?—I went in 1847.

2422. And when did you cease to be an attendant?—I ceased to be an attendant last Tuesday week only.

2423. Did you see the Commissioners when they came round?—Yes; I let them in at the gate; I was gate-porter at that time.

2424. Why did you leave?—The money was so small, and the treatment I received was very bad indeed.

2425. From whom did you receive bad treatment?—I received bad treatment from Dr. Wood, and also several others; Mrs. Hunter, for instance.

2426. What kind of treatment do you refer to?—Nasty like. I was abused every opportunity they could get.

2427. They had not been satisfied with you, had they?—No. They thought it was through me that servants were summoned here before, when three were summoned from the hospital; Dr. Wood spoke of it in the office to Mr. Nicholls, and there was a young man of the name of Cheshire, that Mr. H. wrote about to the gentlemen here. And this young man, I believe, never had Mr. H.'s letter, and we have never seen him since.

2428. Was Mr. H. an acquaintance of yours?—No; not up to the time that his daughter was there.

2429. Nor before?—No.

2430. Did you then make his acquaintance?—Yes.

2431. Under what circumstances?—He came to me and first told me of his daughter's treatment, after she was taken out.

2432. You

* The memory of this witness appeared so imperfect and confused, and her faculties generally in so feeble a state, that the Commissioners, considering that no reliance could be placed on her evidence, did not think it advisable to cause her to be sworn, or to prosecute her examination further.

2432. You had never spoken to him before?—Yes. The petitions are given from the gate to get the people in.

2433. Were you ever an attendant upon the patients there as well?—I was porter and assistant attendant.

2434. Within the house?—Yes.

2435. You lived in the house, did you?—Yes.

2436. You boarded and lodged in the house?—Yes.

2437. Where did you dine?—At any time I could make it convenient.

2438. But where?—In the kitchen.

2439. Not in the porter's lodge?—No. I used to dine there when I was porter, and when I was attendant I used to dine in the kitchen.

2440. How long is it since you ceased to be an attendant on patients?—I ceased on the 8th of November.

2441. Was it a better appointment for you when you became a porter?—Yes; but the reason was, that I met with an accident with my hand, hanging up a flitch of bacon, and I tore everything. You see that I have lost partly the use of my thumb, and Dr. Wood's treatment of me did it. He was out of town, and returned home on the same night that I did it, on a Friday; and he mixed me up a draught, which is the draught here (*producing the same*), and a lotion, and upon this lotion he put on, "To be taken immediately;" and this lotion contained two drachms of laudanum and one ounce of oil; I took this laudanum, and then I sent for a patient, of the name of Dr. D., to come up and show me how to use this, as I had had no directions. When he came up I told him that I had taken this draught, and he asked me what they had sent, and I pointed to the bottle, and he said, "They have given you the wrong stuff." He smelt it and found that it was laudanum; and a lad, of the name of Cheshire, went down to tell Dr. Wood of this case, and it was from 10 to 20 minutes before he returned to see what was the matter, and when he came up he gave me an emetic, which did not seem to do me any good, but the salt and water that Dr. D. gave me seemed to do me the most good. It was 12 o'clock before I had this laudanum.

2442. If I understand you correctly, you met with an accident to your thumb, and for that a draught was given you to take, and a lotion to use?—Yes.

2443. And that there was no direction upon the bottle?—Yes, there was a direction.

2444. Then how did you come to take the wrong bottle?—Because it was put upon the wrong bottle, "To be taken immediately," and that which is the draught of rhubarb was to be used for the hand, which is that (*pointing to the bottle*), which he used to scratch out.

2445. Who did?—Dr. Wood; the part you see there.

2446. The direction, instead of being put upon the proper bottle, was put upon the other bottle?—Yes.

2447. The direction for the draught was put on the lotion?—Yes.

2448. And therefore you swallowed the lotion instead of the draught?—Yes; and I would have been dead if it had not been for Dr. D.

2449. Did you feel any effects from this draught immediately?—Not the slightest.

2450. Then

W. Marson.

22 Oct. 1851.

2450. Then you were not the worse for it?—No; that was abou a quarter of an hour after I took it.

2451. What did you feel then?—I wanted to pour the lotion on to the binding, so as to get to the wound, and I sent for Dr. D. to show me how to do it, and then he found that I had taken the lotion instead of the draught.

2452. Was there anything written upon the other bottle; upon the bottle that you call the lotion?—Yes; "To be taken immediately," upon the lotion.

2453. What was upon that? (*pointing to the bottle produced.*)—That was to be used for the hand.

2454. What made you keep it?—I have had it by me ever since, and I never took it.

2455. What made you keep this; was it as a curiosity?—(*No answer.*)

2456. What was the effect of the prescription of Dr. D.; you say that Dr. Wood came to you at the end of 20 minutes?—Yes; but Dr. D. seemed to do me more good with the salt and water than the other, or I believe I should have been dead in 20 minutes or half-an-hour. I felt a dimness in the eye, and I could barely see.

2457. Did it produce vomiting; did you get rid of all the stuff you had swallowed?—Yes, about an hour or so afterwards; but I was very bad up to 12 o'clock.

2458. How long is this ago?—It was on the 9th of August last year.

2459. Then it was a year ago and more?—Yes.

2460. What did Dr. Wood say or do in the matter?—He seemed to take very slight notice, the same as he did of anything else.

2461. I presume he expressed sorrow that the mistake had been made?—No.

2462. Of course that would depend upon what was in the embrocation or lotion; do you know what was in it?—Yes; two drachms of laudanum and one ounce of oil.

2463. How do you know that?—Because Dr. Wood stated what there was.

2464. In consequence of that accident you were removed from the wards, and placed as a porter at the gate?—Yes.

2465. Your hand was disabled?—Yes; and it has only lately got well.

2466. That was done out of kindness to you?—Yes, out of kindness to me, by the steward. I was not liked, I believe, at the gate by the treasurer; I believe that; nor yet by Mrs. Hunter, the matron; nor yet by Dr. Wood.

2467. Can you assign any reason for that?—Yes; because they firmly believed, and believe to this day, that I had some cause in bringing them to this office.

2468. But that was long before any inquiry from this office was made?—Yes; but they saw me speaking to Mr. H. three or four times, which made them think so.

2469. Mr. H. has only communicated with this office since last spring, but you were porter last August?—No, last November.

2470. You say that you know Dr. Wood has expressed his dissatisfaction with you, in consequence of your having communicated with Mr. H.?—Yes.

2471. What

W. Marson.
22 Oct. 1851.

2471. What communication have you had with Mr. H.?—No more than to give him any information that he asked me for upon the treatment of his daughter.

2472. But you saw nothing of his daughter?—No, I only saw her brought in. I was kept in one Good Friday; I stopped in an hour after my time, waiting for the porter to come to take my place.

2473. You were under-porter?—Yes.

2474. What more did you see of Miss H.?—I saw no more of her beyond her fetching in, and then when I left she had been taken away, until, on a Saturday night, he came and asked me if I knew that his daughter was covered with bruises. I said "No;" and he asked me to whom he should complain upon that point, and I told him he had better go to the steward.

2475. You cannot speak with reference to Miss H.'s case at all?—No, no more.

2476. You say that you were assistant-attendant; upon what class of patients?—In No. 3 gallery; convalescent gallery.

2477. The best gallery?—Yes.

2478. Had you in that position the means of seeing how all the patients were treated, or only those who were in that gallery?—All; I could see how all of them were treated.

2479. How was that?—I had to go down into the kitchen to assist to cut up the victuals of the day.

2480. Did you ever go into the basement?—Yes, I was there for one month.

2481. When was that?—From the beginning of October.

2482. From October 1849 to August 1850 you were an under-assistant there?—Yes.

2483. Who were with you there?—A man of the name of Bell.

2484. Is he there still?—Yes. Another of the name of Wilson, and another of the name of Winnicombe, and another of the name of Dinning.

2485. Are they all, or any of them, in the basement?—Three of them are.

2486. Who has been removed?—Wilson.

2487. Why did he go away?—I believe the salary was not sufficient for him.

2488. When you went away yourself, are we to understand you to say that you were discharged, or that you gave notice to leave?—I discharged myself.

2489. No complaint was made of your inefficiency or misconduct?—None whatever, that I am aware of.

2490. Were your wages paid up to the time?—Yes, to the day that I left.

2491. You had been in the basement, how long?—One month.

2492. What month was that; in what year?—In October 1849.

2493. From the basement you went to the convalescent ward?—No, I had met with this accident then.

2494. How many male patients were there in the basement?—About 38.

2495. Is there a back and front basement?—Yes.

2496. How

W. Marson.

22 Oct. 1851.

2496. How many were in the back basement?—Fifteen was the number.

2497. Those, I presume, were the very worst of the whole?—Yes.

2498. What did they sleep upon?—Upon straw.

2499. In tub beds, with thick blankets?—Some had thin blankets and rugs.

2500. The blankets were laid over the straw, I presume?—Yes.

2501. There was no case for the straw?—No, only a blanket laid over.

2502. Were many of those wet patients?—A number of them; all of them; I should say all.

2503. I presume that you and your assistants put down dry straw every morning?—The wet straw they used to take down to the pig-stye, and therefore gave them clean straw every morning.

2504. You saw that they got clean straw every morning?—Yes, for those who required it.

2505. Were the patients put to bed in their shirts, or what clothes had they on?—Some would tear up their shirts, and have canvas frocks on, and those who did not went to bed with shirts.

2506. Did any go to bed without shirts on?—I never knew them put to bed without shirts on.

2507. Did you ever hear it said that it was so?—No.

2508. How were those patients that were dirty washed?—They were washed once a week in the bath, and every morning by me, while I was there, for a month.

2509. Where were they washed?—They were washed under a tap.

2510. Washed with your hand?—With a pail, and flannel, and soap, and warm water and towel.

2511. Did you ever use a mop to them?—No, not while I was there.

2512. Did you ever see a mop used by anybody else?—No, never to them by anybody else.

2513. Did you ever see any patients there who were very violent, and were striking people?—Yes.

2514. Did you ever see them fastened or put under restraint; I mean instrumental restraint?—Yes, but not lately.

2515. Will you state to the Commissioners any particulars with which you became acquainted while in the institution?—There was one case while I was there in 1849; a man by the name of C.

2516. What was his christian name?—James.

2517. Where was he placed; in what ward?—He was in the basement, and that man could not pass his water without the assistance of a surgeon, and Dr. Wood, I believe, is engaged by the governors to do all those small surgical operations; and one Sunday he sent me out, because he said he could not do it, to Surgeon Lawrence, who was out of town, to come to do this operation. Then I went from him to Surgeon Coote, Robert-street, Adelphi, and he was out of town, and I had to go from there to Mr. Stanley, in Brook-street, Grosvenor-square, and he would not come; he said it was not his business to come; that Mr. Coote was Mr. Lawrence's assistant, and that he had a right to come. He said it was no case of emergency; that if it was, he said he would come.

2518. Did

W. Marson.

22 Oct. 1851.

2518. Did you take a note from Dr. Wood?—Yes.

2519. Was it an open note?—Yes; and he opened this note and said that he would not come, and I went back home, and I waited about half an hour, and I had to come to Mr. Clarke, close by, in Spring Gardens, and I believe Mr. Clarke's wife had died the over-night, and he could not come. A man went out to Mr. Cooper, I believe, to ask him to come, and I believe he could not come, and then I came to Dr. Partridge, and he could not come; he was out of town. Then I went to Surgeon Stanley's again, and he said he would not come; it was not his business; and therefore that Dr. Wood must get the surgeon or Mr. Coote; and I came back again to Dr. Partridge, and I found that he had come home, and then it was half-past nine o'clock. I took Dr. Partridge to the hospital, and I believe in the meantime some one had come and done it.

2520. Do you know what the operation was?—Yes; to draw the man's water away.

2521. With a catheter?—Yes; and that man used to be lying like that day after day, except when Dr. Lawrence came, or Mr. Coote.

2522. Do you mean that Dr. Wood did not or would not do it?—He would not do it.

2523. What reason did he assign for that?—I believe he could not do it.

2524. What was the general health of this person?—Pretty good, but he had been there once before.

2525. Was he in bed generally?—Yes, mostly in bed.

2526. What time had elapsed, from the time when you were first sent for the surgeon and your return?—It was from half-past three. I believe the man is dead now.

2527. Did he die in consequence of that neglect?—No; but it was through disease. I believe he died away from the hospital; he was sent away, and it was said that he was not a fit patient for that hospital.

2528. Do you know whether he was suffering at all at this time?—Yes, a great deal of pain.

2529. Was he a person capable of making you understand what his feelings were?—Now and then he was.

2530. Did he give you to understand that he was suffering pain from not having his water drawn off?—Yes; he used to speak of it when he was well, and complain of it.

2531. Are the Commissioners to understand you to say that he could not get rid of his water, except by using an instrument?—Not then.

2532. How long an interval was suffered to elapse between the different times when he obtained relief in that way?—I believe he was relieved on a Saturday, and then not up to Sunday night. I suppose Mr. Lawrence thought that Dr. Wood was capable of doing it himself.

2533. Was this on one occasion only, or did it happen repeatedly that there was no medical man present?—Mr. Lawrence used to come every day, except on Sundays, and then he went out of town, and I suppose he left it to Dr. Wood to do.

2534. Did Mr. Coote sometimes come on a Sunday?—Yes.

2535. Have

W. Marson.
22 Oct. 1851.

2535. Have you anything more to state about that case; did you consider that that case met with proper care and attention from Dr. Wood?—It did not meet with proper care and attention.

2536. In what respect?—He ought to have attended upon the man in a proper manner. We had to go and tell him, and then he would not come down for some three quarters of an hour.

2537. How often did Dr. Wood come and see the patients in the basement story?—Once a day; pretty well now and then, and he came round twice when it was Dr. Monro's day.

2538. What did he do in the course of his visit to the ward?—He used to walk through.

2539. Did he ever inspect the bedding?—Never.

2540. To see whether it was dry, or clean, or dirty?—No, he never looked, I am quite sure; I never saw him do such a thing.

2541. When you were in the other ward, did you ever see him look at the bedding?—No.

2542. Did he come at a fixed hour, or at any regular time?—Sometimes he used to come the first thing in the morning, and sometimes at one or three o'clock in the afternoon.

2543. Did you ever see either of the visiting physicians inspect the bedding?—No.

2544. Or any one?—None but Mr. Nicholls, the steward.

2545. Did he often inspect it?—He used, up to the time that he had the control.

2546. Some of these patients, no doubt, were taking physic?—Yes.

2547. Did Dr. Wood come to see that they took the prescriptions?—No; they used to be given to them by the attendants.

2548. By you or anybody else?—Yes.

2549. Did he ever see, or come to see, that they gave the patients what he had prescribed?—No; he was never there at the time the medicine was given, unless it was any that he had to give himself that they would not take.

2550. Those patients, I presume, dined in the ward; did they sit at a table?—Yes.

2551. Many of them, probably, were on sick diet, or extra diet?—A number of them.

2552. How did you know whether they were to have that diet?—It used to be taken to them about a quarter past twelve.

2553. But how did you know the cases in which that diet was given?—It used to be the general rule.

2554. I am referring to sick and extra diet, such as porter and wine, and eggs or jellies; how did you know the patients who were to have that extra diet?—They used to be pointed down at 11 o'clock.

2555. But how did you know the individuals that the extra diet was to be given to?—It was told to be given to them.

2556. By whom?—The steward put it down on the sick board.

2557. Then you had a written notice as to whom those allowances were to be given?—Yes, in the cutting-room; the attendant used to know, because he used to see the board.

2558. But you never knew whom to give the medicine or extra allowance to; you could not know unless it was written down?—Yes; in one place you could see it by going every morning to see it.

2559. Were

2559. Were you not obliged to see it?—Yes.

2560. Were there not several of those patients who refused their food?—Yes, there were two or three at one time that would not take it.

2561. How were they treated?—They were fed then.

2562. How were they fed?—By the stomach pump.

2563. In what way?—With beef-tea.

2564. How was the stomach-pump used, or who used it?—Dr. Wood.

2565. Was it never given to the attendant to use?—No.

2566. Never?—No.

2567. He always used it himself?—Yes, with the attendant's assistance.

2568. But none of those patients who refused their food were entrusted to any of the attendants to be fed by them?—No.

2569. You are quite sure of that?—Yes.

2570. Not with the stomach-pump?—No. We used to try them first with a spoon, and if they did not eat, then the stomach-pump was used.

2571. When you were there, you saw instrumental restraint sometimes used, did you not?—Yes.

2572. It was used; but did you apply it before you obtained Dr. Wood's sanction, or did you tell Dr. Wood, and get his sanction afterwards?—We were not allowed to do it, unless the doctor gave his sanction.

2573. What was the nature of the restraint?—A frock down to here (*describing the same*), to put their hands in.

2574. Any wrist-locks?—No.

2575. Nor straps?—No.

2576. Nor leg-locks?—No.

2577. Nor muffs for the hands?—No.

2578. Did you ever fasten any of the patients in a bedstead?—Not while I was there, except to one man who used to be fed in this manner. This man used to be very much neglected. His name was James S., a patient in the basement.

2579. When you were in attendance?—Not when I was there; while I was in the convalescent ward. The patient had to be fed every day by Dr. Wood, sometimes twice. Sometimes the patient would be carried down; in fact every day he was carried down to the restraint room, and put in the chair, and put under restraint, ready for feeding, and Dr. Wood would keep him waiting for two hours and a half before he came to feed that patient.

2580. But perhaps he was feeding somebody else?—No; he was in his own house; that was where he was, sitting and talking with people. He never had many to feed while I was there, and he used to forget these patients, and he went riding round Hyde Park, and when he came home these patients were fed at half-past six.

2581. Then this man was not fed from the morning, when he had his breakfast, till that time?—No; and not since the day before.

2582. Then he was without breakfast or dinner from six o'clock in the evening of one day till six o'clock the next day?—Mostly so.

2583. He

W. Marson.

22 Oct. 1851.

2583. He was in the front basement; did you go into the front basement and see it?—Yes.

2584. You belonged at that time to the convalescent ward, did you not?—Yes; but sometimes we used to be in the ward along with these patients; we were asked to go in.

2585. Is it the practice to put men into the restraint chair when they are fed?—Yes.

2586. What would have been the time, supposing he was fed in the regular course, when he would have received his food?—About half-past one or two o'clock, which was the regular time for feeding.

2587. I suppose he would have had his breakfast?—Yes; but the man used to be fed mostly twice a day, and sometimes he was neglected and only fed once.

2588. How was it that this man was neglected, and none of the rest?—That I do not know, because that was Dr. Wood's management of the case.

2589. How was it, that if there were a dozen, perhaps, or three or four, or more people to be fed (because I presume there was always more than one that required the use of the stomach-pump), that they were not all neglected as well as this man?—There used to be several sometimes, when they used to be fed, that he kept waiting for an hour and a half to two hours, only I cannot remember the patients' names, but many cases I have known of that kind, or for medicine either. I have known patients for two or three days wanting medicine, and they could not get it.

2590. How did you know that they wanted medicine?—Because they have asked for it, and their names have been put down for medicine.

2591. Your complaint is, that Dr. Wood was not in the way to attend to his duties at the proper time?—Yes.

2592. Do you know that he was not otherwise engaged in his duties in the hospital?—No; but he used to go out in the afternoon in his carriage, mostly at about three o'clock, and stop out till half-past six.

2593. Has he any other employment, professional or otherwise, to take him away from the hospital?—No, he has not.

2594. Is he a married man?—Yes.

2595. His family live in the hospital, do they not?—Yes. For the first twelve months he was pretty attentive, but at these other times he was very neglectful. If anybody asked for anything, it was ten chances to one if they got it.

2596. How do you know that?—Because we have seen it.

2597. Is there any other case, the particulars of which you wish to mention?—Yes; the case of a man of the name of Carpenter, who was a cutter of victuals.

2598. A patient?—No, a servant; he was taken ill in his situation there.

2599. You do not mean ill in his mind?—No: his name was Samuel Carpenter.

2600. Is he there still?—No, he is one of the porters of the Birmingham Railway. That man was very bad; he had got a cold in his limbs, and could not walk, and was very near dead once or twice. I have been down for his medicine myself. I principally attended him

to

W. Marson.
22 Oct. 1851.

to watch over him, and I went down three times in one night; he was to have had his medicine at six o'clock by Mr. Lawrence's order, but it was not ready; he (Dr. Wood) was at his dinner. I went down again at eight o'clock, and it was not ready, and he could not come out to get it. I went down again at 10 o'clock, and then he would come out and make it up immediately, and it was 10 minutes past 12 before I got the medicine. The man was served like that three times running.

2601. The man recovered, did he not?—Yes.

2602. Did he make any complaint?—Yes, he asked me to ask Mr. Nicholls to go for Mr. Lawrence to attend upon him, and after that Surgeon Lawrence made up his prescriptions, and then he did not get it.

2603. Do you mean to swear that Surgeon Lawrence made up medicine for any man?—No.

2604. Do you remember any other patients whose cases you think had been neglected?—Yes; a man of the name of D. was neglected; he is dead; he died in the hospital.

2605. What was his Christian name?—John.

2606. When did he die?—He died in August, 1849.

2607. When you were there?—Yes.

2608. He died in the hospital, did he?—Yes.

2609. In what respect was he neglected?—The man was taken very bad one night, and I happened to be in the convalescent ward, about 10 minutes to 10, and we heard it, and we went up to the man and found that he was up in his room; so we dressed him to take him down into the basement to put him in one of the India rubber rooms, to prevent him murdering himself. He was very violent, and we could do nothing with him without the assistance of two or three. There were three present, and we took him down into the basement, and after several days that he was put there, he was knocking himself about and striking people, and he kicked three or four of the keepers in such a manner that it very nearly laid them up, and one Thursday, about one o'clock, the man kneeled down on the slate and against the sharp edge of the brickwork, and cut a gash three-quarters of an inch wide right down to the bone. He died in October. I was sent for Surgeon Lawrence that day, and he was at St. Bartholomew's Hospital. Mr. Coote had been sent in sometimes to take this man, C——'s, water from him, and he saw to both cases; and that man, if he had been put into proper restraint, would not have done so.

2610. You think it was all owing to his not being put in proper restraint?—Yes. He kneeled upon the ground, and he knocked his head till he cut this gash against the sharp edge of the brickwork.

2611. Were there any attendants present?—No, he was locked up in a room.

2612. Then you disapprove entirely of the non-restraint system?—That is, Dr. Wood's system. They reported of that man, that he ought to be put under restraint, but he would not have it.

2613. Do you mean to say that he died in consequence of this wound?—Yes.

2614. Did he linger, or was there any inquest held upon him?—He lingered a month and better, and died; about a month after.

 2615. When

W. Marson.

22 Oct. 1851.

2615. When did he die, as near as you can recollect?—He died about the middle of the day, in October.

2616. After the accident did Dr. Wood attend to him and look after him pretty much?—Yes, pretty well after that. There used to be two men to sit up with him every night, a watchman and another.

2617. The complaint that you make against Dr. Wood is, of his having indiscreetly had the man locked up in a room in which he was able to do himself a mischief?—Yes.

2618. Was it in his own sleeping room?—No.

2619. It was not a padded room?—No; all the other padded rooms were full, and the other was wet.

2620. When a person is put into a padded room, do you report it?—Yes.

2621. Could you put him in of your own will?—No; they can now, the rules are altered.

2622. What would you do in that case, if Dr. Wood was out of the way?—We used to get the steward's sanction.

2623. The steward, I presume, is there pretty much?—Yes.

2624. Has Dr. Wood been a good deal away, sleeping away?—Yes, from the hospital.

2625. For what length of time?—He used to sleep away for two days and three days together.

2626. He has a month's holiday, has he not?—Yes.

2627. But, independently of the month's holiday, is he much away?—Yes, and he used to have a substitute for him; he used to ask Mr. Hentsch over at the dispensary to call in for him.

2628. In the day?—Yes.

2629. Did Mr. Hentsch go round the hospital the same as Dr. Wood would have done?—No; only if there was anything wanted, and there was some dispute between them, and when he found that Mr. Hentsch would not come, then he had a professional man there.

2630. Was not Mr. Hentsch a professional man?—Yes, but Mr. Hentsch would not come; and a pupil from one of the hospitals used to be there. Mr. Hentsch was called over the day the man threw himself out of the window.

2631. When was that?—On the 6th of May.

2632. Of what year?—This year; Dr. Wood was at the Exhibition at the time, and there was no medical man in the house; then this man had attempted suicide twice before.

2633. Was he killed on the spot?—Yes; he put him in doors to clean the paper with bread.

2634. He was not put there by Dr. Wood?—No; it was to work.

2635. He was not put there by the attendant during Dr. Wood's absence?—Yes; but Dr. Wood ordered him there to work, and there was a committee that sat about it, and they found that it was the attendant's fault; but I only state that he was away from the house at the time this accident occured; the man died upon the spot, and Mr. Hentsch was called over then. I believe Mr. Hentsch never came unless he charged him for it, because Dr. Wood insulted him, I believe, for attending upon a boy over at the House of Occupation.

2636. Dr. Wood had leave when he was absent, had he not?—No; not for a short time like that.

2637. Did

W. Marson.

22 Oct. 1851.

2637. Did the man throw himself out of a window?—Yes; but the man had tried to commit suicide before he came into the hospital; he ought to have been better looked after.

2638. Did any other suicide or fatal accident occur during the time that you were resident in the hospital?—Yes; there was a man of the name of D.

2639. What happened to him?—He ran a needle into his heart.

2640. He himself did it?—Yes.

2641. When was that?—That was in 1848.

2642. Do you remember his Christian name?—No, I do not.

2643. Was there an inquiry about it?—Yes; there was an inquest.

2644. Are these the only two cases that you recollect?—Yes; and of one woman strangling herself.

2645. When was that?—That was much about the same time; the same time as Dowding.

2646. Was there an inquest in that case?—Yes.

2647. What was her name?—I do not know her name.

2648. With regard to blows and bruises and black eyes, are they reported always when they take place?—Yes; they are mostly reported; if there was any one to receive the report at the time they were done.

2649. To whom are they reported?—To Dr. Wood, or to the steward.

2650. Is the report verbal, or in writing?—By word of mouth.

2651. When patients are admitted, has it been the practice to examine their persons?—Not at one time.

2652. I mean when you were there?—No, there was no such practice.

2653. Not up to what time?—Not up to May last, or June last.

2654. When were the new regulations put into the hands of the attendants?—In last June.

2655. Were they read to you?—Yes; each had a copy of them.

2656. Were you called upon to sign them?—Yes.

2657. Before that, can you state whether there was any examination of the persons of the patients?—No.

2658. On the male side?—No particular examination, unless they saw anything.

2659. They were not stripped and examined?—No.

2660. Was there any examination when patients were discharged or removed?—No.

2661. Meaning the males?—No.

2662. Even when they were removed not cured?—Yes, they used sometimes; the attendants used to look round them, but nobody else.

2663. Upon your oath, was it not the custom for Dr. Wood to examine the patients when they were admitted?—For the disease alone.

2664. For various purposes, did he not look over their whole body?—No; he only had them in the room and asked them several questions.

2665. How do you know that he did not strip them and examine them?—I know it perfectly well.

2666. Are you sure that none of them were ever examined with their

W. Marson.

22 Oct. 1851.

their shirts off, so see whether they had bruises, or whether they had none?—No; not before they were taken into the ward, unless they had to be bathed.

2667. When they were taken into the ward, they were taken in that day, were they not?—Yes.

2668. Then what was done?—They were merely searched to see what they had about them, and then on the Saturday they were bathed.

2669. They were not bathed or washed when they went to bed?—No, not till they got up in the morning.

2670. Some of them were perhaps not fit to wash themselves?—No.

2671. The practice was to put them all into No. 2, and if they became dirty or violent, or mischievous, to put them into No. 1?—Yes.

2672. And then if they got better, they were put into the convalescent ward?—Yes.

2673. You have mentioned two or three cases of individuals, in which you consider there was considerable neglect on the part of Dr. Wood; have you any other cases to mention with respect to Dr. Wood?—No; not that I can think of now.

2674. Have you any cases of complaint or charge of cruelty, or abuse, or improper conduct on the part of any of the attendants?—None.

2675. I presume you have had something to do with Mrs. Hunter?—Yes.

2676. Does she reside pretty constantly there?—Yes; but her visits, I believe, are very small indeed; I know that she never used to be up of a morning before 10 o'clock.

2677. How do you know that?—Because I have met parties there, nd she was not ready to receive them.

2678. Had you anything to do with the refusal or admission of friends who came to see patients?—I always used to send them to the office; I merely opened the gate for them.

2679. Is there any rule or regulation which prevents the relatives from seeing patients till after the expiration of one month from their admission?—I believe that is the rule.

2680. But you know nothing about it yourself?—No; it says so in the rule-books, that they are not to see them before the expiration of one month.

2681. Have you read it?—Yes; that is in the new rule-book; if any one had come from the country, they were allowed to see the patients. But there is one man at Bethlehem who knows more of the cases than I do; a man of the name of David Kidd, a Scotchman, in the criminal wing, who has been there for 28 years and above.

2682. Do you consider him a very trustworthy person?—Very o; there cannot be a more honourable man anywhere than he is to the patients.

2683. You had nothing to do with the criminal ward, had you?—Never; only to go round and leave the ale for the sick patients.

2684. Had you heard this man complaining of the conduct of Dr. Wood?—Yes; very much indeed, and I saw him but last night.

2685. At

2685. At the hospital?—Close by the hospital; he was out, and I was coming by, and I happened to meet with him, and he has very much to complain of against Dr. Wood, and I know he would like to come.

2686. Has he never complained?—Yes; he made a complaint once to the Governors, and there was going to be a committee about it, only it was broken up.

2687. Did you ever make any complaint to anybody?—Yes; to Mr. Laurie.

2688. When was that?—When I was porter at the gate, I complained to Mr. Laurie, the nephew, Mr. Peter Laurie, about the annoyance after 10 o'clock at night, when the house was all quiet, from Dr. Wood's servants being out.

2689. They gave you a good deal of trouble in opening the gate, did they?—Not me, but annoying the people that were in the house, by ringing the bell at the gate, and it sounds very loud.

2690. That was the only point upon which you made any complaint?—I complained about this treatment of Dr. Wood to me.

2691. Did you ever tell him that you had reason to think that Dr. Wood was neglectful of the patients?—I told Mr. Laurie that.

2692. What did he say to that?—He said that any charge that I knew of at the time that I could bring forward, they would have a committee upon it to see what was the matter, and he said it was of no use to let the thing run on and complain about it; and he said that we must complain at the time; that was when Kidd complained, and there was to be a committee.

2693. How long ago is it since Kidd complained?—It was in 1849.

2694. Have you ever had anything to do with the treasurer, or did he ever direct you in your duty, or interfere in any particular way in your department?—No; I do not think that I have exchanged 20 words with him.

2695. You said that you thought he had taken a dislike to you?—Yes; he told Mr. Nicholls about me being at the gate.

2696. Did he object to you, and give any ground for his objection?—I do not know what ground he could give for it at all.

2697. How long is this ago?—About four months ago.

2698. Had they any reason to suppose that you were in communication with, or acting in concert with Mr. H.?—I firmly believe that he was told so.

2699. Was that the fact?—Mr. H. used to come and ask me some questions, and I used to speak the truth to him.

2700. With reference to the case of his own daughter, you could give him no information?—No, but as to anybody he wanted there.

2701. He came to get information about the general conduct of the hospital?—Yes, he wanted to know; he used to come for a patient of the name of W. that was there, and whether I could find out where she lived; and I found it out for him.

2702. Was she a respectable person?—I believe her husband is——

2703. But the woman herself?—Yes, I believe she is a respectable woman too.

2704. What is the husband?—I believe he is a boat-builder, or something like that.

 2705. Is

W. Marson.
22 Oct. 1851.

2705. Is there anything that you can tell the Commissioners with reference to this inquiry, which is an inquiry into the conduct of the officers at Bethlehem, and into the management also, and into certain individual cases where abuse or neglect has been supposed to exist?—No; only to give you the name of another man, of the name of William Slade.

2706. What is he?—He is a cutter, he cuts the meat up; I worked with him towards the last.

2707. How long has he been there?—About four years and above.

2708. Do you know any male patient who is now accessible, in or about London, who is well in mind, and who therefore could give the Commissioners trustworthy evidence, if necessary, as to how he had been treated, or others, during his stay in the hospital?—No; there is no one that I know, as to where they live.

2709. Several patients must have been discharged during the time you were there, cured; do not you know any of them?—I do not know where they live, any of them.

2710. Possibly those patients had been kindly treated, and had no fault to find?—Yes.

2711. If you were asked the question, where should you say the fault was to be found principally; in what department?—The fault is to be found with Dr. Wood.

2712. You think that he is indolent and careless?—Yes.

2713. And he does not take sufficient trouble, you think?—No.

2714. He does not keep the attendants in sufficient order?—Yes, that is what it is.

2715. You think that he allows them to neglect the patients, as he does himself?—He neglects the patients himself; and if it was not for the attendants, who have to work very hard indeed, the patients would be very sadly neglected.

2716. Mr. Nicholls took a great deal of trouble in the supervision of the asylum, did he not?—Yes; he used to pay nightly visits to the patients sometimes.

2717. Does the doctor occasionally come round at night?—He has never been round at night but once, at 10 o'clock, that I can remember.

2718. How long were you in the house, so as to know that?—About four years.

2719. At what time was that when he came round at night?—It was since the new rules, except when he was called up to a patient who had been taken bad.

2720. What could he have been doing that could have prevented the man you spoke of having his medicine till 12 o'clock at night?—When I went to him he was asleep on the sofa, the servant told me.

2721. Did he sleep on the sofa till 12 o'clock at night?—It was 10 minutes past 11 before he got his medicine.

2722. And that, you say, was owing to Dr. Wood sleeping upon his sofa till that time?—Yes.

2723. You swear all this?—Yes; what I say is truth.

2724. Has it been the talk of the servants, or the attendants in the hospital, that Dr. Wood takes it very easy, or neglects his duty?—That has been the great talk for the last two years, and more.

2725. You

2725. You are sure of that?—Yes.

2726. If the Commissioners were to examine Kidd, and Slade, and the others, would they find them say the same thing?—Yes; the principal person is Mr. Kidd.

2727. Do you not apprehend that it might damage Kidd's position if the Commissioners were to examine him upon the matter?—If it was so, Kidd was speaking of it last night; and he said, if the Commissioners sent him a summons, he would tell them that he was summoned, and would come; but I believe he has got some very good friends there, Mr. Anderton and Alderman Wilson; I believe they are his friends.

2728. With regard to the Governors, are they in the habit of going through the wards?—Yes, on Friday.

2729. Describe to the Commissioners what kind of visit they make?—They walk through the galleries, and look into the rooms.

2730. Do they ever turn up the beds to see if they are clean?—Yes.

2731. With regard to the physicians; they make visits also, do they not, one or the other, every day?—Yes.

2732. Sunday included?—Yes; Sir Alexander Morison comes every Sunday.

2733. What length of visit do they make?—Sir Alexander Morison makes longer visits than Dr. Monro; Sir Alexander Morison is sometimes there for two hours, and sometimes longer, but Dr. Monro is never there longer than an hour.

2734. When they go round, do they go through the whole house, or to the patients that are sick?—He goes to his own patients that are sick, and walks through the hospital.

2735. Supposing there is a patient sick, who is not his own patient, and there must be many in each list, does Dr. Monro, on the days when he is visiting, only look at his own patients, and not at the patients of Sir Alexander Morison?—Dr. Wood attends to them.

2736. On the other days, when it is Sir Alexander Morison's turn to visit, does Dr. Wood attend to Dr. Munro's patients?—No, not unless they are asked by one or the other.

2737. You mean to say that the physicians do not attend alternately to their own patients, and to the other patients, but that Dr. Wood takes the vacant day?—Yes.

2738. He looks at them all?—Yes.

2739. What number might there be on the sick list as compared with those in ordinary health, and taking neither physic nor extra diet?—I should say that out of 400 there are about 50 of them who are sick in that way. I could see who were sick and those who were not sick in the cutting place.

2740. You mean 50 who were receiving extra allowances, but not 50 who were sick?—No; we call them sick; they have bottled stout, and such like.

2741. I understood you to say that the doctor never came to see them have their physic administered?—No.

2742. Are you quite sure of that?—Yes. The attendants at eight o'clock used to pour out the medicine and give it to them; there was nobody there but the attendant himself.

 2743. Did

W. Marson.

22 Oct. 1851.

2743. Did he often come at the hour of dinner?—Not very often, unless some case called him.

2744. I understood you to say that he never went through all the wards after the patients were in bed, except once since the new rules were established?—Only but once since the new rules.

2745. Never before?—Never before. After the patients have been up it has been known that Mr. Nicholls has gone round to see whether they have got proper clothing on them or not.

2746. What time do you put them to bed in the basement story?—At six o'clock in the winter.

2747. When do you get them up in the morning?—At seven o'clock.

2748. Do you lock them in their rooms?—Yes.

2749. Does anybody see them from six o'clock at night till seven in the morning?—Not unless there is an order put up to tell them to do so for any one that is ill.

2750. Is there no night watch that looks in?—The watchman walks round, and if he hears any noise he goes to the one that he hears the noise from.

2751. You stated that somebody was discharged because he ceased to be a fit patient for the hospital; what did you mean by that?—There was C.; he was paralysed.

2752. Whenever a patient becomes paralysed is he discharged?—Yes.

2753. Is that the rule or the practice?—That is the rule, I believe.

2754. Is it the practice?—Yes.

2755. Have you known any cases in which patients coming in apparently well, and being afterwards attacked with epilepsy or paralysis, have been removed in consequence?—Yes.

2756. Was that the reason assigned for it?—I believe so; for fits or anything like that they discharge them for it.

2757. Suppose consumption appears, or some other disease that is considered fatal, how is it in that case?—I believe they discharge them all; I have known a man sent away in that way, because he has been bodily ill.

2758. Was he better then?—Yes.

[The Witness withdrew.

Dr. *William Wood*, further examined.

Dr. *W. Wood.*

2759. Do you remember a patient of the name of W.?—Yes; Mary Isabella W.

2760. Do you remember her mother coming and seeing her when she was a patient at Bethlehem?—I cannot distinctly recall the occasion of her visits. A great many persons come on the visiting days; I think I have seen some of her friends, undoubtedly, but I cannot recall the particular occasions.

2761. What is the rule as to visiting the patients by their relations when they have first arrived?—There is no positive rule that I am aware of; the practice is that they should remain a month before they are visited, but it is a practice that is constantly altered; they do

do continually see their friends long before that, but I have rather continued it to get myself out of the difficulty occasionally of having to refuse when I thought it was not desirable.

2762. Supposing that you did not interfere, the servants would say, "You cannot see A. B., a patient, as she has not been a month here yet"?—They might do that; and they occasionally do that; but if their friends are at all anxious they have only to refer to me.

2763. The porter at the gate could not stop a person?—He has no right whatever to do it.

2764. If he did it would be exceeding his duty entirely?—Most certainly.

2765. It appears from other cases that it has happened frequently; that the relatives of patients in the house, who have been anxious to get in, have been refused within the month?—I perhaps rather err in the opposite extreme, but I can scarcely speak positively to the fact any further than comes under my own observation; I dare say it does happen occasionally that they go to the nurses; when they come on the visiting day by hundreds they go to the gallery there and say, "I want to see so and so," and the nurse says, "She has not been here long enough;" and perhaps they go away.

2766. What is the particular day?—The first day is after the third Monday in the month.

2767. Is that the only day?—No; they are constantly coming every day; I never refuse them seeing them without there is some good reason for it.

2768. You recollect the case of Mary Isabella W.?—Yes.

2769. What state was she in; was she in a desponding state?—I will read: "Very wild, excited, noisy, and violent; her conversation is generally incoherent, and she is very mischievous, not only destroying her own clothes and those of the other patients, but breaking and tearing anything that comes in her way; she is subject to paroxysms of a hysterical nature, and is now and then depressed for a few minutes, and cries without any obvious reason; this, however, never lasts long, and almost always occurs when anybody goes into the room, especially if they speak or take any notice of her; at other times she is generally rather elated than otherwise, but is occasionally tolerably quiet, and can then, when in the mood, give a rational answer to a question; she is, however, very uncertain, and her condition is continually varying; she pays no regard to personal cleanliness, and is extremely filthy; her appetite is voracious, but still she does appear to be in strong health, and has a frequent tendency to diarrhœa."

2770. That is her case?—That is my description of her case.

2771. That note is made, I presume, a few days after admission?—It happens that she came in at the beginning of the year, that is, when I am occupied in preparing the annual report. As a rule, it is made within a week or two, or a little more.

2772. There is no intermediate account between the record made on her entry and her discharge?—The fact is, I have not time to keep the cases as they ought to be kept.

2773. In a general way, looking at the cases that we have seen, am I correct in saying that where there is no particular bodily ailment, there

Dr. *W. Wood.*
22 Oct. 1851.

there is generally no entry in the case book, between the case as taken on admission, and the note made immediately before discharge?—Yes. All that you see in this column (*pointing to a paper*) is written after a patient has been in the house some days; or in some cases, some weeks. My object is to keep the cases as well as I can. All I find that I really can do at all useful is to get a good general statement of the condition of the patient soon after admission, when we have had time to observe all their peculiarities, and then to make some general remarks upon their discharge. Now and then there is more than usual interest in a case, and remarkable changes, and I endeavour to record them as well as I can.

2774. Do you not give a history of their treatment?—Nothing more than appears in the visitation book from time to time.

2775. Do you not state in the account of management, for instance, "under restraint"?—That is recorded in another book.

2776. Is it not very desirable that a general journal should be kept of the cases under your superintendence?—Yes; there is no question that it is very desirable it should be done, and it is what I am very anxious to do; but the truth of the matter is, there is really not time from the immense number of duties that I have to perform in that institution to do it.

2777. Supposing that in the case of Miss W., any accident had happened to her, it would be recorded, but not any bruises?—Any accident of any importance at all.

2778. Supposing she got a black eye, or a contusion on any part of her body, would that appear?—Sometimes it would, and sometimes it would not.

2779. Where would that appear?—I should make a note of it in the case; that is the only place in which anything could appear.

2780. To draw your attention to the visit of her mother, do you recollect her visiting her daughter, and you being present in the room while she was there, and her showing to you any bruises on the body, one of her fingers hurt, and bruises on the side?—I really cannot say that I do recollect it.

2781. Or her stating that it was done by the nurses?—No.

2782. Is there any book in which, if she had bruises on her body, it would be anybody's duty to record it?—It is left to me to do it as well as I can, and I try to do it as well as I can. There is no journal kept.

2783. In most hospitals there is a journal in which every accident and every black-eye and every bruise and fracture is put down the moment it happens?—Yes. I am quite aware that a great deal more ought to be done than is done, but it is as much as I can find time to do, considering the other duties that I have to perform.

2784. I will read to you Mrs. Elizabeth W.'s examination with respect to her daughter Mary Isabella W. She is asked, "How did she appear to be on this visit? She appeared to be in great distress; she cried bitterly, and I entreated her not to do so. She said, 'I cannot help it, I cry all night.' She said, 'Look at my fingers,' one of which was very much swollen; and I said, 'What is the cause of that'? 'Oh,' she said, 'It is one of the nurses.' Then she said, 'Look at my bruises;' and she showed

showed me them; all down the side, and I believe more than that, but I did not see more. I said, 'Why do you not complain to Dr. Wood?' and she said, 'It is of no use to make complaints.' Dr. Wood happened to come up at the time, and he said, 'What is the matter?' I said, 'See, she has had one of her fingers very much hurt.' He said, 'How was that?' and she told him it was one of the nurses. She then said, 'Look at my side,' and she showed him the bruises; and her side was bruised. I saw it was." "Was it very much bruised? There appeared to be a good many bruises. I did not see all." "Had she been tumbling about? No, it was done by the nurse; the least thing would make her tremble; she was so weak after what had been given to her, the least thing would throw her down"?—She had been suffering from diarrhœa; her bodily health was not very good.

2785. "Were they bruises, or were any of them wounds? Oh, no, they were not wounds; she had the misfortune to fall down and hurt her hip, and was bad for a long while; and when she over-exerted herself sometimes it would come out. She told Dr. Wood that she had a feeling at times as if her hip came in and out; and he said, 'Oh no, you could not walk if it were so.'" "Did Dr. Wood say anything about the bruises? One of the nurses came in, and he said to her, 'How is this?' pointing to her finger. The nurse looked at it, and she said, 'Oh, that is an old affair.'" "Was it an old affair? I never saw it before." "Was the finger swollen? The joint of the finger was swollen very much." "Was there any discoloration? I did not perceive anything of the kind"?—I have some vague recollection of her having a whitlow on her finger, and her showing it to me one day, on the visiting day; but any injury that could have been inflicted by the nurse on the finger must have attracted my notice, I am quite sure. I have also some vague recollection about her once showing me her hip; but about the bruises, I cannot speak.

2786. You never heard any accusation made by her, or on her behalf, against Turner or against Elizabeth?—Never.

2787. You prescribed for her at various times?—Yes.

2788. She was a patient on the sick list?—Yes, she was occasionally; she had diarrhœa.

2789. You do not record the reason for the medicines, nor the effect of the medicines?—I do as well as I can if it is anything important.

2790. In the prescription book are merely put down the medicines to be administered?—Yes.

2791. The administration of the medicine is entrusted to the attendant, I suppose?—Yes.

2792. You do not see it administered?—No.

2793. How do you know that it is given?—I give it to the nurse; I am obliged to trust to her or the male attendant.

2794. But the name of the patient to whom it is given is put down?—Yes, it is all properly directed or marked.

2795. There was a man of the name of Marson, an attendant, was there not?—He never was an attendant.

2796. What was he?—He was originally a boy in the House of Occupation; a sort of school of reform for juvenile delinquents connected with Bridewell, but it is on the same premises as Bethlehem; and some of those boys, from time to time, have been brought over and employed about

Dr. *W. Wood.*
22 Oct. 1851.

about Bethlehem, in one capacity and the other, about the kitchen and workshops; and at one time this boy was for a certain time, I suppose by the direction of the steward, about the galleries, but he was never employed as an attendant; he might be carrying the dinners backwards and forwards from the kitchen.

2797. He never was a regular attendant in the basement story?—Certainly not.

2798. You are quite sure of that?—I am quite sure of that. What arrangement the steward may have made with him I cannot say; with my knowledge he never had any appointment as attendant in the hospital.

2799. Is it possible that he could have been employed in the basement story without your knowing it?—I say that he was employed occasionally as a sort of assistant, without any regular appointment; a sort of supernumerary, and was put there by the steward.

2800. Was he an attendant or assistant attendant for one month in the basement story?—I never considered him as such.

2801. He was not resident there?—I can hardly say that he ever slept in any gallery or not; he was never recorded in my list. I have to make out a list of all the patients, and which particular attendant they are under.

2802. Where did he sleep?—I really cannot say.

2803. Who directs that?—The steward. Many of those boys have been employed about the premises very much to my annoyance. They are brought there without my concurrence, by the steward, I suppose.

2804. Was he ever there as an attendant or an assistant attendant for one month in the basement story?—If you had asked me at this moment, if I had not accidentally seen him here, whether he was in that house now, I should hardly have known how to answer you; I should hardly have known whether to say, positively, yes or no. For some months he was a sort of deputy porter, and had charge of the gate. For some time again, I cannot say how long, he was a sort of assistant in the kitchen: for some time he was hanging about the hall, and he may for some weeks, I could scarcely suppose so long, have been going backwards and forwards in one of those galleries, but without my having anything to do with it, without my placing him there, or considering him as an attendant. In fact, seeing that he was there, and feeling that some steps might be taken to get him appointed an attendant, I spoke to the treasurer about it.

2805. To prevent it?—Yes. I said he was a person whom I considered totally unfit for such a duty.

2806. When was that?—Some months ago.

2807. In 1850?—Yes.

2808. Before the accident happened to his hand or afterwards?—I think before.

2809. It was after the accident happened to his hand that he was made assistant porter?—Yes.

2810. He says that was the reason why he was made assistant porter, because he was laid up with his hand?—He was made assistant porter because the then porter was discharged on account of intemperance.

2811. He had an opportunity of seeing what attention you paid to your

your patients, had he not?—I can hardly say; he was about continually.

2812. Did he feed your patients with the stomach-pump when they were fed?—I am not aware; it is possible that he might have done so.

2813. Was there a man of the name of S. who refused his food?—Yes; he is now in the house.

2814. How often do you feed patients when they refuse their food?—Once a day, and sometimes twice a day.

2815. You try at other times to get them to take some fluid, or something of that kind?—Yes; it is a thing I always try to avoid if possible. I think very often it does them as much harm as good; and when it is a question whether they are to be starved or not, then I feed them with the stomach-pump, but I avoid it as much as possible; because now and then there is very great resistance, and it is an operation I perform with the greatest possible reluctance.

2816. Do you consider it your duty to draw off the water of a patient if he should have a suppression of urine?—Certainly; unquestionably a suppression or retention.

2817. You would not send to Mr. Lawrence, would you?—If I had any difficulty I should, and I have done so. On one occasion a man was extremely violent, and I made repeated attempts to get the catheter into the bladder; and I was afraid to take upon myself the forcing it in, and then I sent to Mr. Lawrence.

2818. Was it a long while ago?—Yes.

2819. Had the man James C. disease of his bladder?—I think not. I remember that Mr. Lawrence was not at home, and I think that was almost the only occasion; I can hardly say positively.

2820. You consider it your duty if you can do it?—Yes.

2821. You would not send on all occasions to Mr. Lawrence?—Clearly not. I was dresser to Mr. Liston, who was rather famous for that sort of thing, and therefore I had a great deal of practice; but as there is a surgeon of such eminence attached to the hospital, I think it right to send to him when necessary.

2822. You do not recollect the name of the patient in this case?—I cannot say that I do.

2823. Neither would the case book throw light upon it?—I am afraid to say; I am uncertain; but I think it would. I cannot say positively. I believe I never sent for Mr. Lawrence to the same individual more than once; and I know that on that occasion Mr. Lawrence was not at home; and still feeling unwilling to let the man go on, or to take the responsibility myself, I sent to Mr. Stanley as Mr. Lawrence's substitute.

2824. Has not Mr. Coote come?—Yes.

2825. Mr. Coote comes for Mr. Lawrence occasionally, does he not?—Yes.

2826. Did Mr. Stanley come on that occasion?—Yes; but before he came I had accomplished it myself.

2827. There is no case in which Mr. Lawrence has attended regularly to draw off a man's water daily?—No, I should say not; certainly I have no recollection of such a thing. He may have come a second time where it was a very difficult matter; I cannot say positively. It

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Dr. *W. Wood.*

22 Oct. 1851.

is quite possible that he has done so. I should only send for him when I felt a difficulty myself in doing it.

2828. You feed all the patients yourself when they are required to be fed by the stomach-pump?—Yes, male or female.

2829. You are quite sure that you have been called upon to use the stomach-pump to females as well as males?—Yes, the stomach-pump has always been under my care.

2830. They could not have been forced to be fed without your approbation?—Assuredly not.

2831. When you do feed them with the stomach-pump, do you put them in the restraint chair?—The sitting chair is fastened to the floor, and generally a strait-waistcoat is put on for a time, and we secure them to the chair.

2832. Do you recollect that Mary Isabella W. complained of anything at any time?—When she was getting well she complained of a cough, I believe, and I remember I used to joke with her about it. I forget what she said, but I examined her chest to see whether there was anything amiss, or only a nervous cough.

2833. A young man of the name of Marson almost killed himself, did he not, by taking a lotion which had been given him for his hand instead of a rhubarb draught. He says that there was a lotion, in which there were two drachms of laudanum and an ounce of oil, which was intended to be used for his thumb, and with that there was a rhubarb draught also ordered for him; but the label containing the words "to be taken immediately," and which ought to have been put on the rhubard draught, was put on the embrocation?—It was a cut; an open wound. He tore it with a large hook.

2834. Do you recollect what you prescribed for it?—He was not a patient of mine. The accident occurred when I was absent, and Mr. Lawrence saw him, and I believe prescribed for him. I never saw it till it had been going on for some time.

2835. The consequence was, that the labels not having been properly placed he swallowed this dose of laudanum and oil, and then you came to see him; do you recollect ever seeing him when he was under the effects of this; do you remember him being supposed to be poisoned?—I cannot say that I do. I do remember his having taken something in mistake, but I am quite clear it was no mistake of mine. I believe that he himself, or an attendant, had given him a dose out of some other bottle. I have some vague recollection of that sort, but it never occurred to me as anything I had ever anything to do with.

2836. Is it possible that the man should get such a prescription for his thumb and swallow it?—It is a very difficult thing indeed to say.

2837. Who would order for a wound laudanum and oil?—Nobody, it is a manifest absurdity; it is unmeaning; there is no sense in it.

2838. I suppose it is your duty to prescribe for the servants?—Yes, if they choose to come to me.

2839. Is there a man of the name of Dr. D., a patient?—Yes.

2840. The witness has stated that you gave him an emetic, but that Dr. D. gave him salt and water, which did him much more good?—All I can say is that such a mistake made on my part would not have been forgotten.

2841. If he got a black draught in the hospital, would not that appear

appear in your prescription book?—It ought to appear; but if it occurred in my absence some one might have made it up for him. I cannot speak to a matter that I cannot positively contradict.*

2842. Will you swear that you never prescribed an embrocation with laudanum and oil in it?—I have not the slightest idea that I could have done anything so absurd, and I have every reason to believe that I did not.

2843. Were you absent last August twelvemonth from Bethlehem?—Yes, I believe I was. That is the time I go away; and this happened when I was away from the hospital, because Mr. Lawrence had seen him before I knew it had happened. I think it is right in my own defence to say this, that he came from a house especially for the detention of juvenile offenders.

2844. Was he a juvenile offender himself?—Yes; and without any knowledge on my part, but to my very great annoyance, he and some others have been brought over to Bethlehem and have been employed in various capacities about the house. All of them have been spies on my actions, and I have complained to the Governors and pointed out the evil of this, and the great nuisance to Bethlehem that it was having this house next to us; and at my earnest remonstrance some of those people have been got rid of.

2845. Has he been discharged?—He is out of the house. He was not there very recently.

2846. Was he discharged for his own fault?—I think not. I only pressed upon the treasurer the importance of getting rid of some of hose people who could be no credit to the establishment.

2847. Did he misconduct himself otherwise?—Nothing more than what might be expected from a boy who had been brought up in the streets.

2848. Do you mean theft or anything of that sort?—I am not aware of that.

2849. Did he, during the time that he was in Bethlehem, conduct himself well or ill?—I am not aware that he committed any offence. He was only a person that we looked upon as one who had no business to be there, who was totally unfit as a responsible person.

2850. If you thought him unfit, had you no power of getting rid of him?—Not the slightest.

2851. Have you a control over the attendants?—I have now. I had not when he was there. In fact, he went there without my knowledge, and when I found him in the wards without my authority, I spoke to the treasurer about it; I said, "Here is a person in the wards who, I have reason to suspect, is here prior to being quietly pushed into office."

2852. Who has the power to do so?—The steward.

2853. Then the steward and you differed in opinion about him?—We differ in opinion upon so many points, that I hardly know what to say about it. The fact is this, that the house is rather a pet place with

* Dr. Wood subsequently produced the prescription book, to show that the prescription in question was in the handwriting of his substitute. He, at the same time, stated that he recollected that he was at the time referred to absent from London.

Dr. *W. Wood.*

22 Oct. 1851.

with some; and the steward is very anxious to get as many of those boys over there as he can, and there are some who have turned out very respectable young men. There was one who was petted and spoiled, and put over the heads of many others; and here was one who did not turn out so well, and I was afraid he was going to be put into a place in the same way, and I pointed it out to the treasurer.

2854. Do you conceive that the connexion of the House of Occupation with Bethlehem is not good for the institution?—I think it is as bad as it can be.

2855. In what respects?—The principal reason is, that so many of those boys and some girls are brought over there, and they are looked upon with jealousy by those in Bethlehem, because they know that a great deal of favour is shown to them.

2856. Why should they be more favoured than any other people who behave well?—We do not know why, but we see what the fact is. At the present moment the chief attendant in the best gallery was once in the House of Occupation, and he never served as the others have done in the different departments of the house. He has only been in the best gallery.

2857. He has been there for some years, has he not?—Yes, he has been there some years now.

2858. Are any of the girls from the House of Occupation brought in?—There are many of them in the kitchen.

2859. Not as nurses?—No.

2860. What sort of persons are they?—I do not know.

2861. You are an officer of the House of Occupation, are you not?—Yes.

2862. Is Mr. Nicholls as well?—Yes.

2863. Do you prescribe for the boys and girls in the House of Occupation?—Yes.

2864. Do you go through their wards daily?—No. Once a week: the rule requires; but they come to me, the majority of them.

2865. They are all close by?—Yes.

2866. There is a man of the name of Kidd, is he a head keeper?—No; he has been there a good many years, and he has one gallery in the criminal department.

2867. Does Mrs. Hunter, when the patients go out for discharge, attend with them before the committee?—Yes.

2868. As a matter of course?—Yes; there are 700 people on those premises. I am there to do everything, to make up the medicines, and to keep the cases, and I have no assistance of any sort. It is quite impossible that one person can do it, it is not giving me fair play.

2869. What number of patients on both sides, male and female, have you?—Four hundred.

2870. I mean patients under medical treatment, as sick?—It is continually varying.

2871. How many have you in this week, for instance?—The patients under medical treatment are those who require some tonic. They get their bottle of that, which lasts them the best part of the week.

2872. For how many have you made up medicines to-day?—It is more a question of time than that; I have to make up the medicines.

2873. How

2873. How many do take it?—Sometimes four or five, or half a dozen, and sometimes a dozen or more.

2874. How many patients do each of the physicians go and converse with as persons on the sick list, each time they go round, on the average?—I really could not answer that question.

2875. You go round with them, do you not?—Latterly Sir Alexander Morison has gone round by himself more frequently.

2876. Since when has Sir Alexander Morison gone round?—It has been rather out of kindness to me, to give me an opportunity of attending to some of my other work; then I have made a longer visit by myself at another period of the day. There has been no arrangement of the sort, but it has rather fallen into that habit.

2877. You said that you prescribe for a great portion of the patients yourself?—Yes.

2878. Do not you report to the physicians what you give them at all?—It appears in the prescription book.

2879. Do they read the prescription book?—Sir Alexander Morison always sees it. I do not know that Dr. Monro does. If he sees anything that attracts his attention, he asks me what I have been doing for that patient, or whether so-and-so has been tried.

2880. I understood you to say, that Sir Alexander Morison has a certain number of patients, and that Dr. Monro has a certain number of patients?—Yes, about an equal number.

2881. Then supposing that you prescribe, in the absence of either of those gentlemen, for one of Dr. Monro's patients, would he ask you afterwards what you had given that patient?—No, not as a general rule he would not.

2882. Then what is the use of their prescribing, or do they prescribe?—Sir Alexander does, and Dr. Monro generally leaves it to me.

2883. That is to say, Dr. Monro would say, if the patients' bowels were costive, you had better give them some aperient medicine; he would not leave you to prescribe for some of his own patients, he would tell you to give them a certain form of medicine?—He generally leaves it to me to prescribe. If I see a patient who requires medicine, I take upon myself to prescribe, but he may observe the same patient on going round, and say, "What are you doing to this patient?" and so on.

2884. You have house medicine, have you not, as in other hospitals; a certain formula which you have ready made up, and he says, "Give her an ounce of house medicine," for instance?—I would hardly say that.

2885. What number of patients are keeping their bed now from illness?—I went round this morning before I came here, and I think there were only two on the female side, and, as far as I remember, on the men's side I do not think there was one.

2886. Are they dangerous or serious ailments?—No; one is a temporary ailment. A young girl with nothing particular amiss, but just so much that I thought she should be quiet for the remainder of the day.

2887. And the other?—She is very noisy and restless, and very miserable and depressed, and she seemed to prefer to remain there.

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Dr. *W. Wood.*

22 Oct. 1851.

2888. There is none in any dangerous state at present, no epidemic fever?—No.

2889. Are there any in a dangerous or precarious state?—The person who has been the most so is just turning the corner. There are one or two certainly very delicate.

2890. How many are anxious cases requiring your careful attention and prescription from day to day at present?—There are a certain number who are taking medicine for ordinary ailments which are not at all serious, but still which require attention.

2891. How many are there requiring anxious care?—It is a very rough guess, but perhaps some six or seven.

2892. How many cases will the doctor who comes to-morrow consider it his duty to look at carefully with reference to their bodily state?—It so happens that Dr. Monro is ill just now.

2893. But whoever comes, who will go to-morrow for Dr. Monro?—I shall.

2894. How many will you consider it necessary to prescribe for with care and attention on account of the state of their bodily health?—There is something more than a mere prescription required, which involves more anxiety, and time, and thought, and that is, how to deal with very troublesome patients who are very violent.

2895. How many of those cases are there?—A very large number. In fact, there is no limit to the time I might spend, and spend well in the wards; I believe that. Constantly I do as far as I can, whenever time admits, take a patient and talk to him for half an hour at a time, and might do it with great advantage, but there is no time for it.

2896. Have you any cases at present that you are afraid you will lose from dangerous illness?—Yes, there are one or two.

2897. Are you frequently or occasionally in the habit of getting rid of patients whom you cannot nurse in the hospital?—It has been the practice.

2898. What class of cases?—Cases where their general health was breaking up, and where it was probable that a change might do them more good than remaining in the hospital.

2899. When people have paralysis, and their constitutions seem to be breaking up, has it been the practice to get their friends to take them away?—It has been the practice to discharge them.

2900. Is that the practice now?—Yes.

2901. As soon as paralysis or epilepsy supervenes, you discharge them as a matter of course?—Yes, it is the rule. It is presumed that on admission a certain amount of this malady exists at the time; and very often patients are taken in where great doubt exists of the propriety of admitting them according to that rule.

2902. Whenever you have a clear case of paralysis or epilepsy developed, it is a rule in the hospital that you get rid of the patient?—It is a practice which is founded upon the rule as to admission.

2903. Is it to be found in black and white?—I do not think there is any important rule upon the subject. It is rather supposed to be a continuation of the rule under which a patient is admitted. It is understood that it is a hospital strictly for curable cases; and that the paralytic or epileptic cases are not curable cases, if they are admitted.

admitted. At the present moment there are patients who must die; but they are not discharged, nor will they be discharged. Dr. *W. Wood.* 22 Oct. 1851.

2904. What kind of cases are those?—There is a man whose lungs are so badly diseased, that there is no prospect of recovery; but there he is, and unless at the express wish of his friends that he should be removed, he will remain.

2905. Do you rather leave the matter to the friends?—In this case I have written to the relative. I found that she was looking forward to his recovery with much confidence, and I thought it right to undeceive her; and I wrote to her, and explained to her the real state of the case for the sake of disabusing her mind, without hinting anything at all about his going away.

2906. And he will remain a twelvemonth?—Unless her anxiety induces her to come and say he had better be removed.

2907. How do you do in the case of those who come in as incurable?—We do not admit any case that we suppose to be incurable.

2908. You put them on what you call the incurable list?—All the paralytic cases which are on the incurable list have been originally on the curable list.

2909. You would not discharge a patient who had diarrhœa?—No.

2910. Nor consumption?—No.

2911. For no other disorder, as I understand you, but for paralysis or epilepsy?—Occasionally a patient is discharged where the health is breaking up, and it is obvious that we can do no further good for him, and it is a question whether a change might not do good. The practice has been more general formerly than now.

2912. It has been stated as an excuse for your having no infirmary, that you do not keep any patient who is unwell with bodily disease, or any disease that is likely to shorten life?—To a certain extent that may be true. The practice is as nearly as possible conformable with the rules for the admission of patients; there are certain exceptions which prevent a patient being admitted. Once or twice it has occurred that erysipelas has broken out; we have had one or two cases, and in those cases I have had them removed to the most distant room in the house, a large airy room at the top of the hospital, and at the extreme end of the building. I have separated them, and kept a nurse to attend to them separately from the rest of the patients, and in the event of anything of the sort occurring, that is the best thing we could do for the time being. Formerly it was the practice to discharge many more patients, on the ground, as it was said, of their being sick and weak.

2913. What security have you that the medicines are administered duly, that you prescribe?—No more security than they have in every hospital. We trust to the character of the nurse.

2914. You never see them administered yourself?—I do occasionally, when the nurse tells me that a patient will not take them.

2915. In the female wards as well as the male wards?—Yes; but I trust to the nurses in both cases. But where a nurse says, "I cannot get this patient to take the medicine," I wait to see it given.

2916. With regard to the patients' diet, I suppose you trust to the nurses on both sides?—I am obliged to do so.

2917. With regard to Miss M., it has been stated to us, upon very

Dr. *W. Wood.*

22 Oct. 1851.

strong evidence, that she was covered with lice when she went out; that is to say, she was seen the next day by people with her head full of lice; do you know anything about that?—No; it would be the duty of the matron to bring her before the committee.

2918. You have been interdicted from going into the female wards so often as you might think necessary; is that interdiction removed now?—It remains just where it was.

2919. What is the rule?—The rule is, "To regulate, in the absence of the physicians, the classification, employment, amusements, and general management of the patients." "To direct, in conjunction with the steward, that every male patient, and in conjunction with the matron, that every female patient, for whom employment would be beneficial, be supplied with suitable means of occupation." It was determined that it should be entirely left to the matron. It was a verbal order.

2920. Do the two books on the table of the Commissioners contain all the rules?—All the printed rules.

2921. Besides the printed rules, are there verbal orders?—I hardly know of any other than that.

2922. Do you feel yourself now, from the effect of this verbal order, interdicted from going into the female wards at all, unless you are sent for by the matron?—No.

2923. You may go how you please, and see the state of the wards when you please?—Yes.

2924. And you do go in daily?—Yes.

2925. Without waiting till the matron sends for you?—Yes.

2926. When you were examined before, you seemed to excuse your want of acquaintance with certain things that took place in the female ward, because you were not allowed by the order of the treasurer to go and examine, and go about the ward?—No; you must have misunderstood me. I never stated that.

2927. I think you said you were not aware that there were 18 or 20 of the patients in the basement story who were put to bed upon loose straw, without any linen upon them at all; naked?—I did not say anything about it; that question has never been put to me.

2928. The question put to you was, "Did the patients on the basement sleep naked, on loose straw?" That was the question. The answer is, "Not to my knowledge"?—What I understood to be the question was this, that it was only with reference to the patients being scratched with the straw. I understood that the question was, was I aware that the patients were put on the bare straw.

2929. I will read the evidence to you: "Are you aware that any of the female patients in the basement sleep entirely naked, on loose straw, without anything interposed between their bodies and the straw?" You say, "No."?—Precisely. I understood the question to be this, without considering the body clothing of the patients, but rather the question of whether or not the straw was covered. But as regards the other question, as it is now put to me, I may say this much, that individual cases have come to my knowledge where patients have complained to me that they have been put to bed naked, and I have at once, on my own authority, told the nurse to supply them with proper clothing.

2930. How

2930. How long ago was this?—That was some years ago.

2931. Are the Commissioners to understand that besides the rules in these two books, there are various other rules governing the hospital as to its management, which exist, not in writing, but verbally and from tradition?—It does amount almost to that; but I can hardly say that there are several others.

2932. You have mentioned several. First of all as to the practice of not allowing persons, for the first month, to see their relatives, that is one?—I should say, as regards that, that it is not at all strictly enforced.

2933. But still there is a general practice of that kind, subject to exception?—Yes.

2934. It is another rule, as I understand, that when paralysis or epilepsy supervenes, by a kind of extension of the original rule of admission the patients shall be discharged as improper patients; then I understood you to say, that you had advised the treasurer to get all the instruments of restraint locked up in Mr. Nicholls's custody, and that then he had given a direction that they should not be given out without your written order. That is a rule or an order?—Yes; an order made in writing, and it is done in this way. The fact is, I was very anxious to do away with restraint; and once or twice it occurred, in my absence, that some was imposed, perhaps at the end of a long period during which we had been without any, and I hoped to pass a year without any; but some individual case occurred in my absence, and I was a good deal disappointed; and it occurred to me then that I would get all those things removed. I did not like to take the step, and therefore I requested the treasurer to do it, and he wrote a letter to me and the steward, carrying out my suggestion, and requiring that all the instruments of restraint should be given up.

2935. The new rules seem to be for the servants; when were they delivered first?—I think in March.

2936. What reports are made to you by the attendants, male or female, as to any accidents or illness, or any event that happens in the course of the day or night?—If a thing occurs they come to me and tell me of it.

2937. There is no written report of the night?—The rule requires that during the night anything that happens should be put down in a book, which I see in the morning.

2938. What happens during the day is not put down in any book?—No.

2939. That is in the new rules?—Yes.

2940. Does the matron make any written report to you weekly, or on any other occasion?—She makes a report of the number of patients admitted and of their bodily condition when admitted, once a week.

2941. But of no casualty?—No.

2942. Is there any report by you, or anybody, as to the general condition of the establishment, or any particular ward, upon any of those visits which you make?—No, there is not.

2943. Or when the visiting physicians go round?—No.

2944. So that the result of those visits made by yourself, or the matron, or the visiting physicians, never appears in any book?—No.

Dr. *W. Wood.*

22 Oct. 1851.

2945. Do the committee make any memorandums; any record of what they find?—Yes.

2946. That is to say, that the house is in good order; a general note?—Yes.

2947. How long are the committee going round the wards?—After they break up one or two go round, on the average, once a month; perhaps an hour and a half or two hours.

2948. Supposing that anything happens wrong in the female wards, to whom does the matron report it?—The nurses come and report it to me.

2949. In writing?—No; I go and see to it at once; if a patient falls, for instance.

2950. In the case of any negligence on the part of the attendants, so that the patient's comfort is disturbed, or in the case of any bruise, or anything of that kind, who reports upon it?—The nurse does. There is no other report.

2951. Verbally?—Yes.

2952. There is no record?—No.

2953. An accident would only be recorded in case it were a serious accident?—I should not record a black eye.

2954. Is there anything in the constitution of the hospital that enables the treasurer to issue rules at all, as distinct from the body of the committee?—No.

2955. How does it happen that he seems to have taken upon himself the duty of issuing various rules?—I cannot say. The treasurer is the person we look upon as the head of the institution.

2956. He is not higher than the president, is he?—No; the treasurer is the acting manager or director.

2957. Is not this the consequence, that rules exist which are binding upon the servants or the subordinate officers, of which the body of the committee know nothing?—Yes.

2958. And the officers also; for instance, the physicians. Is there any mode of making public those new rules or orders issued by the treasurer verbally or in writing to the governors, for instance?—No, there is not.

2959. With regard to the treatment for the males, finding occupation for them; that is your business, I presume?—Yes, now.

2960. And all their moral treatment; Mr. Nicholls has nothing to do with that now?—No.

2961. Who looks after their clothing and dress?—The steward.

2962. Do you see that they are properly dressed?—It is almost neutral ground. I do take upon myself, if I see that a patient is not sufficiently clothed, at once to speak of it.

2963. If Mr. Nicholls does not go through the wards he would not see it?—I should always do so. In respect of clothing, the limits of our jurisdiction are not very well defined. I do look after the clothing so far that I see what they have on. I would see them undressed, and if necessary would say, "You must get them something more."

2964. In whose department is the bedding?—The steward's.

2965. Does he go round and see what state the bedding is in?—There again I take upon myself to look after it. The fact is, that when

Dr. *W. Wood.*

22 Oct. 1851.

when I first went there, and for years afterwards, the bedding was very indifferent. It consisted of only a common sort of flock put into a loose bag, and I called the treasurer's attention to it, expressing my own opinion that it was a harbour for fleas, and in many other respects very objectionable and uncomfortable, and at my request he consented to have a mattress-maker appointed; and since that we have been going through the house, getting mattresses made for all the beds.

2966. With regard to the patients occupied for the day, is there any list made out, or any formal instructions given, to enable the attendants to know how or where they are to employ them?—Yes; I make out a list, twice every day, of those who are to go out morning and afternoon.

2967. Is there any record of the number of hours that they are employed?—Hardly that. It is understood that they go out after breakfast at 9 o'clock, and come in at 12.

2968. Is there any list of those patients who are on the sick list, or on the extra diet list?—No; but there is a list kept in the cutting-room.

2969. That varies from day to day, does it not?—Yes.

2970. What sort of reports are laid before the committee every week, as to what has happened during the preceding week?—There is no report; but they have often talked of having a journal kept. There were many things that they would have done, but I believe they felt that I had already too much to do to do well.

2971. As I understand the arrangements, the classification of the female patients is entirely with the matron?—Entirely.

2972. She can remove them as she pleases?—Yes.

2973. Is a report made as to the attendants, every week, to the committee by the resident apothecary?—There are what are called the attendants' books, where they have to sign their names when they come on duty.

2974. There is mention made in the evidence of the "Convalescent Book;" what is that?—That is, when a patient appears to be sufficiently well to be discharged, the name is put in the Convalescent book, and it is read to the committee.

2975. When you say that a man is convalescent, do you mean that he is well?—Yes.

2976. Well enough to be discharged?—That is the understanding.

2977. Is there any personal examination of the male patients on admission now?—Yes, they are all examined.

2978. Have they all been so?—Yes; and they have all a bath.

2979. Does the attendant make a report about the state of the body?—Yes.

2980. Is that verbal?—He makes it verbally, and I make it in writing, and lay it before the Board.

2981. In the same way as the matron does?—Yes.

2982. If they reported that they found sores on a patient's body and bruises, should you then consider it your duty to examine him?—Yes.

2983. And you do that?—Yes, certainly. If he says that he has got a rupture or a wound, I always see the patient.

Dr. *W. Wood.*
——
22 Oct. 1851.

2984. Then your statement is just the same, *mutatis mutandis*, as Mrs. Hunter's is on the female side?—Yes.

2985. There is a rule that says that you shall visit after the patients have gone to bed, and keep a record of the visits made to the galleries: is that one of the new rules?—There is an old rule of that sort.

2986. Then none of the rules, with regard to the change in the department of the steward, appear in print at all?—No.

2987. Do they appear anywhere in writing?—No more than is inferred from this. The practice had been up to this period for the steward to direct the male side of the house.

2988. It does not say that he is to cease to direct the male side, does it?—Yes; but it says that such servants are to be under the control of such an officer, and such servants under the control of such another officer.

2989. It is stated that you make reports weekly to the committee as to the state of the patients in writing: what report is that?—That is of the state of the patients, on admission, of their bodily condition.

2990. You have no power of suspending the male attendants, have you?—No; but if I think it necessary to do so, I go to the treasurer, and he does it.

2991. I rather fancied it was the steward?—The steward has exercised that authority.

2992. Is there an examination of the state and condition of the person of a patient on discharge?—No.

2993. Are you sure of that?—I have no idea that there is; generally speaking, when a patient goes out he is supposed to be well.

2994. Miss M. went out very ill, did she not?—I cannot say as to that. If a patient goes out well, we do not examine him; but if a patient is weakly, the last thing they have is to have a bath, to see if there is anything to call attention to.

2995. A patient may go out well, having wounds, or marks of them, on the body, and having received them before?—If a patient has been going on quietly for some time, and at last comes to be discharged, it is rather an ordeal for him to go through to be stripped to be examined. They are then rational enough to call attention themselves to anything that merits attention.

2996. Those reports that you make as to the state of the patients on admission are written into the committee's book?—Yes; So-and-so admitted; state of bodily health; free from bruises; So-and-so got sore or scar here.

2997. Are you, in the first instance, the person responsible for the rooms being properly warmed and ventilated, or who is?—I do not know that there is any rule; I do it when I see occasion.

2998. Whose duty do you consider it is; is it the steward's?—I take the duty upon myself on the male side.

2999. Now, I presume Mr. Nicholls very seldom comes and visits the house; he does not go regularly through the rooms now?—I do not know.

3000. There is a difference in his mode of going to work now, is there not?—I really cannot say; I do not know how often he went before.

3001. You

3001. You are all day, I suppose, going about?—I have so many other duties to perform out of the wards.

3002. What other duties out of the wards?—Seeing the patients' friends, keeping the cases, making up medicines, and preparing drugs.

3003. How many medicines do you make up in a day; a dozen?—There are certain things to make up as I have an opportunity.

3004. I presume you go through the male side without being accompanied by any male attendant?—In the day-time, when I go through the wards, an attendant is always with me. I have to ask him questions about the patients.

3005. There is no rule preventing you going by yourself, is there?—No.

3006. Do you often go by yourself?—Constantly.

3007. On the female side is there any rule about it?—I never go into the female wards without finding the nurse, the first thing, for my own protection.

3008. Is there any rule laid down about it?—Yes, as regards going in after a certain hour; but it is a rule that I have invariably observed for my own sake.

3009. In your evidence you state that the treasurer has diminished your authority by transferring the classification of the female patients to the matron: that, I understand, is done by a verbal order?—Yes.

3010. Was that order communicated to the physicians and approved of by them, or were they consulted in the matter?—No.

3011. Was anybody consulted upon the matter?—I am not aware. The matron, the treasurer, and myself were in the room at the time.

3012. You say, "There is no use in my remonstrating against any positive order:" you consider it was a positive order?—Certainly.

3013. If you thought it an imprudent order, did you expostulate against it before the committee?—No, I did not.

3014. In the wards, have the attendants ward-lists of the patients under their charge?—No particular list.

3015. With regard to the criminal patients, are they treated in all respects, and employed in the same way, as the ordinary patients?—No; they are not employed; they never come out of the wing.

3016. Not into the airing ground?—Yes; there is an airing ground especially for them.

3017. They are not employed in the same way as the other patients?—No.

3018. They have no employmeut out of their side of the building?—Scarcely any; a little household work about the place. We have no authority to take them out of the wing for any purpose.

3019. How is that; the treasurer might give an order, might he not?—Yes, of course; but the treasurer would be responsible for it.

3020. If you recommended it as good for their health, for instance?—They are committed to that wing, which is a separate wing, and distinct from the hospital, by the warrant of the Secretary of State.

3021. Does the warrant speak of that wing only?—Yes; it speaks of the criminal department, which is a distinct department.

3022. The workshops are an adjunct to the whole building, are they not?—Yes. I believe an application was made to the governors for permission

Dr. *W. Wood.*
22 Oct. 1851.

mission to have some workshops erected for the criminal patients, and they refused it.

3023. Is this a correct account of the rule as given by the treasurer?—He stated in his evidence, that "The medical officer has the patients entirely under his charge; his duty is to go round the hospital frequently to see all the patients; not particularly to interfere with their moral treatment:" that is with reference to the females?—I have felt that the less I interfered on the female side the better.

3024. Is there a rule that the medical officer should visit after the patients are gone to bed?—Yes.

3025. Does that mean to see them in bed?—Not necessarily; just to go into the wards to hear if anything is going on. My interpretation of the words is, that it is expected I should go now and then into the wards on the male side without anybody knowing, and listen to hear what is going on, and if I think necessary, to summon the attendant to open the door of any particular patient.

3026. You do not turn over the bedding of the patients?—On the male side I do.

3027. Frequently?—Yes, whenever I have any reason to think it necessary; I did this morning.

3028. When did the register of bruises and injuries begin to exist?—There is no record of them.

3029. Is it not the rule that they should be recorded in some book?—No; only that they should be reported to the medical officer.

3030. They may be reported verbally?—Yes.

3031. Whatever bruises or injuries, less than fractures, occur, there may be no means of tracing them back, because they are forgotten?—There would, if there was much the matter; for instance, last week, or the week before last, a man, with a very small crochet hook that we have to make gloves with, contrived to make rather a large hole in the side of his neck, evidently intending to get at the carotid artery, and that was reported; a specific report of it was made in the committee-book. In the committee-book, every week, I have to put down the number of the patients in each particular gallery, and under whose care they are—the names of the attendants, and the number of patients that they have under their care.

3032. That you get, as to the females, from Mrs. Hunter?—Yes.

3033. Then you have the convalescent book, the case book, and the prescription book, and the reports of the examinations, on admission, you write into the committee's books?—Yes.

3034. There has been no new rule made, has there, with reference to your visiting the wards at night?—No.

3035. No new rule, except so far as some distinction has been made in the line of your duties and of Mr. Nicholls's, and of the matron's?—No; I think I may say that there is no other rule.

3036. The case book is produced every week before the committee, and inspected by whom?—The treasurer, or whoever is in the chair.

3037. He does not peruse any one of the cases throughout, does he?—Not as a rule. It is for him to approve of the report of the case generally, and he signs it, as having approved of the report that is made of the case generally.

3038. It is the case book which comprehends the cases of all the patients

patients in the house?—Yes; there are several cases divided for male and female patients, and so on.

3039. There is a case book which comprehends the 200 males, and another that comprehends 200 females?—More than that. The case book is divided; there is Dr. Monro's male case book, and Sir Alexander Morison's male case book for each year.

3040. Are they kept in their custody, or in yours?—In mine.

3041. Have you made the entries in them?—Yes.

3042. You keep all the books, in fact?—Yes.

3043. Such is the rule, that the entries are made by you?—Yes; excepting now and then, that I get a stray pupil to copy a case out for me.

3044. What supervision do Dr. Monro and Sir Alexander Morison give to those books; do they look them over at all?—I do not know that they do; they leave it to me, I think, generally.

3045. I suppose Mr. Nicholls takes a good deal of what may be called secretary's work?—Yes.

3046. With regard to exercise, what means have the patients of taking exercise?—As many as we can are sent out to work in the garden, and there is an airing court.

3047. Are any ever sent beyond the precincts?—No; there have been within the last six months two exceptions.

3048. Do they go out by themselves?—No; two were allowed to go to see the Exhibition.

3049. You never have a carriage, and give them a drive?—No.

3050. Suppose that carriage exercise were very desirable for persons labouring under some delicate affection, would it be allowed?—We have no means of affording it; it is contrary to the practice.

3051. According to your practice, what is your time of making your rounds?—I generally make my visit, the general visit, about 10 o'clock in the morning; my duty is to go round with the physicians whenever they go round.

3052. What time of the day do they generally come?—About two o'clock.

3053. About dinner-time?—No; most of the patients have done their dinner at that time; some may be at dinner; you may, perhaps, in two wards see them at dinner; but the great majority have finished dinner.

3054. Now that Dr. Monro is unwell, either you take his duty for him entirely, or Sir Alexander Morison comes every day in the week?—Sir Alexander Morison is very active; he is there very frequently, and he would not interfere with Dr. Monro's patients unless I asked him to do so; he does not know them.

3055. Do you go round late at night?—Not as a regular visit; I go to see an individual case.

3056. You do not go round once after the patients are put to bed?—Not as a practice.

3057. Do you ever do it?—I have done so occasionally.

3058. Have you gone through an entire ward?—Yes, constantly; I do go into the ward now and then, and walk through the ward now and then on the men's side.

3059. In regard to the food and clothing, and the moral treatment of

Dr. *W. Wood.*

22 Oct. 1851.

of the criminal patients, they are on the same footing as the other patients, are they not?—Yes; they all wear a sort of uniform, the ordinary dress.

3060. Which the others do not?—Which the others do not; the patients, generally, are found in clothes by their friends.

3061. Do you see any difficulty as to the plan of having combined with Bethlehem a wing for criminal patients?—They can scarcely be said to be in the same institution; they are in a totally different building, and never mix; they have a separate airing court.

3062. Bethlehem Hospital is a place for cure; is it so for the criminal patients as well as for the others?—The criminal wing is rather a prison than anything else; they go there to be cured, if they can.

3063. Have you the same means of cure in the one place as the other?—No.

3064. Then it is not a house so well adapted for cure as the ordinary wards at Bethlehem Hospital?—Certainly not; we have no means of employing them, and we cannot send them out to work; there are no workshops.

3065. Are they under greater control, and more inclosed?—Yes.

3066. They are within loftier walls, and it would be more difficult to make their escape?—Yes.

3067. It is more like a prison in its construction?—Yes, and the departments are divided by iron bars.

3068. Looking at the object of sending patients to a lunatic asylum, you do not think that those places are so well adapted for the purpose as the ordinary wards of Bethlehem?—No; the great defect of the system generally is, that all classes of what are called criminal lunatics are herded together.

3069. Have you ever considered what would be the best mode of disposing of that class of patients?—No doubt. In the first place, it seems to me that the whole system is so bad that it would require some time to explain all I think on that matter. From the beginning to the end, the treatment of criminal lunatics is very bad indeed, and there are a great many of them who are not lunatics at all, and never have been, and who have been acquitted just for the sake of saving extreme punishment.

3070. With regard to the females, are they under the matron, and has she just the same power over them as over the general wards?—Yes.

3071. And you, on the other hand, have the same control there as on the male side generally?—Yes.

3072. And their treatment in all respects, their food, bedding, and comforts, are all the same as for the others?—Yes.

3073. You make no distinction in the class of patients, or their rank?—No; only the distinction that the form of the malady requires.

3074. If you were asked your opinion as to the mental state of the criminal lunatics in Bethlehem, is there a considerable number whom you would certify to be in sound mind?—Yes, there are several.

3075. In what proportion?—We have 110, or 111, I think, now in the house, and I should say, at a rough guess, that all above the 100 are sane.

3076. A tenth or eleventh?—Yes.

The Witness withdrew. [Adjourned.

Tuesday, 18 *November* 1851.

THE RIGHT HON. THE EARL OF SHAFTESBURY, IN THE CHAIR.

John Welsh, sworn; and examined.

John Welsh.

18 Nov. 1851.

3077. You have been a keeper at Bethlehem Hospital?—Yes.

3078. How long were you a keeper there?—I was engaged about the 9th of August this year, and I was there until the 7th of November.

3079. What ward were you in?—I was in the lower basement.

3080. On the male side?—Yes; the front basement.

3081. Were you put at once into that ward?—Yes.

3082. Had you been a keeper somewhere before?—No. I was put in there in consequence of my being rather sickly when I went there.

3083. Were you engaged as a keeper in the first instance?—Yes. One day when I was passing by the hospital I was looking through the railings, and I saw two patients and a keeper rolling the grass with a roller, and I thought, in my own mind, that one of those two men wished to get out; I saw him look after the keeper; I waited a few minutes, and he let go the roller, and the keeper took it and went on ahead with the roller with the other man on his right hand. The patient stopped behind, and in a minute he was over the railings into St. George's Road. About a dozen men with several carts selling ginger-beer were by, but I saw no one attempt to stop him, and I went and stopped him, and I took him in through the occupation gate into the hospital, where I met the keeper, and he took him into the hospital. He had run through the building to meet me at the back of the building; he did not jump over the railings; I came away, and I left the man with this man at the occupation gate, and he came down to the gate and gave me 2*d.* for taking the man. I was then not in a situation of constancy, and I applied for a situation. I went and saw Dr. Wood, and on account of my not being in a very good state of health he gave me a week, and on the Saturday following, the 9th of August, I entered on my duties there. During the time I was there I have seen several things that I intimated to one that I thought not correct and proper, and there were tales told by some of the keepers to Dr. Wood, and when my time was up at two months' time, he said that several of the keepers could not speak well of me, but that I should have another month, and that he should watch me narrowly, and if he saw that I was fit to be made a keeper he would keep me on. At this time there was a man very bad of the name H., and I had repeatedly been called for to go down into the back basement, where the dirty patients are, to assist this man to dress, and this H. was then very bad; and I have seen this practised. They pull all the clothes off the patient; and the keeper is there now of the name of Thomas, who resorted to the stocking, and put it round the man's

John Welsh.

18 Nov. 1851.

man's neck, and tied it like this (*describing the same*), in a noose, and held him till the man was very nearly strangled. I spoke about it; and I think a man went and told the keepers, and they told the doctor. They wished to get rid of me, and I was ordered to leave.

3084. What were the complaints which you had previously made to Dr. Wood?—I asked him, but he would not give me any satisfaction; I asked him the reasons why I was not capable of filling the situation as well as those that were there, and he said that the other keepers could not speak well of me.

3085. Do you know what reason they assigned?—Several times when I was there (I was the junior officer) I have seen things which were not right going on.

3086. What sort of things?—I have seen bottles of gin passed through the windows, that were brought in by the bricklayers' labourers, who were putting in windows; and this man in particular, who is in the constant habit of using the stocking, he was the man that sent for it; Thomas.

3087. What is his Christian name?—Seth. He knew that I knew of this gin being brought in. I had been a married man, and I was over-anxious to be in, and instead of being late I have gone at nine o'clock, when my night should have been out, to sleep in, and they have thought that I came in to watch their doings; and when I went in they have been playing at cards and gambling in the lobby. I took no notice of that. And this man made a very bad remark upon me, which was told me by the gardener. On this Saturday night the man said, "Is that b—— come in; I do not suppose he has got a bed to lie on, or he would not come in here;" and on the following morning the gardener told me what this man had stated. I spoke to the senior keeper about it, and I said that I did not think it was right for a person to be spoken about in those terms, and that Dr. Wood, or somebody, or he must try to stop it. He asked this man about it, and he denied it; and from that time anything that I said, this man, I verily believe, has told the doctor.

3088. You stated that you saw Thomas put a stocking round Mr. H.'s neck?—In getting him out of the cell, or putting him to bed, H. was very stubborn in all his dealings as a lunatic, but I have got him up myself without using the stocking; and others too.

3089. When you went into the cell in the morning what took place?—The first thing on the opening of the cell in the morning he used to want to rush out; and this man would stand by with the stocking and catch it round his throat; and then he used to dress him, and get one of the patients that was much better to put on his stockings and boots, whilst he held him with the stocking.

3090. Did he ever use any other means of restraint?—No, no other means. A few days after this a man came in from the Strand Union, named P., and he was very bad indeed when he came in.

3091. Was he very violent?—Not violent with madness, but full of antics; and this man was very stubborn to be dressed, and Thomas called me into the back to assist him on account of his mate, as he was called, being away (and he had been so for several weeks), and this stocking was again put round his neck, and he was actually strangled; and I said, "You will strangle the man." And he said,

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"We must do it to exhaust them, or we should not be able to dress them." And there were several labouring men who were working there, two bricklayers and a boy, who were looking through the windows at the time.

3092. Was the stocking always used?—It was used by him, and I believe it has been the custom of others that were down in charge of the basement to use the stocking, and this man was perfectly strangled; his eyes were staring out of his head.

3093. Now will you return to the case of Mr. H., and state what you know?—I thought the man was getting very low, in a mental state, and he could not eat, and until that time they had to resort to the stomach-pump; there was no attention, that I saw, paid to him, as regards the doctor or medicine; but when the keeper reported to the doctor that Mr. H. could not eat, then he used the stomach injection, which he fed him with about two days, twice a day, and he found it consistent that he should not be fed twice a day, and then he fed him only once; and very seldom he was fed at his proper time; that is, at the time that the patients generally get their dinner; it was an hour or an hour and a half before he had it. I have myself undone that man in the chair after he was tied down with two round towels, and took him back to the dining-room, and waited for 20 minutes, or half an hour, for the doctor to come and feed him, and then I have undone him myself. On one occasion I took him back, and then he had to be tied again to be fed, because the doctor could not attend to him.

3094. Up to the time when he became so weak, and required the stomach-pump to be used, did you see Thomas make use of the stocking?—That was before the stomach-pump was used; before he refused his victuals, because the reason, as I understood it, why he refused, was that his neck was so sore. On one occasion I caught hold of his coat to fetch him in or out of the yard, and he put his hand up to his throat.

3095. How often did Thomas use the stocking to Mr. H.?—About twice to Mr. H., and once to P.

3096. It was some time before Mr. H. refused his food that Thomas used the stocking?—Yes, it was.

3097. Did you see any bad consequences result from using the stocking?—I saw his neck like in veins, very much like as if it was contracted with something; it looked all bloodshot inside the neck, and he always had his hands up to his neck.

3098. Was that owing to the use of the stocking?—I should say it was; because before, when he had been there only a few days, I found that he took his victuals very well, and after he had been there some time he would not, and, as I understood, after he left he took food the first day he went home; he took a knife and fork in his hand, and eat the best part of a sole.

3099. The patients you had the care of were clean patients, were they not?—The bettermost patients of the lower basement; occasionally I used to go to assist, when I was required, in the back basement.

3100. In what employment are you now?—None; I have been in none since. I went up on the Friday, the day I left, to the committee to state these things, and I was not allowed to be heard; I was ordered out

John Welsh.

18 Nov. 1851.

out of the room, and I was told that if I did not go I should be put out; and I found out what constituted that committee was one person, the treasurer, Mr. Johnson, he was the only person that formed the committee. I did not feel very well satisfied that the doctor gave his decision against me, and I went to him, and asked him to inform me who gave him these false reports against me, and to bring them face to face, and he told me I had spoken disrespectfully at the back.

3101. You went to Dr. Wood, and requested permission to go before the committee?—Yes; I went to him on the Tuesday, and he told me that I should have to leave in a week.

3102. Did he assign any particular reason for that?—He said that he thought the situation did not suit me.

3103. There was no charge of misconduct?—None whatever; and he said that he would give me a good character.

3104. Did he give you a written character?—No, none at all; I never asked him for any. I went to the committee on the following Friday; I was ushered in by the porter, and Mr. Johnson was in the chair. He asked me what I had to say, and I told him; and he said, "You can go out, and if you do not go out we will put you out;" I then went to Dr. Wood.

3105. Will you proceed with your account about Mr. H.?—After several days he could not take his food, and he was fed by this injection-pipe every day, and no other food was ever administered to him, that I ever saw. On the visiting day his friends came to see him, and I believe they were not allowed to see him; the rule is, that no one can see a patient who has been admitted until he has been there a month; but on account of the patient being so very bad, I believe, Dr. Wood gave them permission to see him. His two brothers came to see him, and as soon as they saw him, and the state he was in, they immediately went off and fetched their bondsman, and he particularly wished to take this man out. I never saw any medicine administered to him, and I did not see any particular attention shown towards him.

3106. You saw food administered to him, did you not?—Yes, through the pipe.

3107. Then you say he was taken away?—Yes, by his bondsman and brother, to his residence.

3108. How long did he live after that?—He lived two or three days, I do not know exactly which.

3109. Did you see him after he died?—Yes, I did; I went to inquire. I said, before I left the hospital, "There has been unjust treatment towards H., and if he dies I will make a report about it."

3110. Did you see his body?—Yes.

3111. Were there any marks upon his body?—Yes, the same marks that I saw on his neck; and he complained, I believe, to his friends about their squeezing him round the neck.

3112. Were they in the habit of applying this stocking to any other patient?—Yes, I saw it applied to a man of the name of P.; I was not employed in that part of the place where he was, I was only called over there occasionally.

3113. Did it appear to you to be the common practice?—I have heard so since.

3114. Tell the Commissioners what you saw?—I had to assist P.

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one morning; as I was going to unlock the cell, the other keeper said, "Do not do it, wait till I come." I did wait till he came, and the man came out; he ran out of the cell, and I caught hold of him in my arms, and he came and put the stocking round him, and held him till I and another patient helped to dress this man, and until he was black and blue in the face; and I then said to this man, Thomas, "You are strangling the man; for God's sake don't do it;" he said, "We must exhaust him."

3115. Did you ever see him do it more than once?—Only once to P., and to H. about twice.

3116. You stated, did you not, that when you endeavoured to make a complaint you were refused admission?—When I went before the committee I went to make my complaint about the treatment I had received, without knowing the reason why.

3117. Who ordered you out of the room?—Mr. Johnson, the president of the committee.

3118. Was he the only person in that committee?—He was the only person there as the committee.

3119. What day of the week was that?—On Friday, the usual weekly day.

3120. What had you said to him before he ordered you out of the room?—I told him how I was engaged, and told him how I got the situation was by taking a man in St. George's Road, and I thought from what I had done since, for I had prevented a man hanging himself, that I was unjustly treated by being sent away in so short a period; I had got as far as that when he ordered me out of the room.

3121. Did you tell him that you had a specific statement to make?—No.

3122. Did you give him to understand that you had any information to give him about the treatment of any of the patients?—No; I came up to the table, and he said, "State what you want;" and I said "I thought that justice had not been done to me."

3123. You stated that you had prevented a man from hanging himself?—Yes; on one occasion after Dr. Wood had said that he would watch me narrowly in doing my duty, I saw him looking through a window at the same time that I had my hand on my knee watching a man who had taken his braces off, and had torn up a part of another man's canvas coat; I was watching him about at the same time, and this man went into the closet and I ran down immediately; he had got his leather braces tied, and he got for about the same length as my handkerchief (*describing the same*) canvas and another silk handkerchief made into a noose, and he could have got on to some slates adjacent to an iron bar, and have hung himself; and he was just getting up on to the slates when I caught him, and he said, "For God's sake, no; I am going to hang myself; I will let my sister know the reason for putting me in here." His name was E.

3124. Was he discharged afterwards?—No, he is there now; I have heard that man complain, until the day that I came out, that he has asked for medicine repeatedly, and never got it.

3125. Thomas had the care of the dirty patients, had he not, on the male side?—Yes, and a man of the name of G.

3126. Did you see in what way those patients slept?—The patients

John Welsh.

18 Nov. 1851.

that were very dirty there had straw put under andabove on the to p ; if they were destructive they would have thick sheets made of canvas and woollen stitched together, so that they could not tear them.

3127. Did you ever see them put to bed?—Yes.

3128. Had they shirts on?—Some of them had not; some of their shirts are taken off.

3129. You are speaking of the males?—Yes; and a canvas frock put on.

3130. Did any of them sleep quite naked?—I could not speak to that.

3131. None of your patients were so?—None.

3132. Was E.'s attempt at suicide ever reported to the committee? —I do not know ; I went immediately when I caught him.

3133. To whom did you report it?—I reported it to Dr. Wood.

3134. Was any further inquiry made into the case?—I believe there was by Dr. Wood, for the doctor sent him down immediately into the basement.

3135. Were you called before the Board with reference to that case?—No, I was not.

3136. Did you ever see the dirty patients washed in the morning? —Yes; those that are very dirty are taken away from the cell into the bath-room, and it is at the option of this man who has the charge, the senior keeper, to put them into the bath, where warm water might be applied, or into the shower bath ; but it was invariably the shower bath, and he kept them in about a quarter of an hour or 20 minutes.

3137. And the water falling down all the time?—Yes.

3138. Cold water?—Yes.

3139. Was it in winter?—Yes, it has been within the last month.

3140. Are you sure that the time was a quarter of an hour?— Yes; a quarter of an hour, I am certain, they have kept them in.

3141. Are you speaking of things that have occurred within the last month?—Within the last two months or three months.

3142. Have you ever seen that shower bath applied to wash the patients in winter weather?—Yes; a man had the shower bath some few days before I came out.

3143. You say that that was the only mode of washing the patients? —Yes, when they did not use the warm bath; but there is no warm water there at that early time in the morning, six o'clock ; the fires are not lighted till about that time.

3144. How are the patients dried after that?—With a sheet or towel, and a shirt is put on.

3145. Have you any further information to give to the Commissioners?—No ; these are the most particular things I have to state.

3146. Was the fact of the use of the stocking reported to Dr. Wood? —No.

3147. Or to any of the committee?—I am not aware whether it has ever been reported before.

3148. Not by you?—No ; I wanted to state it on the Friday.

3149. What was the manner and general conduct of the keepers towards the patients ; was it kind, or harsh?—As far as the number of keepers that they allow in the establishment goes, I should say that they

they are not so kind as if there were more keepers to do the work; there is not a sufficient number of keepers, especially in the lower basement, to do the work required by the hospital authorities.

3150. To attend to the patients properly?—Yes. The general conduct in the upper galleries is very good; I never heard any of the patients complain.

3151. You have been in the dirtiest ward, have you not?—No, I was in the front basement.

3152. But you were sent for occasionally?—Yes, I was.

3153. Had you an opportunity of knowing in what state the patients in the lower or dirtiest ward were; did you ever see a patient struck by a keeper?—Yes, I did.

3154. Who was that?—I saw a man of the name of D— struck.

3155. By whom was he struck?—He was struck by a keeper of the name of Henever.

3156. In which ward?—The man belonged to the lower basement, and the keeper belonged to No. 4 gallery; and Captain S—, a patient in there, (I believe he has gone out perfectly sane) reported this man to Dr. Wood for striking this man, and Dr. Wood checked him in the ward, where there were about 120 patients, and said that he knew very well it was wrong to strike a patient, and it was stated in the book that a man would be discharged for doing so; that was all I heard about it.

3157. He was not discharged?—No.

3158. What did he strike him with?—He struck him three times with his fist.

3159. You said that you saw H.'s body after he was dead?—Yes.

3160. Was there any inquest on the body?—No. I told his friends that I wished a *post mortem* examination of the body to open the man's neck, to see whether what I have now stated could be verified.

3161. You stated that he had a habit of putting his hands against his neck?—Yes.

3162. And might he not have made the mark with his hands?—When he first came he had his hands up against his head.

3163. The skin was not broken, was it?—No; it looked like, if you have seen a fowl with its neck broken, like blood all inside; and this P.'s neck was worse of the two than H.'s.

3164. Was the body examined by the medical officers of the hospital?—No.

3165. Can you say that the marks on P.'s neck were caused by the stocking?—I am certain of it; I saw him half an hour afterwards.

3166. Did you see the neck before, without the marks?—Yes.

3167. How long did those marks remain?—Until I came out; they may be on his neck; he is still a patient, and very probably he has had the stocking since then.

3168. How did they shave the patients?—I helped to shave them every Wednesday and Saturday morning.

3169. How were they kept quiet when they were shaved?—They were held if they were troublesome.

3170. Have you ever made any written statement to the committee upon these subjects of complaint?—No, I have not. I have seen on

John Welsh.

18 Nov. 1851.

several occasions men who were equally as bad as H., who have been treated in a different way; they have put a man into a warm bath for an hour; and after an hour they have stood him up, and they have got a gutta percha tube that comes from a waterfall over the bath, and the man stood in this way (*describing the same*), and the water was poured on the back part of his head for 10 minutes; and on the following morning that man had come to his senses, as much as some people would in a month; he was perfectly collected, and he asked how came they to put him in there. There was another instance of a man in No. 3 gallery, and he was treated in the same way, and he was perfectly better in the morning, and could take a pint of beer at 11 o'clock, and eat his dinner.

3171. Have you anything further to state as to H. and P.?—No.

3172. Did the friends of H. make any complaint?—I believe they did; they went to the doctor about it.

3173. How came you to communicate with Mr. H. upon the subject?—A young man who was formerly there as keeper, of the name of Marson, informed me; he came to me on the Sunday after I was discharged on the Friday, and said, "If you have seen anything that was not correct towards the patients, or if you have not been treated well yourself, you can have other redress by applying here," and he immediately told me of Mr. H., and I went to him, and that is how I found it out.

3174. What were you before you were engaged as a keeper?—I had been in the army, in the Rifle Brigade, in the first battalion.

3175. Had you left your regiment long before you were engaged as keeper at Bethlehem?—About five years; I left them in Corfu.

3176. Why were you discharged?—I purchased it; I was messman when I left the regiment.

[The Witness withdrew.

Mr. *Samuel H.*, sworn, and examined.

Mr. *S. H.*

3177. You had a brother a patient in Bethlehem?—Yes.

3178. When was he sent there?—He went on the 26th of September, and was removed on the 5th of November.

3179. Why was he removed so soon?—Because we were dissatisfied with the treatment he received and by his appearance. I went to see him on the Monday, and he was moved on the Wednesday, and he had two black eyes.

3180. Did you observe anything else?—About one inch of skin was off the bridge of the nose.

3181. Did it appear as if caused by a blow?—Yes, as if he had received a blow.

3182. What inquiries did you make upon the subject?—I inquired of Dr. Wood how he came to have those black eyes, and he stated that upon one of the keepers taking him out of his cell, another patient passing slammed the door to, and struck him across the face. I said I was surprised that he should have blackened both his eyes and his nose, and bruised and disfigured his temples. He said that he would not eat, and he was compelled to feed him with a stomach-pump.

3183. Did

Mr. *S. H.*
18 Nov. 1851.

3183. Did you make any further inquiry?—Not at that time. I wished to know if I could have him removed to my house. Dr. Wood said, not till the following Wednesday, as the treasurer was out of town. On the following Wednesday I went and found that he had a fresh wound on the back of his head, sufficiently large to put the point of your small finger in. Dr. Wood said that he had fallen down against the screen that goes over the fireplace.

3184. Was he paralysed?—Not at all.

3185. Had he fits?—No; they said that he was too weak to sit up in a chair. On taking him home he eat three parts of a boiled sole, but experienced great difficulty in swallowing. I asked him the reason, and he whispered that he had had his throat squeezed and he could not eat the beef and potatoes they gave him; and on account of his not eating the beef they turned him out and put him in the back yard.

3186. Did he appear to be tolerably rational at this time?—On Friday morning, at two o'clock, his reason returned, and speech also. He said that on going to bed he struck one of the keepers. The keeper said, "We do not have any of this nonsense here. You are in a madhouse now." And my brother made reply and said, "Oh, my poor wife!" The keeper said, "That she had another one, and did not want him now."

3187. That was untrue, was it not?—Yes, perfectly so.

3188. How long did he live after he left the asylum?—He died at 10 minutes past six on the Saturday morning after he left.

3189. Was there any examination by a surgeon?—No; his father objected to have his throat opened.

3190. Did there appear to be any external mark?—Yes; the skin of the throat hung very flabby, and very dark.

3191. Was it discoloured?—Purple. He told me that a man had squeezed his throat.

3192. Did he describe how it was squeezed?—No, he did not. They put something over his head and squeezed his throat.

3193. Did he say that this was done often?—It was so frequent that he could not swallow. The only thing he eat was a boiled sole, with the exception of calves-feet jelly and beef-tea that I fed him with, with a spoon.

3194. Did you examine his body after his death?—Yes; the small part of his back was very black indeed. The back bone projected out and was very black, and round his finger nails it was purple, and his knees were very much bruised indeed, and right down to the ankle.

3195. On both legs?—On the right leg.

3196. In consequence of what you saw, did you make any complaint against his treatment at the hospital?—A younger brother of mine went to get a certificate of his death from Dr. Wood, and he mentioned all particulars to the doctor, and the doctor told him to impress upon the mind of his family that he had been very kindly treated. He told me himself that no tongue could tell what he suffered when he was there. In the morning they took him out of his cell and made him walk, naked as he was, to the place where they poured water over him for 10 minutes or a quarter of an hour; and

Mr. *S. H.*

18 Nov. 1851.

they frequently laid him on his back on the cold stones, naked as he was, before they dressed him.

3197. Did they wash him on the stones?—No; it appears that this water was to wash him. They did not take the trouble to wash him; they put him under the water.

3198. And they laid him on the cold stones?—Yes, to get the wet off before they put his clothes on.

3199. On the stones of the passage?—Some stones.

3200. Have you made any complaint to the governors of Bethlehem?—No; I have not been there at all. My brother left a wife and three children living, and she expects to be confined every day, and she has been in very contracted circumstances.

3201. Did you know the condition of your brother's body when he went into the hospital?—Yes, I took him in. He had not any marks on his person, and he was about 10 stone in weight.

3202. When he came home what was his condition?—Then he had two black eyes, one inch of skin nearly off his nose, and his temples blackened and bruised very much; a wound at the back of the head and marks upon the knees; and then he did not weigh more than seven stone.

3203. You did not actually weigh him?—No, we did not.

3204. He was very much smaller, was he not?—Yes; he did not weigh more than I do now. He complained of not having had sufficient food; that they locked him up, and did not give him sufficient food to eat.

3205. Did he not refuse his food?—He said that he did not, only till such time that a very dark man squeezed his throat, and then he could not swallow the beef; and then, because he could not do it, they turned him out into a back yard.

3206. Do you mean that they removed him from one ward to another?—No; from the house out into the open air. The only thing that he ate at all after he came home was three parts of a cold sole. He could not swallow any bread with it; it was too harsh, and he continually kept his hand up to his throat.

3207. He said, did he not, that the difficulty in swallowing was from something having been put round his throat?—Yes.

3208. Is there any other matter upon which you can give the Commissioners any information?—No; only that he said he had been very cruelly treated during the time he was there, and it appeared to him that all the keepers were more unkind to him than to any of the rest. I made frequent applications to see him, but they would not let me until he had been there a month, and unfortunately he had been there a month on the Friday. The visiting day was on the following Monday, therefore I could not see him on that day. He was there a month and four days.

3209. Had he a good appetite when he went in?—Yes; the last Thursday he was at home he eat nine slices of bread and butter for his tea.

3210. Was he strong at that time?—Yes, very strong. He was a very strong man, though a little man, and he had been a very great rower.

3211. How long had he been insane?—About a month.

3212. That was his first attack, was it?—Yes.

3213. Had

Mr. *S. H.*

18 Nov. 1851.

3213. Had he been in the habit of drinking?—No, I never saw him the worse for liquor in my life. He was very sober and steady.

3214. Did he ever complain of the keepers having beaten him?—He said that they knocked him down on two or three occasions and jumped upon him; and he described the man that used to squeeze his neck as rather a tall man, with very dark whiskers and a yellow tooth in front.

3215. You do not know whether his name happened to be Thomas?—That was the name he told me.

3216. Has any communication of these facts been made in writing to the authorities of the hospital?—No.

[The Witness withdrew.

Mr. *Andrew Wentzell*, sworn, and examined.

Mr. *A. Wentzell.*

3217. Can you give the Commissioners some information about H., who was a patient in Bethlehem?—Yes.

3218. You knew the patient before he went to Bethlehem?—Yes, for many years; we were boys together.

3219. Did you see the condition of mind and body in which he was?—Yes, frequently.

3220. What was his bodily condition?—He was a very healthy strong man; a little man, and very muscular.

3221. Weighing about how much?—I should think he was about 11 stone. I have frequently been with him; in fact, we have rowed matches together; he was an oar and scull maker, and I am a boat-builder.

3222. How long did he remain in Bethlehem?—He was in Bethlehem, I think, about five weeks.

3223. Did you see him when he came out?—I went the first day when visitors were allowed to see him.

3224. You also saw him on his leaving the hospital, did you not?—Yes. I was one who brought him away; he was then quite emaciated; he was a perfect skeleton; in fact, it was impossible to conceive such an alteration. I was alarmed when I saw him; his eyes were blackened all down the cheek, and his nose was cut; in fact, he was a dreadful object; I never saw anything so horrid in my life.

3225. Did you make any observation about it to any person in the hospital?—I had some slight conversation with Dr. Wood, and he accounted for the bruises on his face by his having got against a door in some way, which I could not say I understood, and that the door was crushed in, and the door caught his face. But the principal complaints he made were about the throat. I was with him just before he died, when he became sensible.

3226. Did you see his throat at the time?—I saw it.

3227. What appearance did it present?—There was nothing external.

3228. Was there any discolouration?—He was discoloured altogether, the face and neck and head; he complained a great deal of his throat.

3229. Did the throat look somewhat different?—It was discoloured.

 3230. Did

Mr. *A. Wentzell.*

18 Nov. 1851.

3230. Did he say how it occurred?—He said they twisted his throat; but of course it was incoherent, a part of it. He became, on the Friday previous to his death, tolerably sensible for a man in that weak state.

3231. When tolerably sane, what did he state as to the reason for his ill-treatment?—The whole time was spent in upbraiding his family and those connected with him for leaving him there. He addressed himself to me; he said, "I wonder you did not intercede for me." And I said, to soothe him, "By the rule that they would not let you out they would not let me in." He said, "You could have got plenty of policemen."

3232. Did he at that time give you some account of the mode in which he had been treated?—He said, "You have brought me home to die." I said, "You would not eat." He said, "Would I not if I could have got it?" I said, "You were compelled to be fed; you would not take food." He said, "I only wish I could have got it, I would have eaten. Now I know I am dying."

3233. Did you make any inquiry about those bruises?—Not more than I have just stated. He said they knocked him down.

3234. Who did?—The keeper he was alluding to.

3235. Did he mention the name of any keeper?—No, he did not. I knew nothing of the names of any keeper till the conversation I had with the person whom you have already examined. The name of the keeper was Thomas who he said ill-used him.

3236. Did you ever see H. during the time he was a patient in Bethlehem Hospital?—I saw him on the Monday. I went on the first day that friends were admitted, and he had been in then five weeks within a day. His two brothers went in the morning at the time that visitors are allowed to see patients, and came home and brought a very unfavourable account of him; and that unfavourable account induced his mother, who is a very kind-hearted woman, to have him home; and the brother, whom you have examined, came and asked me if I would go to the hospital with him for that purpose, and see how soon they could get him away. We went to the hospital, and waited some time, and saw Dr. Wood, and he then said, "I am afraid you will not be able to move him, he is in such a bad state." He said, "I do not know whether he will live; and the only day on which we discharge patients is Friday, and then the treasurer has the power of giving an order for his discharge; but he is out of town. I will write to him to-day, and I shall get an answer, so that you can take him away on Wednesday." I said, "I should, if it is not contrary to the rules, like to see him." I had not seen him in the time that is allowed for visitors to see them, and he said "Yes," he would give orders that I should see him. I saw him; and he was then in the dreadful state I have described; and I then went again with the brother, whom you have examined, to bring him away on the Wednesday.

3237. When you saw him in the hospital you never saw any ill-treatment, did you?—No.

3238. Where did you see him?—On the Monday he was brought into, I suppose it is what they call the receiving-room, down in the lower part; but still there is a large grating, where there is a fire. I suppose

suppose it is where the patients, when a little better and collected, are allowed to go. I did not go to his cell to see him; I did go to the cell on the Wednesday. On the Monday two keepers brought him and supported him into this place, and he evidently knew me, but did not speak; and in his weak manner, as I was going away, for it was too painful a scene to last long, he made an ineffectual attempt to follow me, but he never spoke.

Mr. *A. Wentzell.* 18 Nov. 1851.

3239. Did you make any inquiries about his treatment upon that occasion?—I was like others; I did not like to say much; I asked them to account for the bruises, which they did in the manner I have described to you; and when we got him home we found another cut; it was then bleeding, at the back of his head.

3240. Did you see his body after death?—No; I did not undress it; I saw him in his coffin; I saw that his knees were bruised. Before, he would not have a shirt on; afterwards, while he was lying in his bed after he came home, when he became sensible, he had the bed-clothes over him; he did not object to that at all. I saw that his knees were bruised; but that we could easily understand, a man in a weak state having those bruises.

3241. Did you understand that he had been suffering from diarrhœa?—No. I asked the keeper, who went home with us (Dr. Wood sent a keeper home with us to the house in a cab), if his habits were at all dirty, and he said, no, they were not. It was not Thomas, but a keeper who, I presume, had had some care of him.

3242. Is there anything further that you can tell us?—I think that is nearly the whole of the evidence I am able to give you.

[The Witness withdrew.

Thursday, 4 *December* 1851.

B. W. PROCTER, Esq., in the Chair.

William Beech, (of No. 8, James-street, Camberwell New-road,) sworn, and examined.

3243. The Board have been informed that you can give them some information relative to the treatment of patients at Bethlehem Hospital?—Yes.

W. Beech. 4 Dec. 1851.

3244. Will you state what you have seen there?—I went into the hospital about the 1st of last July; and after I entered I was there for about three weeks; that was all; and during the time that I was in there, the first thing, I was a keeper.

3245. You were there as a keeper?—Yes, I was a keeper there.

3246. In what ward did you commence your duties?—In the second ward; that is what is called the back basement that I was in; but it was the front basement that I was afterwards in. When I went in there I was told by Thomas and Widdicombe, and several more, whose names I cannot mention, never to strike a patient, but to take them into the basement and treat them as I liked; I was there so short a time. After I had been in there some time, they had

W. Beech.

4 Dec. 1851.

had got one of these capstans that they go round with sometimes, and walk round to keep out of mischief, so they said; and I kept these men such as I saw quiet.

3247. Whereabout is the capstan?—In the yard.

3248. Is it used for drawing water?—No. I came in one morning, and Widdicombe said to me, "You do not do your duty to keep them so;" and I said, "I try to do my duty." He said, "You shall do more than you have done; you will go into the back basement." I said to him, "When the doctor orders me to go there I will go; but," I said, "I shall not with your orders." I said, "I shall report it to the doctor."

3249. To whom do you refer?—Dr. Wood. So I reported it to the doctor, and he said to me, "Well, I should not have thought that he would have ill-used or have said anything to you." I was but a young servant there, and if I asked anything of him, he said, "I do not know." Whenever I asked him in point of duty, he either would not answer me at all, or say, "Find out." Then, the next morning the doctor said, "Are you good friends?" I said, "Yes, I am; I do not feel any animosity against any man." After this I saw that I could never get any answer from him or anything else; and after a while I was out in the yard over these men, and there was one of the patients kicked me as I walked round; and Thomas, the keeper, was standing at the gate, and he said, "Beech, why did you not bring him in and give it him? If he had kicked me in that manner I would have done so." I said, "I will bring him in."

3250. What was the name of the patient?—I cannot think of it at the moment. When I brought him in, Thomas unlocked the gate, and I went into the back basement, and Widdicombe was in the back basement, and he said, "Take him to the back basement;" and I took him in there and brought him out again; I just shook him and brought him out again, and he said, "If it had been me I would give it him; you do not half give him a damned good hiding." Thomas said this. I took him out, and as soon as I went in; it was near breakfast time, and they went in to breakfast, and Widdicombe said, "I shall report you." I said, "For what; for even shaking a man?" and I was only a young servant. "I have seen you two, both you and Widdicombe, kneel upon a man until he sang out 'Mercy.'" I accused them of that directly.

3251. What did you do to the patient?—I just shook him; that was all.

3252. How did you lay hold of him?—By the shoulder; and I said, "Will you ever do it again?" and the man said, "No." He was frightened, and he went out, and the other fellow (Thomas) said, "You do not half give them a damned good hiding; if it was me I would give it him."

3253. Can you remember the name of any patient whom you saw ill-treated?—I cannot recollect the names; there was one man that I remember, but I cannot recollect his name.

3254. What kind of patient was he?—He is out of the hospital now; he was a youngish man.

3255. Is there anything else that you have seen done to the patients?—One morning Berry brought a patient down from his ward.

3256. What ward was that?—I do not know; but they found him a little obstreperous, and he gave him a tremendous kick behind, and kicked him right out into the yard; and there was another patient in there who was not out of his mind; he had been, but he was quite well.

3257. What was his name?—I cannot recollect his name; I shall recollect his name, I think. He took and wrote a letter on the capstan, and gave it to this poor fellow that was kicked, because he cried, and Berry found it out, and he had got the letter, and came down while he was at dinner. B. was the name of the person that wrote the letter, and Berry said, "If ever I find you writing a letter again I will break your damned neck;" and the poor fellow said, "I did not write it;" but I know that he did.

3258. Had he got the letter?—Berry had the letter.

3259. From whom did he take it?—He took it from this party; I do not know his name.

3260. What was the effect of the letter?—It stated that he had kicked him behind, and it was addressed to Dr. Wood.

3261. Was that letter ever delivered to Dr. Wood?—Never.

3262. Did Dr. Wood ever know anything of that transaction?—I doubt not.

3263. Did you report it to anybody?—I did not.

3264. Why did you not report it to any one?—I was so young in the service that I did not know hardly the way that they were going on at all.

3265. What were you before you became a keeper?—I had been at work at oven-building.

3266. Who engaged you at Bethlehem?—Dr. Wood.

3267. Had you good certificates?—I had; I was in the Rifle Brigade for 12 years, and I bought my discharge.

3268. Why did you leave Bethlehem?—I could not make out why I did; I suppose for shaking this man I was discharged; I asked the doctor what was the occasion of it, and he said, "Widdicombe has given you a very good character," and he said, "I do not think you suit this place." I said, "Why? I have done my duty;" and he said, "There is no shaking allowed." I said, "When there are two men, and you are confidential friends, as you say, they will go with kindness towards the patients when they see you, but it is very different when your back is turned." Dr. Wood comes there only once a day, and they can do just what they think proper; I consider they have got all the rule there.

3269. Did you say that Widdicombe had advised you to shake this man?—I did; but they did not heed what I said.

3270. Who are "they"?—I think there was one of the Committee.

3271. What is his name?—I do not know; after that I went to the doctor and asked him about it.

3272. When Dr. Wood explained to you the cause of your going away, did you tell him that Widdicombe had suggested to you that you should shake the man?—Yes.

3273. You were afterwards brought before Dr. Wood and one of the governors?—Yes, I wished it.

3274. Was that the treasurer?—No; the treasurer was there, and another

W. Beech.

4 Dec. 1851.

another gentleman came in when the doctor was there; there were three of them.

3275. The governor, the treasurer, and Dr. Wood?—Yes.

3276. Did you then state to them what you have now stated to the Commissioners?—Yes.

3277. What did they say to you?—They said nothing; I said that I had not had a book of regulations neither. "Did you not give him a book?" one of the governors said; I said "No." "So," said he to Dr. Wood, "why did you not give him a book?" He said, "I stated it to him;" and I said, "He stated to me that I was to be kind and good-tempered with them," and something of that, and that I ought to have been a good-tempered man.

3278. During the whole time that you were there, you had no book of regulations, nor any written rules for your guidance?—No.

3279. Are there any written rules hung up anywhere?—No, not that I saw.

3280. After you had made that statement to them with reference to Thomas and Widdicombe, were Thomas and Widdicombe examined upon the subject?—Yes, and they denied all.

3281. In your presence?—Yes, they denied everything.

3282. Did you maintain in their presence what you had stated before they were called in?—I did.

3283. Upon your oath you state that you have seen Thomas and Widdicombe kneel upon patients?—Yes.

3284. And Berry kicked a patient once in your presence?--Yes, outside the door.

3285. And Widdicombe knelt upon a patient?—Yes; Widdicombe and Thomas both.

3286. Was it upon one occasion only that you saw them kneel upon a patient?—Only upon one occasion.

3287. Upon one occasion both of them kneeled upon the same patient?—Yes.

3288. What led to that?—I believe a patient made an attempt to strike Widdicombe.

3289. You made this statement to the treasurer and to a governor?—I did.

3290. And they examined into it?—Yes, they did; and they have got the paper.

3291. They came to a conclusion about the matter, namely, that they would not act in it?—They did not seem to care which way it was; they turned it away with disdain.

3292. They believed the statements of two persons rather than your statement?—Yes.

3293. They examined into it themselves?—Yes.

3294. Have you seen anything else done to patients besides these kneelings and kickings which you have mentioned?—No, I have not.

3295. It has been stated to the Commissioners that it is the practice in the asylum to put a stocking round the patient's throats when they are being dressed, to secure them; did you ever see a stocking or anything else put tight round a patient's throat?—I never did.

3296. How long were you in the basement altogether?—Only three weeks.

3297. How

W. Beech.

4 Dec. 1851.

3297. How often did Dr. Wood come into the wards?—Sometimes he came once a day.

3298. Were there any days upon which he did not come at all?—I never noticed that.

3299. Did he ever come more than once a day?—Yes, twice; he has been in the afternoon.

3300. Did he see every patient on these occasions?—I cannot say; he just went round the wards.

3301. Did he go into all the rooms?—I cannot answer that question.

3302. Whose duty was it to follow him, and to open the doors?—Widdicombe's, in general; he looks after that, if anybody comes in with friends.

3303. When Dr. Wood came into the wards, did he ask you and the other keepers to make any report to him with reference to the patients, or what did he do?—He used to walk round, and Widdicombe walked round with him. I never saw him do anything.

3304. Did he ever come into the ward after dark, or at night?—I never saw him.

3305. Did you often see him come twice?—No, very seldom.

3306. How long was he in the ward?—He just walked through.

3307. How long did that take him?—About five minutes.

3308. Are Thomas, Widdicombe, and Berry, as far as you know, still keepers in the hospital?—They are.

3309. Did Dr. Wood always come at the same hour?—Yes, as near as possible.

3310. You knew when to expect him?—Yes.

3311. Was any preparation made when he was expected to come?—They got everything as clean as possible.

3312. Besides Dr. Wood, did any other medical officer come into the wards?—Yes; there was a general officer, I believe; a general doctor; a stoutish man; I do not know his name, but a very stout man.

3313. Was it Dr. Monro?—Yes, I believe it was.

3314. How often did he come?—I have seen him, I think, during the time that I was there, four or five times in three weeks.

3315. Did he stay long in the wards?—I have not seen him in the wards. I saw him walk through the yard. I have been generally out in the yard.

3316. Did Dr. Monro, or the other doctor, come into the rooms, and examine the patients or the beds?—I cannot say. I never saw them do so.

3317. You were only at the asylum on probation?—I was put there for two months.

3318. Did you pass any considerable part of your time in the back basement?—No; when I went, the first morning or two, I did.

3319. Did you observe the beds in the back basement?—Yes.

3320. Of what did they consist?—When I first went there, the first morning I think, they were altered; they were going to make flock, but they had straw covered over them, and ticking.

3321. Do you mean that the straw was put into ticking?—No, it is not put into ticking at all; it is laid into a trough.

3322. And something laid upon the straw?—Yes, a covering; and then

W. Beech.
4 Dec. 1851.

then this tick, with a kind of thick blanket, a very thick one, so that nobody could tear it; which they give to patients if they tear their clothes.

3323. That was on the straw?—Yes.

3324. What was over the patient?—That was over the patient.

3325. What was between the patient and the straw?—A covering like a bed.

3326. A sheet?—Similar to a sheet.

3327. Were any of the patients ever made to sleep upon the straw itself, without anything over it?—I never saw it.

3328. In what condition were the patients with reference to clothing at night?—I saw them pretty comfortable.

3329. Who was the keeper in the back basement?—Thomas.

3330. Did you ever see the patients put to bed in the back basement?—I cannot say that I did.

3331. Or did you ever see them get up in the morning?—No; I had the other basement to attend to. I had to make their beds up.

3332. In your ward there were some patients who were placed to sleep on a sort of thick sheet covering loose straw?—There was none while I was there; the back basement I only occasionally saw.

3333. In your own ward the straw was put in a tick?—Yes.

3334. In every bed?—Yes, I never saw it any other way in ours; there was some on flock, I think.

3335. No loose straw?—No, not in our ward.

3336. At what time are the patients locked up at night?—I have seen them locked up at half-past seven and at eight.

3337. At what time were they let out in the morning?—About six o'clock; half-past five or six o'clock. I got up at half-past five generally. It was about six o'clock.

3338. Can you give any account of the way in which dirty patients were washed in the morning?—I have seen them just wipe their faces with a cloth; they hold them up, and wipe their faces.

3339. Supposing a patient had dirtied his bed, what would be done?—It was taken away.

3340. What was done to the patient?—He was washed; they took his shirt off; and he was wiped with a cloth or sponge.

3341. Had you any dirty patients in your ward?—No.

3342. Did you ever see a patient mopped?—No; I doubt that there were very few patients there, when I was in there, that was any way obstreperous or dirty. I did not know above two or three.

3343. Is there anything that you can communicate which it is desirable for the Commissioners to know, as to any particular fact, or as to the general practice which prevailed in the hospital, and which seemed to you objectionable?—I did not see anything, I think, myself; except that they took no notice of what I stated.

3344. Were the patients during the day ever left without a keeper at all, in any of the wards; in your ward, for instance?—Not that I know of, any further than this, that I was so much outside that they imposed rather upon me, being outside, so that I could not see what was going on at the back. They always used to tell me to stop in the basement.

[The Witness withdrew.

Mr. *David Kidd* (of Bethlehem Hospital), sworn; and examined.

Mr. *D. Kidd.*

4 Dec. 1851.

3345. WHAT situation do you hold at Bethlehem?—I am keeper in the criminal wing.

3346. How long have you been at Bethlehem?—Nearly 28 years.

3347. How long have you been in the criminal wing?—Mostly all the time, except only five weeks.

3348. Have your experience and observation been confined chiefly or entirely to the criminal wing?—Mostly; but in passing backwards and forwards, through the different wards, one gets a little knowledge; sometimes one gets acquainted with some of the patients.

3349. By whom were you appointed?—I was appointed by the late Sir Richard Carr Glyn's family.

3350. You are not under any notice to quit, or expecting to be discharged now?—No.

3351. Have you any statement to make to the Commissioners relative to the treatment of patients in the asylum?—We used to go on very well when Mr. Nicholls had the management, but now there seems to be no management at all. The medical treatment, from my experience, I think is very bad, and very negligent. The Commissioners are perfectly aware that the great thing in the treatment of lunatics is kindness, and to be properly attended with medical advice, and that has been very much neglected indeed since Dr. Wood came; latterly he has paid a little more attention, since things have had a little bit of a stir.

3352. Since what period?—It began to be a little better within the last 12 months, and a little better still since the Commissioners were round; and since complaints have been made they have been a little more attentive in serving out more comforts to the patients; that I can easily observe; but the inattention in giving the medicine was quite unpardonable.

3353. When you say, "inattention in giving the medicine," do you refer to medicine that Dr. Wood had ordered to be given to the patients, or medicines which the physicians had ordered for them?—That which the physicians had ordered for them.

3354. He did not attend to the physicians' orders?—No, frequently; and not even when he was asked to do it by the patients; he sometimes would not give it them, and sometimes they were sensible enough to know when they wanted a little medicine, and he paid no attention to them; but the great neglect was, when the physicians ordered the medicine, his not supplying it.

3355. In what case or cases did that happen?—It was the universal complaint throughout the whole house. I am aware that you have had Mr. Nicholls before you; he was the person, and perhaps the Commissioners did not ask him whether he had heard the servants complain to him that they could not get the medicine for their patients. It is not one solitary case; that is not all; when he has been called to poor dying creatures he has gone away, round the Park, and never thought any more about them. The governors have made that remark, and I have complained to some of the governors, as it was my duty to do, and

Mr. *D. Kidd.*
——
4 Dec. 1851.

and I have told several of the old governors; and I am sorry to say that there are very few old ones come now, except the treasurer, and he constitutes the committee.

3356. Have you ever complained to the treasurer?—No, it would be of no use; he is all in all with them; I complained to Mr. Laurie, I went on purpose to see Sir Peter Laurie, he is the president, and I saw Mr. Laurie, and I told him about his conduct; and I went from him to see Mr. Alderman Wilson; he was not at home, and I went to see his brother, Mr. Josiah Wilson.

3357. When was this?—About 12 months ago; he behaved like a gentleman, and I stated to him the cases.

3358. Did they not tell you that they would examine into the complaints you made?—He said that if he made any piece of work with me to send for him, and before that they had it in agitation to dismiss Dr. Wood for taking away the provisions; perhaps the Commissioners have not heard of that, for taking away provisions from the hospital. There were many investigations, and Mr. Josiah Wilson, the alderman's brother, was the principal prosecutor in the matter.

3359. What was the charge against Dr. Wood?—For taking provisions from the hospital when he went to the Isle of Wight.

3360. That was alleged to have been done by Dr. Wood?—Yes, and there is no doubt about it; Mr. Nicholls, being the steward, knew it.

3361. Should you have been a witness on that charge?—No, I could not, because I did not see it done.

3362. This is all hearsay, except the fact of the inquiry?—Yes; I heard what the storekeeper said about it, and likewise I knew about the inquiries before the governors, and I knew what Mr. Wilson said to me.

3363. Are there any cases, as to which you can speak, in which he neglected or refused to provide the medicines prescribed by the physicians?—I cannot say that I put any of them down; and I am sorry now that I did not, for they were so numerous.

3364. Is this the fact, that medicine was frequently prescribed and ordered by the physicians, and that Dr. Wood neglected to administer it?—That is correct.

3365. How do you know that the medicine was ordered by the physicians?—Because I have asked them, and they have asked me whether such and such patients had had it, or not.

3366. Which physician do you refer to?—Sir Alexander Morison, frequently.

3367. Sir Alexander Morison has frequently asked you whether such and such patients have had the medicine that he had ordered for them?—Yes.

3368. And your answer was, that they had not had it?—Yes; there was a case recently. He ordered some medicine for Mr. T., brother to ———, and he asked me frequently when he came, if he had had it, and I said, "No, Sir Alexander, he has not;" and he said, "Nothing will be a warning to him; it is too bad, when you order medicine, that it is not given." But it is not a solitary case, but many cases of that kind have taken place, he is so neglectful. It was only recently, within

within a few weeks, that Sir Alexander went and spoke to him about it, and then it came down.

3369. Do you know for what affection it was that the medicine was given?—He is in rather a low depressed state of mind, and fancies that he is worse than he is; it is more a depression of spirits than anything else, and I suppose it was something to cheer him up.

3370. Some cordial?—Yes; he is a harmless young man.

3371. What was Dr. Wood's practice with regard to visiting the wards in which you were?—I did not use to see him for days and days.

3372. Is that the case now?—No, he manages now generally to come round once a day, that is lately.

3373. For how many days have you known him not to come to the wards at all?—For three or four days frequently.

3374. In succession?—Yes.

3375. During those three or four days did the physicians come?—Sir Alexander always came on his days, and frequently more, but Dr. Monro very seldom, except when attending for Sir Alexander, came oftener than on his own days, and very seldom went up stairs; but Sir Alexander, though an old gentleman, mostly goes up stairs and sees his patients.

3376. When he sees his patients, does he see or examine other patients besides his own?—Sir Alexander sometimes does.

3377. Does Dr. Monro do so?—No; but when we call Sir Alexander's attention to any other patients that are ill, he will attend to them directly.

3378. When Dr. Wood failed to come through your wards for three or four days successively, was that at a time when he was ill, or when he had leave of absence?—No, it was when he was at home.

3379. And well?—Yes. When he has been laid up ill we could not expect him, and he has been very ill lately; he was away in the country for six weeks. When he was away he had a boy for about two years, of the name of Cheshire, who used to make up the medicine, and we could get it then by asking the boy for it, or when he had an assistant we could always go to him and get it, but when we had to depend upon himself we could not get it without great difficulty. I have known him to go out when he has been called to see patients, and I have known patients who were dying, and he has not come for hours. When he was wanted he was out of doors, and we have had to call in a medical man from the outside. Often that has been the case, and in the criminal wing at Bethlehem, I recollect them all calling out "shame." He had a man to feed with the stomach pump, and he ordered the man to be got ready, and he was kept there for between three and four hours, and he went away and forgot that the man had been kept there all the time. That of course did not come under my own knowledge, but still it is perfectly correct.

3380. When Dr. Wood came through the wards, was it his habit to stay long in the criminal wing?—No; when he used to come to the wing, perhaps he would just come to the bottom, not to come up stairs, and if he did come up stairs, it was not till recently; now he manages

Mr. *D. Kidd.*
——
4 Dec. 1851.

to come up to the top; he walked through and asked if there was anything wanted, and we tell him.

3381. Did he not examine the patients to ascertain whether they wanted anything?—No; he was too great a man for that. I have no doubt that if he was taken to the wing now, he could not tell you half the names of the patients who are there. The last 12 that went to Salisbury it was necessary that they should be pointed out to him before they went away that he might see who they were, and what they were.

3382. But he selected them to go, did he not?—No.

3383. Who did?—The physicians, they reported; he was in the country at the time, and Mr. Nicholls of course gave the names and the number, and then the physicians selected those who were to go. The Government pick out those who are to go.

3384. Have you known Dr. Wood come round the wards at night?—Never.

3385. Have you known Dr. Wood come into the criminal wards more than once a day?—With company I have occasionally, when he has had any friends, not otherwise; I have never known it. In severe weather I have known Mr. Nicholls, the steward, to come frequently round in the middle of the night, for I have got out of my bed to see who was coming, to inquire whether they were all warm enough and in blankets.

3386. Did you ever know Dr. Wood examine the bedding or the other comforts of the patients?—Never.

3387. Whose business is it to do that according to the present arrangement?—Dr. Wood has taken all the management into his own hands; Mr. Nicholls has only just to get the beds and bedding ready. I should say it is Dr. Wood's duty now.

3388. Mr. Nicholls has to provide the beds and bedding for the use of the asylum, and it is Dr. Wood's duty to see that they are properly applied?—I should say so.

3389. Has there been any change made in the regulations that were put before you with reference to the bedding and clothing, or as to any other matter?—Yes; that Mr. Nicholls is to find what is wanted and ordered, and I view him as store-keeper in that department.

3390. Have you ever made any public charge or complaint to the authorities in Bethlehem against Dr. Wood for neglect or for carelessness, or for improper conduct of any kind?—I did, as I have previously stated, to Mr. Laurie, but not publicly.

3391. You never went to the Board and said, "I have complaints to make; will you hear them"?—No, I thought it was their duty. Mr. Wilson said, "I shall support you in anything; I know you are perfectly right." I saw Mr. Alderman Wilson afterwards, and I went to the late treasurer, who was a man of business and a gentleman, that is, Mr. Price.

3392. Have you had any quarrel or collision, or misunderstanding with Dr. Wood yourself?—No; I never liked his conduct, in consequence of his negligence towards the patients.

3393. Has he ever threatened to report you, or has he made any statement against you?—Yes; he said that he would report me to the treasurer.

3394. On what alleged ground?—It was about one of the patients that set upon me; he was a very well-conducted man when he was well; when he got bad, I did what I could to soothe him, and then I put him into the basement, but not with any result; and when he began to get up again, then he was more violent; and one evening he began to kick, and he seized hold of me in a very tender part, and I laid hold of him, and then he made a complaint to Dr. Wood. When I told him the circumstances, he said, "I think you had better resign." I said, "I am much obliged to you, but I must speak to some of the governors about that."

3395. What reason did he give for recommending you to resign?—He called it ill-treatment, and I said that I would do the same thing again, and that I would not stand to lose my life.

3396. He accused you of using too much violence to the man?—Yes, and I made him examine him, but there was no bruise upon him, but that man had several battles afterwards with the other keepers and with the patients. He never had a good mind towards me, and I thought that it was best to go to these governors, and I went to the late treasurer, and he said that I had done very right.

3397. Who was the late treasurer?—Mr. Price, brother to the late Sir Charles Price; and then I went to Mr. Anderton of the Common Council, and Mr. Alderman Wilson came to the hospital, and he said, "You never mind him; I will take care that you shall have full pay if you wish to resign; let me know at any time."

3398. Have you any other particular fact which you think it desirable to communicate to the Commissioners in reference to the general management of the hospital, or the misconduct of any particular person in it?—I think those are the principal points; the neglect as to the medicine, and the not coming when he was called to men dying; being frequently out of the way, or when he was in the way, being a long time in coming; and when he did come, I remember one man, poor thing, just at the point of death, and he ordered him a clyster, and I thought that a curious thing for a dying man, but he being a medical man, of course he must be the best judge. There was a case happened the other day, and there have been one or two sudden deaths within these few days; and in the case of one man, he did not wish to have him opened, and Mr. Nicholls said that he should have him opened the same as the others, and he had him opened, and they found an injury in that man.

3399. What was the name of the man?—James H.

3400. As to whose death there has been an inquest?—No, there was no inquest, but there ought to have been.

3401. His body was opened?—Yes, by Mr. Lawrence's assistant, Mr. Kreutz, and he found an injury somewhere, but how caused I cannot say.

3402. What injury was it?—That I cannot presume to say.

3403. Was Dr. Wood present at the examination of the body? Yes; I have no doubt he was.

3404. How do you know that there was any injury?—From those that were present.

Mr. *D. Kidd.*

4 Dec. 1851.

3405. You were not present yourself?—No.

3406. Who stated to you that any injury was discovered?—The clerk in the hospital, and I dare say he had good reasons for it; Mr. Huggins is his name; he is Mr. Nicholls's clerk.

3407. He was present?—I rather think that Mr. Nicholls was present, as he wished to have the man opened.

3408. Mr. Huggins, Mr. Nicholls's clerk, told you that some injury was discovered?—Yes, by Mr. Kreutz, who was the medical man; and if it is entered properly,—and they do enter all these things, the results of *post mortem* examinations, in a book,—it will appear.

3409. It is the practice to have a *post mortem* examination of every body that dies in the hospital, but in this case Dr. Wood thought there ought not to be one?—Yes, Mr. Huggins told me so.

3410. He did not tell you the nature of the injury?—I think he did, but I cannot say.

3411. Did he tell you that the injury was supposed to have been the cause of death?—Yes, he did.

3412. Was any statement made to the effect that the injury had been inflicted by any other person?—I could not exactly say that; but it was an injury certainly by violence of one kind or another.

3413. This was not a person in your department?—No.

3414. Was it ever proposed that there should be an inquest in that case?—I cannot say.

3415. Was that death quite sudden?—Yes, quite sudden.

3416. Was he found dead in his bed?—I rather think he was, or he dropped down; I do not know which.

3417. How shortly before his death had you seen him?—I do not remember seeing him at all.

3418. Have you seen the body since?—No, I have not.

3419. When was the body removed from the hospital?—That I cannot say, but it was last Monday, I believe; I think he died last Monday.

3420. Was the body removed by the friends?—Yes, it was.

3421. What rules or orders have you for your guidance relative to your duties?—We have had printed rules of late; we did not use to get them.

3422. When did you first get them?—Only within a few months.

3423. In what month; was it in May or in June?—I think it was about six months ago.

3424. How many patients are there in the criminal wards?—We have 82 at present.

3425. How many keepers are there?—There are six for the whole criminal wing; three below, and then I am in the next ward by myself; then in the next ward again there is one, and in the top ward there is one; and then there is a sort of mechanic, who comes occasionally. One is obliged to go and bring the provisions; we are all obliged by the new regulations to bring the bread and milk for breakfast; then one of the others goes and brings down the dinner; that is according to the new regulations; and then we cut it up.

3426. Do you ever go into the back basement ward, where the male patients are?—Yes, occasionally; especially when it is my turn to be

up

up in the morning; we all take our turns to go round the house to watch.

3427. Then you go through the wards?—Yes, every ward there.

3428. Do you open the doors of the cells?—Yes, if they are making a noise, to quiet them; if they are quiet, we do not.

3429. In what state is the bedding?—It is better than it was; it was formerly only straw.

3430. How long ago was that?—About 12 months back.

3431. Are there not some of the beds now which consist of loose straw, with a sheet or something placed over it?—Not to my knowledge; the straw they use now is put into a bed-tick.

3432. Do any of the patients sleep naked, without night shirts?—I have known them tear their shirts off.

3433. But are they put to bed naked?—I never saw it done; in the wing where I am, we always use the criminals kindly.

3434. But in the back basement, have you seen that?—I have not seen them put to bed, but I have seen them naked when they have torn their things off.

3435. What is the general practice with regard to the management of a man who is very unruly?—Our former practice, when they were very unruly, was to put some restraint upon them.

3436. What kind of restraint; how did you proceed?—We used to put them into a room for a little while.

3437. Did you ever hear of their using a stocking round the neck?—I have heard of their doing it, but I have not seen it done.

3438. Have you had any communication with Mr. H—— as to evidence that you were to give to the Commissioners to-day?—None whatever.

3439. Do you know him?—Yes, I once saw him for about a minute; but if I was to meet him now I could not tell him; I heard about his case.

3440. What was the nature of the medical treatment before Dr. Wood came, and who was at the head of the medical department?—Mr. Thomas, and he was a very good little creature; we were never at any loss for medicine then; he was there about 14 years, and then he got rather afflicted.

[The Witness withdrew.

Examination of Miss *A. M.*

30 July 1851.

Miss *A. M.*

30 July 1851.

Miss A. M. stated that she could not remember how long she was in the receiving ward; remembered the basement, and her first impression was a feeling of cold. (She continued,) "I had always insufficient bedding, and sometimes none at all, only the straw, and I had to get under the straw to try and get warm, and cover myself; sometimes I had a sort of oilskin or rubber cover. I had no night clothing whatever; I begged hard to be allowed to keep my flannel waistcoat, as I had always been used to it, but the nurse said it was against the rules, and took it away during the night; I slept quite naked. I always suffered from cold whilst in the basement, both night and day; in the morning, the nurses used to open the door of the cell and call out, 'M. get up.' Sometimes I was very ill, and so stiff with cold, that I could hardly rise; I could not dress myself, and the nurse and another patient used to dress me, but always very roughly. I was covered with sores; I thought the bones would come through my skin. When I crept under the straw to try and get warm, I came upon the bottom of the bed, which I think was stone; I think that caused the sores on my hips. The bathing and washing was very coarse; I was taken to a sink and washed with a wet towel that had been used for a great many other patients, with cold water; the nurses were all very coarse and rude; they nicknamed the patients, and used to call me Black Sall. On one occasion, I would not eat, and I was thrown on the ground, and the food forced down my throat by two nurses; if ever I complained, the nurses told me to hold my tongue, for I was a pauper like the rest, and the treatment was good enough for me. I was too ill to complain to Dr. Wood or Mrs. Hunter, and I saw them very little. They used to come round, but they only looked at us generally. Dr. Wood hardly ever spoke to me; I hardly think he knew I was present sometimes; he never looked at my tongue, or felt my pulse, or examined me medically; he only took the report of the nurses.*"

Examination of Miss *F. M.*

30 July 1851.

Miss *F. M.*

Miss F. M. sworn. "My elder sister was a patient in Bethlehem Hospital. She was admitted on the 6th of October 1850; at that time she was in weak bodily health, and for 10 days previously she had refused her food; I examined her person; she had a bruise on her arm from a fall, but no other marks or injuries. I took my sister to the hospital; it was on a Sunday; I did not see the ward into

*"As this witness is still in a nervous and exciteable state, she was not sworn in the first instance; ultimately, however, she expressed her willingness to swear to the truth of what she had stated, and she was sworn accordingly; she however declined having her evidence read over to her. She expressed very great anxiety that her case should not be made public."

Miss *F. M.*
30 July 1851.

into which she was placed, but I understood that it was the ground-floor, not the basement; two nurses took charge of her. I never saw the matron the whole time my sister was at Bethlehem. I next saw my sister on the following Friday, the committee day; I met her on the landing of the staircase; she had a black eye, but she did not accuse any person of having caused it. I only had a few words with her. She had been before the committee, and I went before them afterwards. Nothing particular occurred. I next saw her on the 4th of November, when I learnt that my sister had been removed to the basement, as her habits were dirty; she was brought to me in the visitors' room. She then complained to me of excessive cold, and when I asked her as to what sort of bed she had, she exclaimed, 'Oh, none at all, I sometimes have a covering, and sometimes I have none.' She said the cover was a kind of India-rubber cover, but that she had neither blankets nor sheets, and only loose straw to lie on; she said also that once when she was dirty in the middle of the night two nurses came to her and took her out of her cell, and gave her a cold shower bath; and that they then pushed her back into her cell without wiping or drying her at all. She also said that she had on one occasion been obliged to get up and wash her own linen which she had dirtied. She complained that the nurses were very rough and rude, and abused her, and said she was a dirty beast, and they called her Black Sall. One of the nurses once said she would kick her out of bed if she did not get up, and used other very coarse language, which I really do not like to repeat. After that, I again saw my sister, on either the 3d or 4th of December. It was the regular visiting day; the first Tuesday in the month; friends are only permitted to see patients on the regular visiting days. She then appeared to be in a most feeble and emaciated state, and she appeared altogether worse in every way. She complained of her bowels; she again complained of the cold in the cell, and the want of covering. After that I was at the hospital, and saw one of the nurses; I cannot recollect her name, but I should know her again. When I told her that my sister complained of cold, she (the nurse) said, 'Oh, she is such a dirty patient, that we are obliged to pin her in her night shift.' I then said, 'Then she lies on the straw, naked;' and the nurse said, 'Yes, she does.' It was in consequence of my sister's complaints of treatment, added to her personal appearance, and the fact of her being placed in the basement floor, that decided me to remove her. I accordingly removed her on the 27th of December, intending to take her to Northampton; but she was so ill that I took her to a lodging near Bethlehem. I then examined her person; I found that her back was a complete mass of sores, with two large sores, about the size of a crown piece, one on each hip; they were deep sores, and she will carry the marks of them to her grave; I saw no bruises. She was very much emaciated, much more than at the time of her admission to Bethlehem, and her legs were very much swollen; she had, besides, other physical diseases, and very much disordered in her bowels. On the following day, I took my sister down to Northampton; previously, she was examined by two medical men, who signed her certificates. My sister was admitted to the Northampton Asylum the same day. I then resided at Northampton, and saw my sister very frequently; in the course of a fortnight she

Miss *F. M.*
30 July 1851.

she was greatly improved in health, and her habits of cleanliness returned; her mind was also greatly improved. I am of opinion that my sister, during the whole period of her confinement in Bethlehem was capable of giving a true account of the treatment she received, because in all matters which I had an opportunity of testing, I found her statements to be correct; I fully believe all she has told me. On second thoughts, I now remember that I did once see the matron; I had taken a warm polka jacket to the hospital for my sister's use, as she so frequently complained of cold, but the matron said that she could not be allowed to wear it, as it was too smart.

(signed) "*F. M*——."

Re Bethlehem Hospital.

CORRESPONDENCE with the Home Office.

Letters, &c.

Office of Commissioners in Lunacy,
19, New-street, Spring Gardens,
31 May 1851.

Sir,

By direction of the Commissioners in Lunacy I herewith transmit to you, for presentation to Secretary Sir George Grey, a letter signed by the chairman, on behalf of this Board, and the enclosed copy statement and form of order, submitted for Sir George Grey's approval and signature, authorising the Commissioners, or any two or more of them, to visit and examine the Royal Hospital of Bethlehem, and the several persons confined therein.

I am, &c.
(signed) *R. W. S. Lutwidge,*
Secretary.

H. Waddington, Esq., &c. &c.
Home Office.

Office of Commissioners in Lunacy,
19, New-street, Spring Gardens,
30 May 1851.

Sir,

The Commissioners in Lunacy have, for some time past, had under their consideration the question of the propriety of their applying for an order, pursuant to the 116th section of the Act 8 & 9 Vict. c. 100, authorising them, or two or more of their number, to visit and examine the Royal Hospital of Bethlehem, and the several persons confined therein. Communications, more or less direct, have been made to them, from time to time, relative to the system of management and treatment of the patients, of a nature which have appeared to this Board to call for official inquiry, with a view to the remedy of defects and the introduction of improvements.

The

Letters, &c.

The notice of the Commissioners has recently been more specifically directed to the subject by a case of alleged neglect and cruel treatment in Bethlehem Hospital of a female patient, thence removed to and now an inmate of the Northampton Lunatic Hospital, the particulars of which are set forth in certain statements and correspondence, copies of which are appended hereto, and to which your attention is especially requested. The name of the lady referred to is imparted in confidence.

With reference to that case and the previous communications to which I have adverted, this Board, after mature consideration, have adopted the following resolution: viz.,

"*Resolved*, That it is desirable that the Royal Hospital of Bethlehem, and the persons confined as lunatics therein, should be officially visited and examined by the Commissioners in Lunacy; and that, with that view, Lord Ashley, as chairman, be requested to apply by letter to Her Majesty's Principal Secretary of State for the Home Department for the necessary order, in writing, under the 116th section of the Act 8 & 9 Vict. c. 100, and at the same time communicate the reasons which, in the opinion of this Board, render such a proceeding advisable."

In accordance with the latter part of the above resolution I have the honour to submit the following observations:

By the Act 8 & 9 Vict. c. 100, as you are aware, all county and borough asylums, lunatic hospitals, supported wholly or in part by voluntary contributions, and licensed houses, are subject to the periodical visitation and inspection of the Commissioners in Lunacy. The only institutions for the insane, or in which any insane persons reside, as gaols and workhouses, not ordinarily subject to such visitation and inspection, are the Royal Naval and Military Lunatic Hospitals (at Haslar and Great Yarmouth respectively) and the Royal Hospital of Bethlehem. As respects the first two they are deemed not to be hospitals, within the meaning of the Act, as defined by the Interpretation Clause. Nevertheless, the official heads of the departments under which they are respectively placed, viz. the Secretary at War and the Board of Admiralty, have considered it desirable, and have requested that the Commissioners in Lunacy should visit and inspect these establishments, in the same manner as other public institutions for the insane, and they have accordingly been so visited and inspected by the Commissioners annually since the passing of the Act.

Such

Such is the state of the law, and the practice generally with reference to the visitation of institutions for the care and treatment of lunatics and other persons of unsound mind. The single exception is the Royal Hospital of Bethlehem, which is by the 116th section specially and by name exempted from the ordinary operation of the statute, and is not subject to any official visitation, unless under the authority of the Lord Chancellor or one of Her Majesty's principal Secretaries of State. The Commissioners have no reason to believe that the Governors of Bethlehem Hospital entertain any objection to the establishment being visited and inspected by them. The Commissioners feel, however, that whatever permission or facilities might, in courtesy, be afforded them for that purpose by individual Governors, they could not satisfactorily or usefully discharge their duty as visitors without the authority and responsibility which would be conferred by an order under the Act.

In now applying for such authority the Commissioners desire to submit the following as the reasons by which, on general gronnds, they are mainly influenced. These are two :

1st. It seems highly desirable that *all* establishments for the reception of lunatics in England and Wales, *without any exception*, should be periodically or occasionally brought under the observation of the Commissioners in Lunacy, with a view to render their acquaintance with the condition and treatment of the insane throughout the kingdom comprehensive and complete.

2dly. That if abuses or defects exist in the present arrangements and management of Bethlehem Hospital, or if, as has been suggested, the plan of treatment, with reference to the amount of mechanical restraint, or otherwise, be injudicious, the Governors and medical officers of the hospital may in their endeavours towards its improvement receive whatever assistance can be derived from the official experience and extended means of observation possessed by the Commissioners in Lunacy.

In anticipation of your compliance with this application, I enclose for your signature a form of order adapted to the subject.

I am, &c.

(signed) *Ashley*,
Chairman.

The Right Hon.
Sir G. Grey, Bart., M. P.,
&c. &c. &c., Home Office.

Copy

Letters, &c.

Copy STATEMENTS and CORRESPONDENCE above referred to.

MY sister, A. M., was admitted into Bedlam on Sunday, October 6th, when the nurses seemed very much vexed that she should go in on a Sunday; but when I said the case was urgent, for she had tasted nothing for a fortnight, and that it was Dr. Monro's wishes, they made no further remark.

On the following Friday I was examined by the committee, and on the landing I met my sister, with a very black eye; but I could not ascertain the cause of it. I then saw her no more till the next visiting day, November 4th, when my brother accompanied me to Bedlam, and on inquiring for her, when I was told she was placed. The nurse told me she was such a dirty patient that she was obliged to be sent to the basement floor. She was in very low spirits, and complained bitterly of the cold, and she shook from head to foot. On my inquiring what kind of a bed she had, she said, "Oh, none; I lay on straw, with an India-rubber cover; and one night when I had offended the nurse she took it away, and I passed a dreadful night, without a bit of covering. Another night she gave me a shower bath; and one night when I had dirtied myself, she made me get up, and, ill as I was, stand at the wash-tub and wash my shift. The nurses gave me the name of Black Sall, and called me on every occasion a dirty devil." On a subsequent occasion she told me that one morning when she was very ill she said she could not get up, and the nurse said, "If you do'nt I'll come and kick your a—— out of bed." On the 2d of December I saw her again, when I found her in a still weaker state, and her legs dreadfully swollen. After many conversations, which it is unnecessary to detail, I resolved to remove her, which I did on Friday, December 27th. The men about and nurses seemed very much vexed with me for taking her out, but they seemed to rejoice that I should find her "*an awkward customer*."

I had made my arrangements for going forward that night to Northampton, but I found her so dreadfully thin and emaciated, that I was fearful she would die on the journey.

I returned to the lodgings I had left, scarcely knowing what plan to pursue, for her bowels were constantly in action, she had no power over herself, and she had a prolapsus, which caused her agonizing pain. I dressed her myself the following morning, and I never saw a poor creature in such a state. There was a large sore on each hip, her back was half way up raw with the marks of hundreds of pricks, caused, I suppose, by the straw.

In this condition, on the 28th December, I took her to Northampton to the asylum.

Dr. Nesbitt at once allowed her to keep her bed for a fortnight. She was constantly having her linen changed, and she was incessantly washed, and in less than a fortnight there was an evident improvement in her health; her habits of cleanliness returned, and her mind was less disturbed; she has been gradually regaining her health and faculties, and she can now walk five miles a day with comfort to herself.

She

She has always been quite competent to give an account of everything that occurred in Bedlam, and if there is any further information which I can give, I will most willingly do so.

signed) *F. M.*

Northampton, 30 April 1851.

Office of Commissioners in Lunacy,
9 May 1851.

Dear Sir,

You will oblige the Commissioners in Lunacy by favouring them with a statement of the present condition, mental and bodily, of Miss A. M., with any particulars which you may deem material relative to her state upon admission, and subsequent progress.

(signed) *R. W. S. Lutwidge,*
Secretary.

To Dr. Nesbitt,
Northampton Hospital.

Hospital for the Insane, Northampton,
11 May.

Dear Sir,

Miss A. M.'s mental state is that of rationality, propriety, and decorum, and her bodily health is completely re-established. Her continuance here is now more a matter of prudence and convenience than of necessity, but she will certainly leave us next month.

Her state upon admission was most deplorable. With an attenuated frame, her system was so enfeebled, that she was unable to sit up. She had prolapsus of the uterus and anus, with great mucus discharges, and suffered severely from tenesmus. Her lower extremities were livid and œdematous, and their motion paralysed. On the hips and nates were a great many abrasions of the surface, varying in size from a millett seed to a split pea; she had also on different parts of her body copper-coloured eruptions. She was quite unconscious of the calls of nature, and her urine and fæces passed under her.

The treatment pursued was, in the first place, to give her a comfortable bed, and to attend to her infirmities by frequent change of linen. Morphia, the hydriodate of potass, and the local application of oak bark decoction, with generous diet, enabled her to get up in the course of three weeks, and from that time to this her course has been one of progressive improvement. She was always quiet, patient, and grateful for attention, and after one month's residence, all her faulty habits entirely left her. Her mental state was chiefly characterized by delusions of a religious nature; she thought she was a lost and wretched woman, and that she should never die.

Thus limiting myself strictly to the scope of your inquiries,

I am, &c.
(signed) *P. R. Nesbitt.*

R. W. S. Lutwidge, Esq.

Office

Letters, &c.

Office of Commissioners in Lunacy,
13 May 1851.

Dear Sir,

The Commissioners in Lunacy desire me to thank you for the information which you have furnished in answer to their inquiry respecting Miss A. M. You will further oblige them by stating to what cause, in your judgment, were the abrasions and sores, to which you refer, attributable. I am to request the favour of a reply by return of post.

(signed) *R. W. S. Lutwidge,*
Secretary.

To Dr. Nesbitt,
Northampton Asylum.

Hospital for the Insane, Northampton,
14 May 1851.

Dear Sir,

As the Commissioners have asked for my opinion of the cause of the abrasions and sores on the body of Miss Ann Morley, I have no longer any hesitation in stating that such appearances were referable to neglect.

The patient has uniformly complained of the treatment to which she was subjected in Bethlehem Hospital; that she had nothing but straw to lie upon, and that there was no attempt to interpose any kind of protection between her body and this straw; that it hurt her much, and that she had no clothes even to cover her. She described her whole treatment to have been "harsh and coarse," and the recollection of it to inspire her with horror; that the nurses were in the habit of giving her nick-names, derived either from the colour of her skin, or from her habits, and that they treated her like a brute.

As the patient is remarkable for truthfulness, and more desirous of burying in oblivion that part of her life spent in Bethlehem, I cannot arrive at any other conclusion than that the abrasions were referable to this straw, which, in both its wet and dry state, would produce an irritation of the surface exactly calculated to lead to a solution of continuity in a bed-ridden patient, and in connexion with her want of cleanliness.

During the time she has been under my care she has never evinced any picking propensities.

I am, &c.
(signed) *P. R. Nesbitt.*

R. W. S. Lutwidge, Esq.

Whitehall,
5 June 1851.

My Lords and Gentlemen,

I am directed by Secretary Sir George Grey to acknowledge the receipt of your letter of the 30th ultimo, enclosing for his approval and signature an order authorising you, or any two or more of you, to visit and examine the Royal Hospital of Bethlehem, and the several persons confined therein; and I am to request that you will inform Sir George

George Grey whether you are of opinion that the order, if made, would authorise a permanent or periodical inspection of Bethlehem Hospital. It appears to Sir George Grey that such an inspection is contemplated by you, but he is of opinion that the object of Parliament, in the 116th clause of the 8 & 9 Vict. c. 100, was only to sanction a visitation on some special occasion founded on particular circumstances, the Secretary of State being first satisfied of its necessity.

I have, &c.
(signed) *E. P. Bouverie.*

The Commissioners in Lunacy.

Office of Commissioners in Lunacy, &c.,
7 June 1851.

Sir,

In reply to your letter of the 5th instant, I am directed by the Commissioners in Lunacy to state, for the information of Secretary Sir George Grey, that in applying for an order authorising two or more of their number to visit Bethlehem Hospital, they did not contemplate a permanent or periodical inspection, but only one special visit, for the reasons and under the circumstances set forth in the letter from the Chairman of this Board of the 30th ultimo.

The form of order adopted was prepared in conformity with those made from time to time by the Lord Chancellor for the visitation of unlicensed houses and insane persons, under the provisions of the 112th & 113th sections of the Act 8 & 9 Vict. c. 100, in which the authority has not been expressly, but only by implication, limited to a single visit. In such sense the orders made have always been understood and acted upon.

I am to add a request that Sir George Grey will, if he deem it necessary, in the event of his granting the order applied for, be pleased to introduce into the order such words as may appear to him desirable for limiting it to a single visit.

I am, &c.
(signed) *R. W. S. Lutwidge,*
Secretary.

Hon. E. P. Bouverie, M.P.,
&c. &c. &c.
Home Office.

Whitehall,

Letters, &c.

Whitehall, 13 June 1851.

My Lords and Gentlemen,

I HAVE laid before Secretary Sir George Grey Mr. Lutwidge's letter of the 7th inst., relative to your application for an order authorising you to visit Bethlehem Hospital, and I am to acquaint you that the form of the order appears to be perfectly correct; but Sir George Grey was led to apprehend that you contemplated a periodical or occasional inspection, rather than a single special visit under the authority such an order would confer, by the opinion expressed by you in your letter of the 30th May, as the first ground for applying for such an authority, that it was "highly desirable that all establishments for the reception of lunatics in England and Wales, without any exception, should be periodically or occasionally brought under the observation of the Commissioners in Lunacy," for the purpose therein mentioned. As it is now distinctly stated that you contemplate only one special visit, founded on the circumstances which have come to your knowledge in the case of the female patient referred to in your letter of the 30th May, Sir George Grey has signed the order, which is returned herewith. But he thinks it will be right that you should transmit to the Governors of Bethlehem Hospital a copy of the statement and correspondence relating to the patient in question, that they may be aware of the allegations therein contained, and may have the opportunity of offering any explanations with regard to them.

(signed) *H. Waddington.*

The Commissioners in Lunacy.

[COPY ORDER.]

8 & 9 Victoria, cap. 100, sec. 116.

BY virtue of the power and authority conferred upon me, as one of Her Majesty's principal Secretaries of State, by an Act passed in the ninth year of Her present Majesty, intituled, "An Act for the regulation of the Care and Treatment of Lunatics," I hereby order and direct that the Commissioners in Lunacy, or any two or more of them, visit and examine the Royal Hospital of Bethlehem, and every or any building adjacent thereto, and every or any person confined therein. Given under my hand, this 13th day of June, in the year of our Lord, 1851.

(signed) *G. Grey.*

Office of Commissioners in Lunacy,
10 February 1852.

Sir,

I AM directed by the Commissioners in Lunacy to transmit to you, for presentation to Secretary Sir George Grey, the accompanying Report and Evidence relative to the condition and management of Bethlehem Hospital.

(signed) *R. W. S. Lutwidge,*
Secretary.

To H. Waddington, Esq.,
&c. &c. &c.

Whitehall,
21 February 1852.

My Lords and Gentlemen,

I HAVE laid before Secretary Sir George Grey your letter of the 10th instant, and the accompanying Report and Evidence relative to the condition and management of Bethlehem Hospital; and I am to inform you that Sir George Grey has transmitted the Report to the Governors of the Hospital, for their consideration.

(signed) *H. Waddington.*

The Commissioners in Lunacy.

Office of Commissioners in Lunacy,
25 March 1852.

Sir,

THE Commissioners in Lunacy have very recently learned that the short-hand writer's notes of evidence, on which their Report on Bethlehem Hospital is founded, has, with the Report, been sent from the Home Office to the Committee of Governors of Bethlehem Hospital, and they have further been informed, much to their surprise and regret, that these notes are now in the course of being printed under the direction of the Committee.

In these circumstances, the Commissioners are most anxious that the Secretary of State should be immediately made aware that the Commissioners have not in their possession any copy of that evidence, and also that there exist very grave objections to the publication, or even the printing of the evidence in its present shape; not only because, from its never having been corrected, it contains many clerical and verbal errors, which would render it, as it stands,

Letters, &c.

unintelligible in various places, but also because there occur in it at full length the names of various persons formerly patients at Bethlehem, who gave their evidence confidentially, and only on the positive assurance from the Board that their names should not be divulged. Upon these grounds the Commissioners trust that the Secretary of State will, without delay, interpose his authority with the Governors of Bethlehem to prevent them from proceeding with the printing of the short-hand notes of the evidence in their present state, and also to recover possession of the original notes themselves, and return them to this office.

(signed) *R. W. S. Lutwidge,*

H. Waddington, Esq., &c. &c. Secretary.

Office of Commissioners in Lunacy,
6 April 1852.

Sir,

With reference to my letter of the 25th ultimo, I am directed by this Board to request that the copy of the short-hand writer's notes of evidence, which accompanied the Report upon Bethlehem Hospital may be returned to this office, in order that the same may undergo the necessary revision and correction, and the names of patients, or their families or friends, may be struck out, preliminary to any publicity being given thereto.

The Commissioners in Lunacy have been given to understand that a copy of the evidence, as printed by order of the Committee of Governors for their use, has been sent to the Home Office; it might be convenient that the Commissioners should see the same.

(signed) *R. W. S. Lutwidge,*

H. Waddington, Esq. &c. &c. Secretary.

Whitehall, 8 April 1852.

My Lords and Gentlemen,

I have laid Mr. Lutwidge's letter of the 6th instant before Mr. Secretary Walpole, and I am to transmit herewith, agreeably to your request, a copy of the evidence annexed

annexed to your Report on Bethlehem Hospital, as printed by the Committee of Governors of that institution for their own use. They were informed on the 2d instant that it would have been more regular for them to have obtained the permission of the Secretary of State before printing the evidence, but that, as it had taken place, Mr. Walpole would not object to its being transmitted, in the strictest confidence, to the members of the Committee. They were at the same time desired to return the manuscript evidence to this office, and a further application for its immediate return has this day been made. As soon as it is received here it shall be forwarded to you.

(signed) *W. J. H. Jolliffe.*

The Commissioners in Lunacy,
&c. &c. &c.

Whitehall, 16 April 1852.

My Lords and Gentlemen,

I AM directed by Mr. Secretary Walpole to return herewith, agreeably to your request, the manuscript notes of evidence which accompanied your Report on Bethlehem Hospital.

I have, &c.

(signed) *W. J. H. Jolliffe.*

The Commissioners in Lunacy.

Office of Commissioners in Lunacy,
17 April 1852.

Sir,

I AM directed by the Commissioners in Lunacy to acknowledge, with thanks, the receipt of the manuscript notes of evidence which accompanied their Report upon Bethlehem Hospital.

I am, &c.

(signed) *R. W. S. Lutwidge,*
Secretary.

Sir W. J. H. Jolliffe, Bart., M. P.

Letters, &c.

Office of Commissioners in Lunacy,
Sir, 26 May 1852.

I AM directed by the Commissioners in Lunacy to forward, for the information of Mr. Secretary Walpole, the accompanying copies of the notes of the examinations, taken upon oath, of Miss A. M. and her sister Miss F. M., relative to the treatment of the former as a patient in Bethlehem Hospital. These ladies were examined, not before the Board in London, but, under the direction of the Board, at Chepstow, by two of the Commissioners on circuit.

These examinations, which are mentioned in the Report as a portion of the evidence upon which it is founded, ought to have accompanied the Report in the first instance, and should now be considered as part of it.

They were omitted to be sent by a mere oversight, an omission of less importance, however, as the substance of the evidence they contain was given in the body of the Report.

I am, &c.
(signed) *R. W. S. Lutwidge,*
Secretary.

H. Waddington, Esq.
&c. &c. &c.
Home Office.

Whitehall, 17 June 1852.

My Lords and Gentlemen,

I AM directed by Mr. Secretary Walpole to inform you that the Committee of Governors of Bridewell and Bethlehem Hospitals have intimated to him their intention of transmitting to him the result of their consideration of your Report on Bethlehem Hospital with as little delay as possible.

I have, &c.
(signed) *H. Waddington.*

The Commissioners in Lunacy.

Office of Commissioners in Lunacy,
Sir, 30 June 1852.

I AM directed by the Commissioners in Lunacy, with reference to the address voted on Mr. Anstey's motion for the production of a copy of the Report and Evidence upon Bethlehem

Bethlehem Hospital, to request that they may be informed when it is desired that those documents, which have been revised and corrected for the purpose, should be forwarded to the Home Office, or the Journal Office of the House of Commons. The Commissioners take leave again to submit to Mr. Secretary Walpole that they consider the earliest publication of the Report and Evidence most desirable. They would further suggest that the Report and Evidence would be most conveniently printed in the octavo form, similarly to the Annual Reports of the Commissioners to the Lord Chancellor.

I am, &c.
(signed) *R. W. S. Lutwidge.*

H. Waddington, Esq.

Whitehall, 3 July 1852.

My Lords and Gentlemen,

I HAVE laid Mr. Lutwidge's letter of the 30th ult. before Mr. Secretary Walpole, and I am to inform you that Mr. Walpole thinks the revised copy of the Report and Evidence on Bethlehem Hospital had better be forwarded to the Home Office, and as soon as the Governors' observations in reply are received, the two together can be presented to Parliament.

I have, &c.
(signed) *H. Waddington.*

The Commissioners in Lunacy.

Office of Commissioners in Lunacy,
Sir, 9 July 1852.

WITH reference to your letter of the 3d instant, and in compliance with the desire of Mr. Secretary Walpole therein expressed, by direction of the Commissioners in Lunacy, I herewith transmit to the Home Office the revised copy of the Report and Evidence on Bethlehem Hospital.

I am, &c.
(signed) *R. W. S. Lutwidge.*

H. Waddington, Esq., &c. &c.
Home Office.

Letters, &c.

Whitehall, 12 July 1852.

My Lords and Gentlemen,

I AM directed by Mr. Secretary Walpole to acknowledge the receipt of the revised copy of the Report and Evidence on Bethlehem Hospital which accompanied Mr. Lutwidge's letter of the 9th instant.

I have, &c.
(signed) *W. J. H. Jolliffe.*

To the Commissioners in Lunacy.

OBSERVATIONS

OBSERVATIONS of the Governors of BETHLEHEM HOSPITAL upon the REPORT of the COMMISSIONERS IN LUNACY to the Secretary of State.

Bridewell Hospital,
29 November 1852.

Sir,

Observations of the Governors.

WE have the honour to transmit to you the accompanying observations of the General Committee for conducting the affairs of the Royal Hospitals of Bridewell and Bethlehem, both upon the Report which was laid before the Secretary of State by the Commissioners in Lunacy, with reference to Bethlehem Hospital, and upon the Evidence on which such Report purports to be founded.

With a view of facilitating your consideration of the whole of the subject-matter of such Report and Evidence, the General Committee have directed that copies of all correspondence, of all Resolutions that have been passed, and of all directions which have been given relating, in any way, to matters which have engaged the notice of the Commissioners in Lunacy, should be appended to this communication; and the General Committee desire, through us, to express their confident belief that, upon that careful and impartial examination which the whole case will now receive from you, embracing those important changes in the medical staff of the hospital which were made concurrently with the suggestions of the Commissioners, the result will be satisfactory.

We have, &c.
(signed) *P. Laurie*, President.
J. E. Johnson, Treasurer.

By order of the General Committee,
B. Welton, Clerk.

To the Right hon.
Spencer Horatio Walpole, M.P.,
Her Majesty's Principal Secretary of State
for the Home Department.

The Observations of the Governors upon the Report of the Commissioners in Lunacy to the Secretary of State, on Bethlehem Hospital, with Appendices.

Observations.

Observations of the Governors.

As a considerable period has elapsed since the 21st of February last, when the Report of the Commissioners in Lunacy on the condition and management of Bethlehem Hospital was transmitted to the Governors of that institution by the Secretary of State, from which a disinclination, on the part of the Governors, to enter on the consideration of that document may be erroneously inferred, it is necessary to premise that any delay which has occurred is not attributable to the Governors, but to circumstances over which they had no control.

On receipt of the Report and Evidence, the latter forming, in manuscript, a very bulky document, the Governors, it will be seen, directed it to be printed for the use of the general committee in the first instance,* it being manifestly impossible for the members of that committee to make themselves acquainted with the subject-matter of the report in the form in which it was forwarded. The Commissioners in Lunacy (as the Governors have reason to believe), hearing of this resolution, thought proper, for some reason, to communicate with the Secretary of State, who, on the 27th March, prohibited the Governors from printing the document without his sanction ; and it was not until the 2d April, after further correspondence, that the Governors received permission from Mr. Secretary Walpole to distribute copies of it, on the condition that they should only be "transmitted, in the strictest confidence, to the members of the committee.

Even when circulated in this limited way the Governors were not in a condition to enter upon the consideration of it. The report reflected, in strong terms, upon the physicians, the resident apothecary, and the matron, as to the discharge of their respective duties; and until the Governors were furnished

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* Five hundred copies were printed for circulation, when requisite, amongst the Governors, to whom indeed the report was addressed.

furnished with such explanations as these officers might think fit to offer, further progress was impossible. The physicians and apothecary first applied for copies of the report to the Governors, who were all precluded from supplying them by the terms of the Secretary of State's letter. One of the physicians, and the apothecary, then wrote, as it is said, to the Secretary of State to the same effect, but were informed, as the Governors understand, that their requests could not be granted. In the meantime the Governors were applied to by the Home Secretary for their observations on the report; and on their representing the impossibility of complying with his requisition until the officers affected by the report were allowed to examine and answer it, they received permission (on the 25th June) to furnish them with copies, "upon condition that such copies are not made use of for any purpose, except that of preparing answers by the officers to the statements made in the report.

Observations of the Governors.

The remarks of the physicians and the matron were received as hereinafter stated, but no remarks have been received from the apothecary, for the reasons assigned in his letters. It will thus be seen that the Governors are in no degree responsible for any delay, which they were most anxious to avoid.

Although the Governors were, from the first, aware that the Commissioners were exceeding the powers of investigation specified by the 8 & 9 Vict. c. 100, s. 116, and that their inquiry was extended to matters entirely foreign to their jurisdiction, nevertheless, having no desire but to ascertain and amend any defects in the administration of the hospital, they raised no question as to the regularity of the proceedings.* Indeed, the Commissioners state that "every facility was afforded by the Governors of Bethlehem Hospital to enable us to pursue our inquiries." The Governors notice this for the purpose of guarding against their being supposed to admit the authority of the Commissioners in Lunacy beyond the limits expressed in the statute.

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* 8 & 9 Vict. c. 100, s. 116: "And be it enacted, that nothing in this Act contained shall extend to the Royal Hospital of Bethlehem, or any building adjacent thereto, and used therewith: Provided always, that it shall be lawful for any Commissioner, or other person, whom the Lord Chancellor, or any one of Her Majesty's principal Secretaries of State, shall at any time, by an Order in writing, under the hand of the said Lord Chancellor, or Secretary of State, direct, to visit and examine the Royal Hospital of Bethlehem, and every or any building adjacent thereto as aforesaid, and every or any person confined therein."

Observations of the Governors.

The scope of the material part of the evidence is to impute cruel and improper usage on the part of the attendants towards the patients, and neglect on the part of the medical and other officers of the establishment, which the Commissioners support by reference to five cases out of an institution containing, on an average, as stated by the Commissioners, nearly 400 patients; and admitting about 340 annually, of whom nearly half are discharged cured.

Few things are more easy than to excite a cry of cruelty against the management of a lunatic asylum, and few more difficult to disprove, even where no real cause exists. No one who has ever visited a lunatic asylum can be ignorant of this fact. The first and eager complaint of a large proportion of lunatics, especially those labouring under acute mania, and recently disordered (which is the case with the majority of patients in Bethlehem Hospital), is of their removal from their homes, and unjust detention, as they call it, "in a madhouse." In full possession often of bodily strength, and with perceptions sharpened by their disorder, which incapacitates them from appreciating, like ordinary invalids, the means adopted for their benefit, their irritation is sometimes excited against the officers entrusted with their care; hence the various means which science and kindness can dictate for alleviating their melancholy condition, are frequently resented and resisted as exhibitions of cruelty and malevolence. These complaints are detailed to their relations and friends when they visit the hospital, and it is therefore not surprising if some of them, unable from want of knowledge and education to discriminate the propriety of the treatment, and worked upon by their own excited feelings, lend a ready ear to statements which, though often destitute of foundation, are detailed with all that apparent truth and minuteness which is yet consistent with lunacy.

Postponing the particular application of these remarks to the specific evidence of the principal witnesses in the five cases of complaint reported upon by the Commissioners, the Governors would direct attention to the very defective means of knowledge possessed by many of the witnesses upon whose evidence the Commissioners rely. It is also to be carefully noted, that the Commissioners appear to ignore the possibility of any violence on the part of the patients, or of the necessity for any control, and to take for granted the accuracy of every incriminating statement, while evidence of a different tendency is invariably subjected to a rigorous, and, in many instances, not very temperate cross-examination. The

Governors

Observations of the Governors.

Governors indeed are far from imputing wilful misrepresentation to the witnesses, neither would they have wished to have excluded testimony, however infirm; but when the most important portion of the charges rests upon evidence which, before any tribunal conversant with the elementary rules of evidence, would be excluded from its uncertainty and liability to error, unless supported by a reasonable amount of corroboration, which is wanting in these cases, they regret that the Commissioners did not deem it necessary to sift such evidence with at least some part of the same care with which they invariably received less unfavourable testimony. This appears peculiarly applicable to two classes of witnesses, on whose evidence most of the charges of cruelty rests; viz., patients who were lunatics at the time when the occurrences of which they speak are alleged to have taken place; and next, servants who had been discharged for misconduct. The first, from the uncertainty which must more or less affect their evidence, in which actual fact may unconsciously and unwittingly be confused and blended with those delusions which constituted their disorder; and the other, from the hostile bias with which they may, not uncharitably, be supposed to be actuated.*

The Governors repeat, that they do not wish that such evidence should have been excluded, but merely that it had been scrutinized with somewhat of that caution and doubt which the Commissioners bestowed on all evidence of a different tendency.

It is also to be borne in mind, that a very large proportion of the evidence reflecting upon the hospital is obtained by the Commissioners by the unsparing use of leading questions, and by even suggesting to the witnesses the very form and expression of the answer, to which an assent is the almost necessary consequence; as every one knows the tendency of

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* Evidence of J. Welsh, an attendant, taken on trial as an attendant, but not engaged:

3181. *Q.* How came you to communicate with Mr. H. upon the subject?—*A.* A young man, who was formerly there as keeper, of the name of Marsden (Marson), informed me. He came to me on the Sunday after I was discharged on the Friday, and said, "If you have seen anything that was not correct towards the patients, or if you have not been treated well yourself, you can have other redress by applying here" (the office of the Commissioners), and he immediately told me of Mr. H., and I went to him, and that is how I found it out.

Observations of the Governors.

of witnesses, even without any bad motive, to colour the recital of their presumed grievances to sympathizing and undoubting listeners.*

The Governors would now draw attention to the unusual, and as they consider, the objectionable manner in which the Commissioners in Lunacy have conducted this inquiry.

The Commissioners commence their report by stating that the result of their inquiries on the occasion of their first visit to Bethlehem Hospital, was to "disclose facts that appeared to the Commissioners to deserve a more minute scrutiny;" that such visit arose out of "information which had been laid before them, together with certain matter of complaint, and that in consequence they instituted their inquiry, summoned witnesses, and required the production of several documents, for the purpose of ascertaining not only the special treatment adopted in reference to particular patients, but also the character of the general arrangements and supervision of the hospital."

Assuming the Commissioners had full authority for this course, the Governors feel assured it will be learnt with surprise, that no communication whatever of the existence of any complaint, or the nature of the charges which were to be answered, was made to the Governors, previously to such inquiry being instituted;† that no one was allowed to represent them at the inquiry; that no witness connected with the

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* Evidence of William Marson, formerly employed at Bethlem Hospital:

2430. *Q.* Why did you leave?—*A.* The money was so small, and the treatment I received was very bad indeed.

2431. *Q.* From whom did you receive bad treatment?—I received bad treatment from Dr. Wood, and also several others; Mrs. Hunter, for instance.

2432. *Q.* What kind of treatment do you refer to?—*A.* Nasty like. I was abused every opportunity they could get.

* * * *

2718. *Q.* If you were asked the question, where should you say the fault was to be found principally; in what department?—*A.* The fault is to be found with Dr. Wood.

2719. *Q.* You think that he is indolent and careless?—*A.* Yes.

2720. *Q.* And he does not take sufficient trouble, you think?—*A.* No.

2721. *Q.* He does not keep the attendants in sufficient order?—*A.* Yes, that is what it is.

† The letter of the Commissioners in Lunacy to the President, dated 27th June 1852 (mislaid), referred to in their letter of the 3d July, was not received by the President until late in the afternoon of the 28th June, before which their inspection of Bethlem Hospital had been completed.

Observations of the Governors.

the hospital was informed, when attending to give evidence, that any specific complaints existed, and was in course of investigation; that each witness was examined professedly to ascertain the scope and nature of his or her respective duties; that the very serious charges against them were only incidentally referred to; that as no opportunity whatever was afforded to the Governors of hearing the charges, it was impossible to offer any explanation or defence, had the opportunity for doing so been allowed. And lastly, that the usual and ordinary minor courtesy, of allowing witnesses to correct those errors in their evidence which arise from a hasty examination, the mistakes of the shorthand-writer, and of transcription, was not offered.

The Governors submit, that it was the obvious duty of the Commissioners to observe the course followed by every impartial tribunal, viz., to communicate to any person whose conduct is the subject of inquiry, the specific charge against him, and to afford him the full opportunity of meeting it, in the presence of those who make it; and without reference to the manifest injustice of the extraordinary course pursued by the Commissioners, it is difficult to imagine how they could feel themselves justified in arriving at any conclusion whereon to base a report, without those explanations and answers a different course would have afforded them. It is also to be remarked, that no mention whatever is made in the report of these deviations from the hitherto invariable mode of conducting an impartial inquiry.

Even if the Commissioners considered it compatible with a fair and candid course to make the inquiry wholly *ex parte* in the first instance, it was, we submit, their plain and obvious duty to have communicated to the Governors the evidence they had received, and to have afforded them the opportunity of making such observations thereon as they might deem necessary before the report was prepared.

It is possible that the Commissioners conceived, that by their communication of the 3d July 1851 and the 1st August 1851, they were affording the Governors those opportunities of explanation and defence, upon the want of which they animadvert.

The first communication, however, relates only to the case of Miss A. M., so far as it had then been investigated, and concludes by a request for copies of the rules and regulations of the hospital.

No specific information as to any other of the five cases reported upon was communicated to the Governors.

The

Observations of the Governors.

The second communication informs the president of the intention of the Commissioners to transmit their report to the Secretary of State, and adds, "Before, however, so doing, the Commissioners desire to afford the Committee of Governors and yourself an opportunity of making any statements or communications which you or any other member of the committee may be disposed to submit for the consideration of this Board."

With reference to the first part of the communication of the 3d July, it is obvious that the opportunity for any useful explanation had passed, and the inquiry was completed without allowing the Governors, or any one on their part, to be present during the investigation; and with reference to the latter part, it will be seen by the resolution of the Bethlehem Sub-Committee that the several documents asked for were transmitted forthwith, accompanied by an assurance on the part of the Governors, of their readiness to co-operate with the Commissioners, and afford every assistance in the investigation of any case relating to the treatment of any patient in the hospital. And as relates to the communication of the 1st August 1851, the president, on the day following the receipt of the letter, attended at the office of the Commissioners, and informed their secretary that so long as the Governors were unacquainted with the wishes of the Commissioners and of what occurred before them, it was impossible for the Governors to make any statements or communications as suggested.

The Governors feel that an investigation so entirely *ex parte*, conducted not only without reference to, but in contravention of the first principles of justice, is a subject on which they are bound to animadvert; and while they acquit the Commissioners of any desire to act unjustly, or to create a prejudice against the only institution exempted from their jurisdiction, and attribute their errors rather to a want of familiarity with the ordinary manner of conducting such inquiries, they need hardly remind the Secretary of State of the additional necessity for receiving a report based on so infirm a foundation, with very great caution.

Conclusions.

The following are the conclusions at which the Governors have arrived after a careful examination of the Report of the Commissioners in Lunacy and the evidence taken by them.

The Governors have confined themselves strictly to the contents

Observations of the Governors.

contents of the report and evidence, which they submit fail in many most material points to substantiate the statements of the Commissioners. They might have followed the example of the Commissioners, and have secretly received a mass of evidence from witnesses, and thereon founded a counter report, but they felt, not only that an inquiry to carry any weight should be conducted openly and subject to the correction of those whose characters or statements would be affected by such a course, but that the evidence itself, when carefully considered, and due allowances made for the suggestive system of interrogation pursued by the Commissioners, in contravention of the ordinary elements of evidence, as well as of fairness and propriety, in a great degree disproving the charges the Commissioners have attempted to establish.

The Governors confidently submit, that on a careful and impartial consideration of the evidence, many of the most important of the conclusions arrived at by the Commissioners are not borne out.

That of the five cases reported upon by the Commissioners, two were cases of patients who were restored to reason by means of the treatment received in the hospital; and that with respect to the third, which terminated fatally, the testimony of five medical men (of whom two were the medical attendants of the patient and her family) prove, beyond all reasonable doubt, that her death was occasioned by disease of the brain, which had commenced before, and was the cause of her admission into Bethlehem.

That the allegations of ill-treatment and neglect of this patient are not supported by any direct or trustworthy evidence, and that the Commissioners themselves admit that there is much conflict of testimony "as to her condition on admission into the hospital and on her discharge, and also as to the origin and character of the various wounds and abrasions of her body."

That of the two remaining cases, there is so much doubt thrown over one of them as to induce the belief that if the investigation had been conducted openly, a complete refutation of the charge might have been established; and with regard to the last there is no evidence whatever to show that the mode of ill-treatment alleged had, at any time, existed as a practice in the hospital; and under all the peculiar circumstances of the case, the charge, that it had been resorted to at all, would not be entertained by an impartial tribunal.

Observations of the Governors.

That the treasurer did not deprive the resident medical officer of the power of classifying and employing the female patients, inasmuch as these duties remained vested in the physicians, and subject to their absolute control. That the course adopted by the treasurer was proper and judicious, and had the immediate beneficial effect of increasing the employment and promoting the comfort of the female patients.

That as the duties of the physicians as the responsible medical authorities of the hospital, have not ceased, the Governors abstain from any lengthened comment on the manner in which their respective functions were fulfilled, but they feel it due to Sir Alexander Morison to express their opinion, that all his proceedings in connexion with the hospital have been characterized with industry and kindness.

That the alleged practice of "mopping" certain female patients, depending solely on the unsupported evidence of a person at the time insane, is not entitled to belief.

That the use of straw, properly covered with blankets, for the bedding of patients insensible to the calls of nature, is not unsuitable, but the Governors at the same time express their disapprobation of certain female patients, although of this class, to the number of 15, having in consequence of their infirmities, been placed in bed unnecessarily without a proper supply of night gowns.

That the rules and orders of the hospital are detailed with minuteness, but, in consequence of the appointment of a resident physician, having paramount authority in the hospital, a careful revision of the whole has now become necessary, and will be forthwith undertaken.

That the Governors disapprove of the imperfect manner in which the Case Books of the hospital have been kept, in disregard of "the explicit terms of the judicious regulations made by them for this purpose."

That the facilities afforded by the Governors to the Commissioners in this inquiry are not to be taken as admitting the legality of the course pursued by them, or as recognizing their authority to proceed as they have done.

That inasmuch as the Commissioners did not communicate to the Governors, or to any witness, the existence or nature of the charges, general or specific, against the management of the hospital, or the individual witness, either prior to, or at the time of the examination, nor allow any one to attend the investigation on the part of the hospital, nor afford the Governors or the witnesses any opportunity of explanation

or

Observations of the Governors.

or defence, but prepared and agreed to a report to the Secretary of State upon an *ex parte* and secret inquiry; the Governors protest against so unusual a proceeding, and against any conclusions drawn from a document obviously tainted by preconceived prejudices, and prepared in contravention of the first principles of justice.

These conclusions are fully supported, as the Governors submit, by the following observations:

Without referring further to the character of the investigation, the Governors proceed to consider the results of the evidence, which, the Commissioners state, "appears mainly to embrace the following subjects; viz.

"1. Miss A. M.'s case.

"2. Miss H. H.'s case.

"3. The cases of Mrs. Eleanor W., Mrs. Mary Elizabeth W. and H.

"4. The general government and management of the hospital."

It thus appears, that with every facility afforded by the Governors, the Commissioners found their report on the cases of five patients only, out of many hundreds constantly under treatment; and it will be seen, on further investigation, that the evidence in these five cases, on the showing chiefly of the Commissioners themselves, fail to support the conclusions they deduce, and exhibit, in no ordinary degree, that want of caution which, we regret, so strongly marks this document.

Miss A. M.'s Case.

This patient was brought to the hospital on the 6th October 1850; her petition, representing her to be "in impaired health," and "that she refuses her food, and endeavours to commit suicide." The case in the Case Book is described as one of melancholia, and as being, on admission, "very much depressed, silent, and inert; it is with difficulty that any answer can be got from her, and sometimes all attempts to make her speak are unavailing; she is not disposed to exert herself in any way, and will not take the trouble to observe ordinary personal cleanliness."

The medical gentleman who signed her certificate of fitness

Observations of the Governors.

for admission says, (1978*) "her condition previously to her being received into Bethlehem was anything but good, but it was not so bad but it might be amended;" and although he states (1986), "I certainly found her in a different condition when she came out from what she was when she went in;" he further states, in answer to the leading question, "From that did you conclude she had been ill-treated?" "I cannot do that, it might have been from natural causes." Dr. Wood, in his report to the treasurer of the Commissioners' visit to the hospital, states, "It is well known to all that her (this patient's) general health was much impaired, that she was weak and emaciated, and the nurse stated that the prolapsus was reported to me, that I directed her what to do to it, that the treatment was successful, and that the patient did not suffer from it again. One of the Commissioners remarked, that this was a malady that was not cured, and could only be alleviated from time to time. It is, therefore, quite possible that the patient arrived at Northampton, after so long a journey in the middle of the winter, with a return of the symptoms. The nurse denied that the patient was treated harshly, but believed that some of the other patients had called her 'Black Sall.' She also denied that she was ever put to bed without proper covering, or that she was made to wash her own linen; she admitted that the patient's skin was very red at the bottom of the back and seat, from her being continually wet and dirty, but denied that the skin was broken. The statement about the black eye was believed to be true, but by what accident it occurred could not be remembered."

The patient herself says she had no night clothing whatever; that she had always insufficient bedding, and sometimes none at all, that she sometimes had an oilskin or India-rubber cover.

It is not to be credited that this patient had not at night the usual supply of bedding seen in these bed-rooms every day, and there neither is, nor ever was, in any bed-room any covering of oil-skin or India-rubber.† Her sister, Miss F. M., states, that at the time of Miss A. M.'s admission, "she was

* This number, and such throughout, refers to the numbers of the questions in the copy of the evidence printed by the Governors.

† If any of the witnesses have said there are such coverings in the Hospital, it has been in assent to leading questions, and shows to what inaccuracies questions in such form frequently conduce.

Observations of the Governors.

was in weak bodily health, and for 10 days previously she had refused her food;" and with regard to the night clothing, she makes it part of her complaint, "that she (the patient) had on one occasion been obliged to get up and wash her own linen, which she had dirtied," which is inconsistent with the patient's own statement, that she had no night clothing. Miss F. M. states to the Commissioners that it was "in consequence of my sister's complaints of treatment, added to her personal appearance, and the fact of her being placed on the basement floor, that decided me to remove her;" but nothing is stated in Miss F. M.'s evidence of her having applied (several times it is believed) for permission to obtain the signature of the patient to some document,* which permission was not granted. It is to this refusal the Bethlehem sub-committee imputed the removal of the patient, as no complaint was ever made to them, or to any of the officers, of her treatment; and indeed on the contrary, Miss F. M., in a note to Dr. Monro, speaks of a recommendation from him, that she should pause before removing Miss A. M. from Bethlehem, as an act of "kindness and wisdom." These facts, in conjunction with the denial of the nurses, the absence of corroborative testimony, and the medical opinion that the state of this patient "might have been from natural causes," throw great doubt on this charge of ill-treatment; and

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* Evidence of Treasurer:—

116. *Q.* Do you recollect whether any complaint was made at any time of her (Miss A. M.'s) ill-treatment?—*A.* Certainly not, while she was in the institution. The case of M., as it appeared to us, was this: she was brought into the institution, and shortly after a request was made that she should be permitted to sign a legal document, to which I objected. I would not consent, on any consideration, to allow her to sign any document, the object being to obtain money for her through such signature, and I would not consent to it; and her friends suggested it would be better to remove her, and take apartments, and obtain her signature. I said I would have nothing whatever to do with it; if they removed her, they might do so; but I would not permit her to sign any paper while she was there. An application was shortly afterwards made for her removal, on the ground that a change of air would be beneficial to her, and she was taken away. Certainly no complaint was made on the part of her friends of her treatment.

Evidence of Dr. Wood:—

339. *Q.* Did you hear anything about somebody wanting Miss M. to sign a deed?—*A.* Yes; her sister came to me, I think, two or three times on the subject. We had a long talk about how it was to be done. I told her I could not consent while she was there. There was great doubt of the legality of such a step; besides, I did not think she could sign anything in that state of mind.

Observations of the Governors.

and if an opportunity had been afforded, by an open inquiry, other and greater variances might have been discovered, and a complete refutation established.

While drawing attention to the obvious discrepancies in the case of Miss A. M., the Governors are far from charging her with any desire to misrepresent, but attribute them rather to her incompetency as a witness, from having been a lunatic at the time when the alleged ill-treatment was inflicted, and also from that "nervous and excited state" in which the Commissioners report they found her at the time of her examination, and which rendered her, in their opinion, unfit to be sworn.

The Governors cannot conclude their observations on this case without reference to the following statement by the Commissioners in their Report: "In consequence of A. M. complaining repeatedly of cold, her sister, on one occasion, took a warm jacket to the hospital for her," but the matron said the patient "could not be allowed to wear it, as it was too smart." It will be observed that the matron, in her remarks appended to this report, denies all recollection of such a circumstance; but even assuming that no misapprehension exists on this point, it would not be right to conclude that such a refusal was that harsh proceeding which at first it may appear to persons unacquainted with the habits and peculiarities of lunatics. If the jacket was too smart the matron acted judiciously in not allowing it to be worn.

Mr. Commissioner Martin reports that "care is taken to prevent any eccentricities in dress;" and any deviation from this wholesome precaution would lead to great confusion and inconvenience amongst a number of patients, many of whom are very excitable on this point. In fact, the cause of a recent dangerous attack by a patient upon one of the attendants, who was for some time in a precarious condition, arose from a cause of this kind. The matron has at all times a stock of clothing, which is at the service of the patients when required; and the same care to secure their comfort, in this particular, prevails as in 1836, when Mr. Commissioner Martin observes, "Much attention is paid to the apparel of the patients, particularly with a view to the warmth of the extremities; the male and female patients are provided with flannel drawers, and the men, likewise, with flannel waistcoats."

Miss H. H.'s Case.

Observations of the Governors.

This case depends entirely on the state of the patient when admitted and discharged, and on the conclusion to be drawn from the evidence as to the nature and origin of the appearances on the body after death. It is remarkable, that while the Commissioners close their summaries of the evidence in the five cases, with the expression of unfavourable opinions, yet in this case, on which nevertheless much reliance is placed, they confess, "There is so much conflict, however, between the statements made by the several witnesses as to her condition on admission into the hospital, and on her discharge, and also as to the origin and character of the various wounds and abrasions on her body, that we think it better to refer to the accompanying evidence for information on those points." We submit, that while there is conflicting evidence the weight of testimony exculpates the hospital from the stigma sought to be cast upon it by the Commissioners in reference to this case. One witness only, and who was a lunatic at the time, speaks of any harshness or ill-usage. All the rest is hearsay and inference.

In the absence of direct testimony as to the cause of death, or of wounds or abrasions, the next most trustworthy evidence is that of medical witnesses; and in this case there is the evidence of Sir Alexander Morison and Dr. Wood, the physician and apothecary of the hospital; Mr. Lawrence, the surgeon of the hospital; Mr. Taylor, a surgeon, and the medical attendant of the family, and Mr. Crisp, his partner, also a surgeon. Every one of these five witnesses deny there was any ground for assuming that the death of the patient was occasioned by injury, ill-usage, or want of care and kindness. The two last-mentioned gentlemen, indeed, state, on the *post mortem* examination of the patient, "That the death was clearly referable to disease of the brain, which had existed some months." While Mr. Lawrence, whose eminence and skill are equally admitted, states, after an examination of the body, "He could see nothing leading to the conclusion, or even the suspicion, that she had met with ill-usage before death." The Governors can here observe no conflict of testimony, but on the contrary an agreement and corroboration of a character, which with any unprejudiced tribunal would have been conclusive; and they regret the Commissioners have not evinced a readiness to draw a fair

Observations of the Governors.

and reasonable conclusion, favourable to the hospital, at all equal to the promptitude with which they have seized upon testimony of a different tendency. It also deserves remark, that the witness, Mrs. Elinor W., to whom the Commissioners refer as corroborating the statements of ill-usage of this patient, in answer to the Question 1644, "Did you ever see any of the nurses strike Miss H.?" replied, "I cannot say I ever saw them strike her."

Mrs. Elinor W.'s Case.

The Governors are at a loss to account for this case being relied upon as any evidence of harsh or improper usuage, or neglect of the medical and other officers. The latter conclusion is disposed of by the fact, that this alleged ill-used patient was discharged cured from the hospital after a residence of less than three months; while the only instances of harsh treatment attempted to be established, are a rap on the knuckles with a broom for climbing up a window, and the use of an offensive expression, though she never complained of either to the matron, when she informed the officer of the ill-treatment she alleged she had witnessed in regard to the other patients. This patient is described (341) as "violent, abusive, dirty, and mischievous;" and although either striking a patient, or the use of offensive language, by a nurse or attendant, is a very grave offence, and invariably visited severely, the instances quoted are not sufficiently established to require further comment; and this case would be at once dismissed but for the fact, that it is upon the evidence of this solitary witness that the Commissioners affect to believe in the practice of washing some female patients with mops.

This witness asserts, that the "dirty patients were daily laid down naked on the stones and washed with a mop;" but she does not state that she herself was ever used in that way; on the contrary, she states that she washed herself and had the usual quantity and description of cloths to dry herself with, although she was a "dirty patient." Not only also is there no corroborated testimony of the existence of this offensive practice, but the evidence of Miss A. M., the subject of the first case, tends to discredit this (Mrs. Elinor W.'s) remarkable statement. Miss A. M. says, "the bathing and washing was very coarse; I was taken to a sink and washed

Observations of the Governors.

washed with a wet towel."* This statement, coupled with the positive denial of the nurses, and the absence of any other testimony whatever in support of the assertion, disentitle it, we submit, to credit. It should be noticed, that the Commissioners do not commit themselves to a belief in this singular narrative, but deal with it as a practice alleged to have been resorted to, which they say there is much reason to fear had prevailed.

The evidence of this witness is, upon the face of it, in many instances of a nature which shows with what caution it ought to be received. In one part, she swears positively that the head nurse, who for 10 years had the charge of that ward, who ate and slept in it, who had received a reward from the society for the encouragement of good attendants on the insane, whose evidence, relied upon by the Commissioners, shows that she must have been almost constantly present, "never went round the basement once to her knowledge;" and the second instance is still more extraordinary. In answer to the question put in their usual leading form—The night nurses never opened the doors of the cells? *A.* "Never;" it does not appear to have struck the Commissioners, that as this witness was locked every night in her sleeping room, that even if she were awake during the whole of every night, it would be physically impossible for her to speak with certainty on such a point. Had she been a nurse in charge of the ward she could not have been more a free agent than she represents herself to have been; nor if she had been perfectly sane, could she have spoken more confidently as to facts of which it is manifestly impossible she could have any knowledge. Notwithstanding the glaring improbabilities of such evidence, the Commissioners, upon the unsupported evidence of this witness, insinuate their belief in the existence of the alleged practice of mopping, and incautiously add their opinion, that this evidence, uncorroborated, unsifted, and, as shown in the above instance, actually impossible, is that of a "trustworthy" witness.

Miss M. E. W.'s Case.

This case exhibits, in a forcible manner, the peculiar mode adopted by the Commissioners in receiving and adopting evidence.

* All the galleries are provided with proper lavatories, consisting of metal washing basins inserted in slate slabs.

Observations of the Governors.

evidence. Their summary of the case, as stated in the report, is as follows:

"In the case of Miss M. E. W., the testimony of her mother (Mrs. Elizabeth W.) shows that this patient had various bruises on her person during her residence in the hospital; that whilst there, she complained of ill-treatment and coarse conduct on the part of the nurses; and that she slept naked on loose straw in the same manner as is set forth in the cases of A. M., and H. H. The truth of the mother's statement, as to this patient's complaints of ill-usage, is strengthened by the evidence of E. W., to whom M. E. W. made the same complaints whilst in the hospital; and it is remarkable that both these last-named witnesses concur in stating that M. E. W., whilst in the hospital, expressed her intention of complaining to the Governors of the ill-treatment she had been subjected to, and that she was dissuaded from, or counteracted in her intention by the matron."

"On examining this patient herself, it must be observed that the answers given by her to our questions did not bear out the statements of her mother and of Elinor W. M. E. W.'s recollection and general intellect were, however, in so feeble and imperfect a state at the time of her appearing before us, that we did not think it proper to question her to the extent we should have done had she appeared more competent to give evidence on the subjects of our inquiry."

The Evidence.

In forming a conclusion on this case, the important fact should be remembered, although it is unnoticed by the Commissioners, that this patient was cured in the hospital; and, it is admitted by the mother, was very kindly treated by Sir A. Morison, the physician. The evidence of the mother, the Commissioners admit, was not "borne out" by the daughter, and it is of so contradictory a character that it is impossible it could be "borne out."

In the first place, the mother positively states that some bruises which were on her daughter's person were "done by the nurses," although it is not pretended that there is any evidence whatever of such conduct on their part. She afterwards asserts, that her belief rested on the fact that she had no bruise when admitted, and that the nurses "might pull her about; and another thing, she was going to take a bath on one occasion while she was there, and whether she did

Observations of the Governors.

did not do it properly herself or not, I cannot say, but she said that no less than three nurses forced her in again, and ill-treated her very much, and she begged never to be put into a bath again." (1954.)

In order to estimate the conduct of these nurses, it is necessary to consider the following description of this patient, as detailed in the medical case book of the hospital.

"Very wild, excited, noisy and violent; her conversation is generally incoherent, and she is very mischievous, not only destroying her own clothes and those of other patients, but breaking and tearing anything that comes in her way. She is subject to paroxysms of an hysterical nature, and is now and then depressed for a few minutes, and cries without any obvious reason. This, however, never lasts long, and almost always occurs when anybody goes into the room, especially if they speak or take any notice of her. At other times she is generally rather elated than otherwise, but is occasionally tolerably quiet, and can then, when in the mood, give a rational answer to a question. She is, however, very uncertain, and her condition is continually varying. She pays no regard to personal cleanliness, and is extremely filthy."

It is remarkable that while Mrs. W., the mother, speaks with great positiveness and without doubt as to facts, respecting which it is impossible she could have the least personal knowledge, because if true, they could only have occurred in her absence, that her information is strangely defective on subjects within her knowledge, and in which she must have been greatly interested. Thus she speaks without doubt as to alleged ill-treatment inflicted on her daughter in her absence, but was unable to tell the Commissioners to what part of the country that daughter had gone to reside for change of air; and although this question was repeated four times, the only approximation to the locality was that it was in Somersetshire, and it might be near Haddington!" Neither does she know when her daughter was likely to return. This witness, in answer to the Commissioners, also added, that she had a son, a medical man, resident in London, who had visited his sister while in the hospital, and who could, in the idiomatic language of the question, "Tell us all about it." The Governors have to regret that this competent and accessible witness, of whose existence the Commissioners were previously aware, was not examined, as they presume that the Commissioners would have

Observations of the Governors.

have been willing to receive any testimony which could serve to elucidate the truth. The Governors therefore submit that this case by no means warrants the conclusions of the Commissioners.

The wound on the finger alleged to have been made by the keys, there is reason to believe was a whitlow. (2792.)

Mrs. Elinor W., the Commissioners' "trustworthy witness," "does not recollect ever having seen any nurse strike any patient with the keys," and the patient herself makes no such charge; while the bruises which the mother saw (and which the Commissioners convert into a statement by the mother, that she was all black and blue,) might, and probably were, occasioned by the patient falling from the feeble state of her hip joint, which the mother states would "come out when she exerted herself." At the same time it is also possible, and not improbable, that these bruises, if any, were produced in the struggles made by the patient when resisting the necessary operation of bathing, which, in such case, is not inconsistent with humane and proper treatment.

Another proof of the unsatisfactory evidence of this witness, is with reference to the abusive language she asserted to have been used to her daughter; but notwithstanding the Commissioners unfairly, we submit, suggested to her that it was the nurses who abused her daughter, she admits "she does not know whether it was the nurses or the poor creatures." (1956.)

The inference drawn by the mother, that the matron "counteracted" the intention of her daughter to complain of the conduct which she had experienced, is erroneous. She states that the matron stood beside her daughter while she was being examined, upon which the highly suggestive question is put to her, "To prevent it?" which she naturally adopts, and answers, "Yes." The daughter has no recollection of any such interference, nor is it likely she should, as it is difficult to see how the matron could prevent the complaint of a person who was a free agent, and only introduced, on her discharge, to the Committee prior to leaving the hospital, and the whole statement rests upon the imagination of the mother. The simple explanation of this matter is, that the rules require the matron personally to introduce into the committee-room every female patient on her discharge cured. The propriety of such a rule is obvious,

when

Observations of the Governors.

when it is recollected how embarrassing and agitating to the nervous system of a female recently recovered from lunacy such a situation would be, if sent alone before a committee of gentlemen wholly strangers.

The Governors cannot conclude their remarks on this case, without drawing attention to the different reception given by the Commissioners to evidence as it may tend to exculpate or incriminate the hospital; neither does it appear to have occurred to the Commissioners, that if so little credit is to be given to the evidence of the witness, Miss M. E. W., after her discharge, cured, any statement she may have made when in the hospital suffering from her malady, should of necessity be received with very great caution. The mother assigns as the reason why neither she nor any of the family made any representation or complaint to the Governors upon the subject of her daughter's treatment was, that "they did not know what she stated was right," (1966-7,) affording a clear proof that, however confidently the mother may have repeated before the Commissioners as correct, the statements made to her by her daughter whilst a patient in the hospital, there was a time in which she did not consider them entitled to such implicit credit; and it is deserving of particnlar remark, that the daughter herself, before the Commissioners, denies their accuracy.

The evidence of Miss M. E. W. is disparaged, and practically rejected (not because it does not bear out the unfavourable evidence of the mother), but on account of her alleged feebleness of recollection and intellect; nevertheless, she was deemed qualified to be sworn before being examined, whereas no doubt whatever is expressed with reference to the evidence of Miss A. M., although the Commissioners have added, in a note at the end of her examination, "As this witness is still in a nervous and excited state she was not sworn in the first instance; ultimately, however, she expressed her willingness to swear to the truth of what she had stated, and was sworn accordingly. She, however, declined having her evidence read over to her." The Governors can conceive no reason why the same prominence was not given in the report to this most important limitation of the competence of this witness against the hospital which is attempted to be cast upon the not unfavourable evidence of Miss M. E. W. The Commissioners in their report suppress all reference to this peculiar feature of their proceedings.

Observations of the Governors.

H.'s Case.

This patient was admitted into the hospital on the 26th September 1851, and removed by his friends on the 5th November following. This case is entered in the Case Book as follows :—

"Restless, unsettled, and exceedingly obstinate, with only just enough consciousness to offer all the resistance in his power to whatever was done for him. When not interfered with, he would remain constantly in the same place, without speaking a word or taking any notice of anything, excepting when the gallery door was opened, when he would endeavour to press his way on, still without saying a word; if asked a question he would stare about as if he did not understand he was spoken to; and has never been heard to speak a rational word since his admission. He not only refuses his food, but resists when the attendants give it him. When put to bed he was very noisy, and knocked loudly at the door, and as he continued to be noisy at night he was removed to the basement the fourth day after his admission.

"October 27th. He continues extremely obstinate, resisting, as far as he is able, everything that is done for him. For the last few days he has refused his food more determinedly than ever. This morning, as the attendant was carrying him out of his room, another patient, who was in the gallery, suddenly banged the door out of which this patient was at the moment being carried, and caught his head between the edge of the door and the door-post, so as to squeeze him by the temples and produce a bruise on each side, with a black eye on the left side.

"28th. The attendant was unable to induce him to take any food, and as he had taken very little indeed since the 25th, the stomach-pump was employed.

"29th. Was fed twice with the stomach-pump; no change whatever in his mental condition. Discharge from the left ear observed.

"30th. Fed twice; remains the same [with stomach-pump].

"31st. Fed twice [with stomach-pump].

"November 1st. Stomach-pump was used twice for the last time, as it seemed that, notwithstanding the nourishment thus

Observations of the Governors.

thus administered, he was rapidly wasting, and the resistance he offered on each occasion it was feared would do him more harm than any good from feeding.

"4th. He has been fed once a day since the 1st instant, until this morning, when he took the whole of the breakfast that was offered him, consisting of two eggs, some bread and butter, and about a pint of tea; at dinner time he took all the dinner that was given, but did not help himself to any.

"5th. Took the same breakfast as yesterday, but about half an hour afterwards, having up to this time walked about very firmly, he appeared to be faint, and fell in the gallery against the wall while sitting on the coal box, in sight of an attendant; some wine was given him, and he soon rallied."

The Commissioners state that the "tenor of the evidence given, as to the male patient H. (this patient), is to the effect," "That he was a patient in the hospital for rather more than five weeks; that he was a strong muscular man, and free from bruises on his admission; that on his discharge he was exceedingly reduced in flesh, and had numerous bruises on his body, and that he complained, amongst other things, of ill-usage from the attendants, and particularly of his throat having been severely squeezed; a circumstance that was corroborated by the appearance of his throat on his discharge, and is also corroborated by the evidence of John Welsh, who was a keeper at the time of H.'s residence in the institution, but who has since been discharged. This last-named patient (H.) died within a few days after leaving the hospital."

As the chief witness in this case is John Welsh, who is, indeed, the only person who speaks of the manner in which the patient's throat is alleged to have been injured, it is necessary to advert to him at some length: he came to the hospital on the 9th of August 1851, on trial, as an attendant; at the end of two months, the usual period of probation, Dr. Wood, not feeling himself able to recommend him for appointment, allowed him another month's trial, at the end of which period (the 7th November 1851) he was reported as unsuitable, and another directed to be taken in his place. He then requested to see the Bethlehem Sub-Committee, and, on being admitted, demanded to be appointed as of right, and on being told that this could not be done, he expressed his determination of going somewhere else, and seeing if he could not get justice there; having

Observations of the Governors.

having given this clear proof of his unfitness, he was told to leave the room.

As he saw the body of the patient (H.), after his death, which occurred on the 8th November, he must have been in communication with the friends of the patient shortly after he left the hospital (3116). He says (3090), "the keeper is there now, of the name of Thomas, who resorted to the stocking, and put it round the man's (H.) neck, and tied it like this (describing the same,) in a noose, and held him till the man was nearly strangled." In answer to the question—

3102. "How often did Thomas use the stocking to H.? he says, "About twice to H. and once to P." (another patient). He states that these are the only times he ever saw this done, although he admits (3090) that he "had repeatedly been called for to go down into the back basement, where the dirty patients are, to assist this man to dress." The corroborations of this charge, if they can be considered such, are the difficulty of swallowing (3193), the appearances of the neck, and the patient's own statements after being removed. With regard to the first, it is scarcely possible to conceive that it could be otherwise with a patient who had for some time been fed with a stomach pump, the use of which he had always violently resisted;* and it is quite possible that the appearances, which were not confined to the neck, but extended over the face, neck, and head, may be attributed to the same circumstance, and to the injury occasioned by the bed-room door. The patient's brother says (3193), that he (the patient) "whispered that he had had his throat squeezed;" but in answer to the question 3200, "Did he describe how it was squeezed?" replied, "No, he did not; they put something over his head, and squeezed his throat." The latter part of this reply appears to be contradictory to the former. It was probably not intended to form part of the reply to the question, but to be the communication of further information obtained elsewhere; for it must be remembered this evidence is given on the 18th November, some time after Welsh must have visited the friends of the patient.

Much

* It can hardly be unknown that with patients who obstinately refuse food, there is often no other mode of administering nourishment, and thereby preventing death from positive exhaustion, than by the use of the stomach pump.

Observations of the Governors.

Much of the evidence of another witness, also a friend of the patient, is important, and is as follows:

3234. *Q.* "Did you see his throat at the time?—*A.* I saw it.

3235. *Q.* "What appearance did it present?—*A.* There was nothing external.

3236. *Q.* "Was there any discolouration?—*A.* He was discoloured altogether; the face, the neck and head; he complained a great deal of his throat.

3237. *Q.* "Did the throat look somewhat different?—*A.* It was discoloured.

3238. *Q.* "Did he say how it occurred?—*A.* He said they twisted his throat, but of course it was incoherent, a part of it; he became, on Friday, previous to his death, tolerably sensible for a man in his weak state.

"3239. *Q.* When tolerably sane, what did he state as the reason for his ill-treatment?—*A.* The whole time was spent in upbraiding his family, and those connected with him, for leaving him there."

* * * *

"3243. *Q.* Did he mention the name of any keeper?—*A.* No, he did not. I knew nothing of the names of any keeper till the conversation I had with the person whom you have already examined, (no doubt Welsh, who was examined on the same day); the name of the keeper was Thomas, who, he said, ill-used him."

"3248. *Q.* Did you see his body after death?—*A.* No; I did not undress it, I saw him in his coffin. I saw that his knees were bruised. Before, he would not have a shirt on; afterwards, while he was lying in bed, after he came home, when he was sensible, he had the bed clothes over him; he did not object to that at all. I saw that his knees were bruised; but that we could easily understand a man in a weak state having those bruises."

Another witness, William Beach, discharged from the hospital for ill-using a patient, and appearing to be by no means favourable to the institution, says, in answer to the question:

"3303. *Q.* It has been stated to the Commissioners that it is the practice in the Asylum to put a stocking round the patients' throats when they are being dressed, to secure them. Did you ever see a stocking, or anything else, put tight round a patient's throat?—*A.* I never did."

The patient P. stated by Welsh to have been treated in this

Observations of the Governors.

this manner (3102), left the hospital cured on the 10th June 1852. He stated before the Bethlehem Sub-Committee, on being discharged, that "he had been very kindly treated in the hospital," and he made no complaint of any kind. Another attendant on leaving, recently, made a series of charges against the attendants in the basement for male patients; but amongst the whole of them there was no allusion whatever to a proceeding of this nature.

Under these circumstances the Governors are satisfied such a mode of treatment has never existed in the hospital, and when they consider the conduct and threat of the witness who makes the charge, and on whose evidence it chiefly rests, they feel assured it will not be regarded as established even to the limited extent stated.

Alleged Violence in Feeding Patients.

The Commisssioners report that there is "much reason to fear" the existence of a "violent and offensive mode in which food appears to have been forced upon some of those (patients) who obstinately refused to take it voluntarily." In order that there may be no misapprehension as to the meaning of the Commissioners, their own two descriptions of this alleged practice are here set out.

1. "It has been stated that there is a practice with some of these nurses, that in the event of a patient refusing food, not applying the stomach pump, but laying them down on their backs and kneeling on one arm with one knee, and on the other arm with the other knee, and lying down themselves, then endeavouring to open the mouth and force food down their throats while in that position." (423.)

2. "Did you ever hear such a statement as this: that nurses, sometimes, in order to force a patient to take food, would lay her upon her back upon the ground, sit astride upon her chest, and kneeling upon her arms force the food down her throat?" (675).*

The

* These questions were put in the course of examination, held on the 7th July, and as Mrs. Elinor W., who ostensibly furnishes the information, was not examined until the 10th July, it would appear that this witness was either privately examined on some occasion previously to the former date, or that the Commissioners have taken the evidence of some other witness, which does not appear.

Observations of the Governors.

The existence of these violent practices depend, like the alleged practice of "mopping," greatly on the evidence of Mrs. Elinor W., with the exception of that part which describes the "sitting astride upon the patient's chest," which is mere embellishment, no such expression being used by any witness. While the Governors express their astonishment at the facility of belief exhibited by the Commissioners in this and other incriminatory statements, they almost doubt the necessity of offering any serious answer to a charge, which, upon the face of it, is palpably improbable. The Commissioners may, however, rest assured that they will find, upon inquiry of any competent and practical person, that to feed a patient in the manner described is not only improbable, but is impossible. On reference to the evidence of the "trustworthy" witness, Mrs. Elinor W., it appears that she alleges she saw this violent process inflicted upon two patients, Miss H. W. and Mrs. S., adding, that "neither of them resisted;" that one "was very quiet;" and gives the following reason for at least two nurses exhibiting all this violence to a quiet and unresisting female. "I think they do it to feed the patients quickly, and not to take any 'pains over them.'" (1553.) In this, as in the case of Miss A. M., the Governors acquit this witness of intentional misrepresentation, indeed the inherent improbability of the tale is its own refutation, but they regret they cannot extend the same indulgence to a body of gentlemen holding an important public position when they lend the weight of their authority to countenance a statement so manifestly incredible.

The Governors submit that they have sufficiently shown from the evidence that the charges of ill-treatment in all these cases have not been substantiated, and they sincerely believe that, constituted and governed as Bethlehem Hospital is, it is impossible for any system of unkindness to be practised there without early detection.

About 170 patients who annually recover remain in the hospital a month in a convalescent state prior to their discharge; they have therefore better opportunities of ascertaining the treatment in the hospital than any Governor can have; all these are introduced to the Bethlehem Sub-Committee on leaving the hospital, and they are asked if they have been kindly treated, and the almost invariable answer is, that they have, and that they have no complaint of any kind to make, followed by expressions of the deepest thankfulness for the favours they have received. Many patients, indeed, not content with the verbal tender of thanks, send to

Observations of the Governors.

the Governors futher expressions of their gratitude in writing after their return home, and there is amongst the records of the hospital a large collection of these, of the most pleasing kind, which is at all times open to inspection. Whenever the reply of the patient on his discharge is such as to leave any impression that his treatment has not been satisfactory (which sometimes, although very rarely, happens), or that there is any cause of complaint existing in the hospital, an investigation is immediately instituted, and if requisite, a remedy applied.*

The hospital is also under the control of about 300 governors, who have a right at all times to visit it, and when doing so they frequently introduce friends, who inspect it most minutely. It has in a great measure, indeed, been accessible to general public inspection, as visiting orders have been given to all respectable persons requiring them, and arrangements have been made so that such orders could at all times be obtained without difficulty. It will not, therefore, be matter of surprise that an institution so prominent and so accessible as Bethlem is, should under such regulations be frequently visited, and this has been, indeed, the case to so great an extent as to keep it generally under the inspection of visitors during a considerable portion of the four days in every week on which visitors are admitted.

Such visiting is inconsistent with a system of ill-treatment, and the authorities of the hospital, conscious of this, have always invited visitors, and have requested them not only to examine with care every part of the establishment, but to enter in a book kept for that purpose, any remarks on the hospital they may think proper. In this manner many of the patients are visited by their friends, in addition to the very numerous visits to patients from their friends on the days set apart for that purpose.

The Governors court inspection, and will cheerfully lend their zealous assistance in the futherance of any open investigation that may be considered necessary; but as a body of gentlemen assiduously and gratuitously devoting a large portion of their time to the superintendence of the charity, and

* It is worthy of remark, that in none of the alleged cases of ill-treatment referred to by the Commissioners was any complaint made to the Governors, except that of (H. H), which was immediately investigated at great length; and since the inquiry by the Commissioners has closed the Governors have received communications from the friends of patients, expressive of their entire satisfaction with their treatment.

Observations of the Governors.

and being above the suspicion of having any interested motives, or that they can possibly have any other desire than for the perfect management of the institution, they feel it right to express their conviction, that if a mode of investigation similar to that adopted by the Commissioners in this case were to become general, it would discourage the supporters of numerous public charities, and would deeply injure many of those great institutions of benevolence which are universally regarded as the brightest ornaments of the land.

Visits to Patients by their Friends.

The following is the rule on this subject:—

"On the first and third Mondays in every month, with the exception of Christmas Day, New Year's day, Easter Monday, and Whit Monday; the relatives and friends of patients shall be allowed to see them between the hours of ten to twelve o'clock, but no visitor shall be permitted to see any patient if the medical officer be of opinion that the visit will be injurious to such patient, or otherwise inexpedient."

While it is thus seen that the rules of the hospital permit relatives and friends to visit patients once a fortnight, it nevertheless appears that in some instances permission has been refused, without medical authority, until one month had elapsed after admission, but as no complaint in this respect had been made to any of the authorities of the hospital, they cannot be fairly considered accountable for this unauthorized deviation from their rules. It is impossible to lay down any inflexible rules for visiting patients, as their mental condition may be such when the visiting day arrives as to render it absolutely necessary to prevent an interview, with the view of avoiding the injurious excitement that would, in all probability, ensue. It is almost impossible to impress upon relatives and friends the importance of abstaining from topics of exciting nature; and, notwithstanding every precaution, family details and domestic anxieties are the natural and almost unavoidable subjects of conversation.

Measures are under consideration as to the practicability of enabling visitors to see their relations and friends without being seen, when their condition may be such as to render an interview prejudicial to them.

Observations of the Governors.

The Bedding in the Basement.

The terms "basement" and "back basement" being used throughout the evidence as designating the storey of the building in which the wards of the worst classes of patients are situate, it is desirable, in order to prevent misconception, to observe, with respect to the basement generally, that as regards the general level of the adjoining airing grounds and public roads, it is a ground storey, being from one to four steps above that level. With respect to the back basement, it is merely so called to distinguish it locally from the front basement; the rooms and galleries of both look either into the airing grounds before named, or into the other equally open spaces on the same level with them. The entire of the front wards and galleries, and all the back, except a portion of the lowest one in each department, have boarded floors. The portions excepted have slate floors, being appropriated to those classes of patients whose infirmities are considered to render such arrangement advisable; but few patients are placed there, and those only during sleeping hours; in the day-time they are in the front galleries. The entire of the back basement is kept warmed and aired, by means of hot-water pipes passing along the slate flooring.

The Commissioners dwell considerably upon the fact that the bedding in this ward, appropriated to wet and dirty patients, consists of straw. Upon this subject the Governors would remark that the General Report of the Commissioners to the Lord Chancellor in 1844 contains these passages (p. 17): "Many lunatics are not only sickly, but are so filthy in their habits, that they nearly frustrate all attempts to keep them clean, and can only be allowed to sleep upon straw, or other bedding which may be thrown away or washed every day." And at p. 124, "a separate apartment is obviously required for that class of patients, a very numerous one in many lunatic asylums, whose state or conduct is such as to render them disgusting and offensive to others. Fatuous persons, or those who have sunk into the last stage of dementia, and who are insensible to the calls of nature, are of this description." The Governors likewise learn from one of their members, Dr. Webster, who has visited most of the foreign asylums, that in France, for instance (where the treatment of lunacy is of the highest order), the various attempts to find a substitute for straw as bedding for those patients

Observations of the Governors.

patients who are "insensible to the calls of nature," have often proved unsuccessful, and they have consequently reverted to straw as being the most cleanly, easily renewed, and therefore the most comfortable material for bedding, when properly arranged and provided with adequate covering. The Governors are thus fortified in their opinion, that for such patients (and it must be recollected that all the female inmates reported on were in this unhappy condition) fresh straw, with a sufficiency of warm clothing, constitutes a suitable bedding, notwithstanding the misrepresentation, by the ill-informed, to which the use of such a material is liable.

The beds in the portion of the building having slate floors were always prepared in the following manner:* A large supply of clean straw was first put into a crib or trough, upon a frame, some distance from the ground.† This straw was covered with a large thick blanket, well tucked in all round, on which the patient slept, and for covering there was as many blankets as were required to secure sufficient warmth. In order that the rooms in which these beds were might be freed from all offensive smells, the doors were kept wide open during the day, every visitor to the hospital had therefore the opportunity of seeing them; and indeed they have been pointed out as efficient beds, and readily kept clean, to thousands of visitors, including numerous magistrates and medical superintendents of other asylums, as well as medical men generally, and persons of distinction taking a deep interest in the proper treatment of the insane; notwithstanding which, not one word of disapproval or objection to them has ever been uttered. What is the best bed for a dirty patient is still a subject of dispute; various kinds are used in various institutions, and, in at least one large asylum under the charge of two medical superintendents, each has his peculiar bed, the superiority of which over all others he maintains without doubt or hesitation. It is believed that the Commissioners in Lunacy themselves are not agreed on this important point, and indeed if they were it would be their obvious duty to enforce its general adoption with all the authority they possess.

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* The straw of the beds have recently been inclosed in cases, with questionable advantage.

† The only exceptions are a few padded rooms, padded throughout for the safety and security of the patient.

Observations of the Governors. ——

The Governors entirely concur with the Commissioners in reprobating the practice of some patients, in consequence of their dirty habits, being put unnecessarily to bed between blankets without night clothes, as well as in the opinion that the existence of such a practice without the knowledge of the matron, or of the physicians, as stated in their evidence, is very reprehensible, and proves the necessity of those changes which the Governors have recently made. It has been a practice in the hospital for "dirty and suicidal" patients to sleep without night clothing; and assuming that the practice, however offensive it may appear, has been limited to such cases, it is felt that no non-medical person, knowing how easily life may be destroyed by a person determined on effecting that object, would lightly incur the heavy responsibility of directing a different arrangement without medical authority. It is not believed that any of the Commissioners, not medical men, would venture on such a course, neither would any of them who are medical, until they had ascertained the manner in which the patient's suicidal tendency was manifested.

If this practice have at all prevailed with non-suicidal patients, or unnecessarily with those who were suicidal, it is a proof of culpable negligence on the part of those concerned; and that the latter, at least, was the case is clear, since the matron, as soon as she was aware of the practice, ordered its discontinuance. Such a proceeding on her part, without the authority of the physicians, is marked rather by boldness than prudence; but since it obtained their approval afterwards, and was attended with no unfavourable results, it is obvious that the practice with those patients with whom it then prevailed was unnecessary, and consequently to be regretted.

Visiting at Night.

This is so unusual an exercise of supervision, and so far beyond the ordinary rules of visitation, that it required the direct sanction of the Legislature to authorize the Commissioners themselves and the magistrates appointed at quarter sessions, to visit and inspect any lunatic asylum within their jurisdiction at night; and their very sparing use of this delicate part of their authority is shown by the General Report of the Commissioners to the Lord Chancellor, in June 1847, when, although they inspected above 400 asylums, and saw 17,749 patients, they state that they have only exercised

Observations of the Governors.

exercised their power of visiting at night in one instance. The Governors are of opinion, liable as all systems of supervision to defects must be, that the general comfort of the patients may be effectually secured by the vigilance and care of the resident officers, and a well-regulated system of night-watching, checked by telltale clocks; while visiting by Governors in the night is not only open to great abuse, but might expose those who should attempt to carry it into execution to accusation by patients on their discharge, or by their friends and relations, of unwarrantable and indecorous intrusion into the sleeping-rooms of lunatic patients (especially females), if not to more serious imputations. The Report of the Commissioners admits that regulations have been made by the Governors for securing this supervision, and for the record of such visits; and if the observance of this rule appears "rare," and not so frequent as it ought to have been, the Governors believe they have taken such measures as will prevent such omissions in future. It is, however, certain, that unless the Governors assume the actual duties of the officers and servants, and live themselves in the wards of the hospital, that it is not impossible to ensure, in every instance, that strict observance of their rules, however explicit and judicious they may be, which can only flow from a zealous and conscientious discharge by the officers of their duties.

The very serious objections to the plan proposed by the Commissioners, of Governors visiting the wards without the presence of an attendant, are too manifest to require further notice; and without discussing the advantages, or otherwise, of such a system pursued by the Commissioners themselves, when visiting the comparatively few patients in a private asylum, the inapplicability of it to wards filled with some hundreds of patients, is at once apparent. Each Governor has the right of visiting every part of the hospital at all reasonable hours, attended by as many friends as he may think proper to introduce, and no application for orders of admission on the part of any stranger is ever unsuccessful.* The Secretary of State has also an unlimited power of giving visiting orders, which he frequently exercises. Visitors from every country are in the constant habit of inspecting the hospital in considerable numbers; and the visitors'

* Nearly 9,000 visits are annually made to patients by their friends and relatives.

Observations of the Governors.

visitors' book contains a series of unvarying testimony, especially by the late Earl of Shaftesbury, to the scrupulous cleanliness and good order of the building, the tranquillity and comfort of the patients, the kindness exhibited towards them, and the judicious arrangements made for their employment and amusement, to an extent seldom equalled, and still more rarely surpassed, in any institution of a similar description.

Infirmaries.

The want of infirmaries complained of by the Commissioners is not so extensive as they would represent. Schools, workhouses, and asylums of various descriptions, have generally some portion of the building specially appropriated for sick or infirm inmates, which are called infirmaries; but the whole of Bethlehem Hospital is an infirmary. The allegation that there is no place called an infirmary, is correct; but the important point is, whether or not there is separate and suitable accommodation for the sick? and the evidence shows that there are large airy separate rooms which are made available in case of unusual sickness or epidemic. The Commissioners do not perceive the obvious distinction, that in most lunatic asylums the patients generally sleep in considerable numbers in dormitories, and in such cases the necessity for a distinct infirmary is obvious; but this applies in only a minor degree to Bethlehem Hospital, where almost every patient is provided with a separate sleeping apartment, and if ill, is therefore treated in his own room. Many insane persons, however infirm, cannot be admitted into an infirmary, such as the noisy and violent. That there are not any particular portions of the building especially appropriated to infirmaries, is, however, to be attributed rather to circumstances than to any deliberate wish or intention of the Governors. When the building was enlarged, in 1838, a place was set apart in each wing as an infirmary, namely, one for each sex; but as these rooms were somewhat inconvenient for such purposes, and have been differently appropriated (there being, indeed, more suitable rooms in other parts of the hospital for such cases), the Governors resolved to construct additional accommodation for the sick, and the necessary measures for that purpose were commenced long before the report of the Commissioners was received, and the buildings are now nearly completed.

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Observations of the Governors.

The Commissioners say in their report: "Among the extensive additions to the building, which were commenced so long ago as the year 1838, a distinct infirmary, or sick ward, for each sex, with nurses' rooms attached, formed part of the plan publicly announced, although, for what reason does not appear, this has not to the present time been carried out."

This is inaccurate. Every part of the plans for the enlargement of the hospital, proposed in 1838 by Mr. Sydney Smirke, the hospital architect, including sick wards for each sex, were carried out. This, as well as the numerous other errors which pervade the report, is no doubt attributable to the mode in which they have obtained their information and conducted the inquiry.

Sub-Committee.

The Commissioners report their opinion that the Bethlehem Sub-Committee is of "too fluctuating and uncertain a character." The routine duties of admitting and discharging patients, which is done always under the advice of the medical officers, of going round the house, inspecting provisions, and auditing petty disbursements, are not of a character likely to induce a large weekly assemblage of Governors, particularly as an early hour of meeting is fixed to suit the convenience of those relations and friends who bring or who attend to remove patients. Reference to the Minute Book, however, shows that the attendance is on the average satisfactory, and fully sufficient for the duties, and it is to be recollected, as stated by the Commissioners, that every act of this sub-committee is reported regularly to the general monthly committee of 42 Governors, which is much more fully attended, and by whom the proceedings of the sub-committee are required to be confirmed. It may not be improper here to remark, that during the last four years the average number of meetings of Governors for the purpose of conducting the affairs of the hospital was 178, the courts and general committees being presided over, with scarcely an exception, by the president; and all sub-committees, with equal regularity, by the treasurer. The great extent of business transacted at these numerous meetings can only be ascertained by a careful examination of the voluminous records of the hospitals, which are at all times open to the inspection of Governors; and here the Governors cannot but express their opinion that such a complaint comes with an

Observations of the Governors.

an indifferent grace from a salaried Commission, when it is seen from their own records that their attendances upon this important investigation were not only of a "fluctuating and uncertain character," but that no Commissioner heard much more than half of the evidence, and that the nine meetings held upon this inquiry were presided over by three different chairmen.

Attendants.

The charge of cruelty, as already stated, is one to which hospitals and asylums for the insane are peculiarly exposed, easily made, and hard to disprove. Relatives, especially if inexperienced in this disorder, and from their habits and education not very competent to estimate the value of treatment which does not exhibit the usual means and appliances of sick rooms and ordinary indisposition, may occasionally conceive that a lunatic once within the walls of an asylum requires no further control, and that every degree of freedom ought to be permitted, and mistake those controlling or precautionary measures which sometimes constitute the main elements of cure for cruelty and coercion. Any act of harshness in an attendant is a very great offence, and which, if proved, is invariably visited at Bethlehem with dismissal. At the same time due regard must be made for the trying and dangerous nature of their duties, and for the lives of the patients themselves, as well as of the attendants, which requires that provision must be made against those violent outbreaks to which some lunatics are peculiarly liable. This is truly described by the Commissioners in their general report (1844): "Wherever a considerable number of lunatics are assembled there are found some who are subject to paroxysms of violent excitement, during which they are apt to assault other patients, or any persons within their reach. Others, who are more dangerous, suddenly, or without any previous sign of mischievous intention, inflict serious injuries on slight provocation, or without any apparent motive; or they are prone to set fire to houses, and display various destructive and malicious propensities." "Those persons would be sources of perpetual danger and alarm, and would sometimes occasion serious calamities if they were left at large in the midst of other patients, unless carefully watched. It is desirable for the complete security of the rest, to keep such dangerous patients, as far as practicable, in one or more separate divisions, where they may be

Observations of the Governors.

be surrounded by a number of vigilant and experienced attendants." The Commissioners then proceed to detail several violent and sanguinary attacks, prefacing the account with the following paragraph, to which they attach the significant marginal note, of "Safety of attendants endangered by absence of restraint." "Attention to the safety and comfort of attendants is a very important part of the duties of proprietors of asylums for the insane. It is a great object to secure the services of respectable and superior persons as attendants and nurses; but if such persons are to be induced to take charge of the insane, it is necessary to assure them that they are not to lead a life of ceaseless anxiety, and to be in continual apprehension of violence." Violence, however, is not the only trying circumstance to which the attendants and nurses are exposed in the discharge of their duties, which are often aggravated when, to use the language of the Commissioners, "The state and condition of the patients is such as to render them disgusting and offensive to others."—(p. 150.)

The Governors concur in the accuracy of these statements, and feel that where many such patients are necessarily collected together, a blow may be given by a patient, and a bruise occasioned, sometimes by his own act, even with the greatest vigilance on the part of attendants, and, indeed, it is a subject of surprise and congratulation, not that there are no occurrences of this kind in large asylums for the insane, but that they are so exceedingly rare.

Physicians and Visiting Physicians.

Much of what appears in the report as peculiarly objectionable to the Commissioners, arises from a misapprehension of their own. Notwithstanding they are furnished at the outset with a copy of the rules defining the duties of each officer, they persist in designating the physicians "Visiting Physicians," and assigning to them those functions only which such an office entails, and ascribe to the resident apothecary powers and responsibilities with which the evidence proves he was never invested.

The distinction between the duties of a "physician" and "visiting physician," though nominal to an unprofessional person, are most important, and ought to have been perfectly familiar to the professional members of the Commission.

Observations of the Governors.

sion. A physician has the entire charge of a patient, prescribes for him, and is solely responsible for his treatment from the time of admission to discharge, devolving upon others, whether apothecary or nurse, those minor details only which serve to carry his orders into execution. "A visiting physician," on the contrary, is not and cannot be expected to be wholly responsible for the treatment of a patient; his duty is to supervise the general condition of the establishment, and when necessary, to direct the resident medical officer, who, under such a system, is primarily charged with, and responsible for the medical treatment.

There never was any such officer as visiting physician at Bethlehem Hospital.

This distinction, broad and clear, is entirely ignored by the Commissioners, who proceed to draw erroneous conclusions from erroneous premises.

Treasurer.

With a pertinacity of reiteration, which would be objectionable even if accurate, they repeat no fewer than seven times a charge against the treasurer, that he has of his own authority transferred the classification and employment of the female patients from the resident medical officer to the matron.

The rules show that this view is not correct, and the evidence disproves the report.

The rules show that the classification and employment of patients are amongst the most important duties of the physicians, who in their evidence state distinctly and positively that their authority on these subjects is unquestionable and paramount. The apothecary undoubtedly in the intervals of the physician's daily visits, ("in their absence," as the rule states,) is to regulate the classification and employment, but this is always subject and subordinate to the confirmation of the physicians. The propriety of a matron regulating the employment and amusements of the female patients, can hardly be doubted by any impartial person, who would at once admit that a medical officer could hardly be less usefully or properly employed than in the superintending the laundry, or the cutting out or preparation of linen in the work-room. The treasurer (who as a visiting justice of the Surrey County Lunatic Asylum, has had great experience in such matters) by confirming the matron in her peculiar duty

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(as defined in Rule 7)* secured an increase of employment, greater comfort, and quiet in the wards, and consequently increased advantages to the patients. The result of this course, so much condemned, is entirely overlooked in the assertion of the supremacy of medical authority. Observations of the Governors.

The Governors cannot but remark here upon the inconsistent nature of the complaints of the Commissioners, and the apparent impossibility of complying with the requisitions. One of the chief defects alleged to exist in the management of the hospital is, that the superintendence of the Governors is of "too formal a nature," and their investigation into the practical working of the institution insufficient; but no sooner do the superintendence and investigation of the treasurer (not only as the organ of the Bethlehem Sub-Committee), but, as they state, "the principal authority at the hospital," assume a less formal and insufficient character, and become more practical and searching, than the Commissioners immediately denounce his proceedings as an interference with the authority of the resident medical officer.

The Governors entertain no doubt whatever of the propriety of the course the treasurer pursued, and which is another proof of the zeal with which he discharges his important duties.

Present State of Bethlehem Hospital.

The Governors preface their observations on this subject with an extract from what the Commissioners correctly designate the "elaborate report" of Mr. Francis Offley Martin, one of the Commissioners for inquiring into Charities, 32d Rep. Part 6 (30th June 1837).

"To a casual visiter, unaccustomed to the sight of lunatics, and perhaps impressed with an idea that great personal coercion is indispensable in an asylum, few sights can be more gratifying than the present condition of the interior of Bethlehem. The scrupulous cleanliness which prevails throughout the house, the decent attire of the patients, and the unexpectedly small number of patients under restraint (sometimes

* The matron is required "to distribute the patients in their sleeping apartments, so that each female attendant may have a proper number of those who are fit to work to assist her, and to employ such of the patients at their needle, or otherwise, as are capable."

Observations of the Governors.

(sometimes not one person throughout the building), lead him, not unnaturally, to conclude that the management of lunatics had here attained perfection, while the quiet and decent demeanour of the inmates might almost make him doubt that he is really within the walls of a madhouse. However, on an attentive consideration of the subject, and on comparison of Bethlehem with other institutions of the kind, it is submitted that there is still room for considerable improvement."

While the Governors refer to the highly favourable opinion expressed in the first part of the above extract, they at once admit the justice of the concluding remark of the Commissioner; indeed there are very few establishments which do not in time present room for improvement.

The learned Commissioner makes due allowance for many of the defects he points out as attributable to the site and construction of the building, and then proceeds with a degree of discrimination, calmness and impartiality, which should be exhibited on such occasions, to point out those defects which presented themselves to his attention. It is a proof of the anxiety of the Governors to profit by any suggestions, that not only have most of the improvements suggested by Mr. Commissioner Martin been adopted, but many other ameliorations introduced of a very important and costly character.

Restraint.

Although Mr. Commissioner Martin speaks with approbation of the small number of patients under restraint at the time of his investigation (1836), being between three and four per cent., that amount has, by the unceasing attention of the Governors, been gradually reduced to such a fractional minimum that it can now hardly be said to exist.

While fully appreciating the superiority and humanity of the non-restraint system (a mode of treatment which has been looked upon with some disfavour by the Metropolitan Commissioners in Lunacy), it is not unattended with liabilities, which the report shows may be made use of unfairly and ungenerously against those who advocate and adopt it.

The "non-restraint system" is not pursued because no control over lunatic patients is necessary, but because it is believed that mechanical restraint is liable to abuse, in being applied to more patients, and for a longer time than the necessity

Observations of the Governors.

necessity of the respective cases requires, and because all the necessary results can be attained by better classification, and more sedulous supervision by an increased number of attendants.

At the same time, it is not to be denied that the risk of accidents to attendants, and the necessity of occasional manual control for particular patients, is increased; and in a hospital like Bethlehem, where most of the patients admitted are recent cases, and a large proportion of them dangerous both to themselves and others from the violent paroxysm of mania under which they are labouring, the personal safety of the attendants is frequently in imminent peril by sudden and violent attacks made upon them. Their own preservation, and that of the other patients, require that such attacks should be promptly suppressed. A struggle must often ensue, or the excited patient be allowed to wreak his fury on everything within his reach; he is at length overpowered, and security restored, leaving evidence of the struggle on both patient and attendants; but the irritation of the former is, perhaps, unsubdued, and this necessary repression of violence is not unnaturally detailed to his relations and friends on their next visit, as the unprovoked cruelty of the attendants.

This is the price at which the abolition of mechanical restraint is purchased. The advantages so far counterbalance the disadvantages, and even the obloquy which result from those occasional exhibitions of violence which are inseparable from the non-restraint system, that the Governors are quite prepared to encounter both, rather than revert to those means of coercion which, while it might conduce to convenience, would at the same time impose great hardship on so many of the patients confided to their protection.

Employment.

In proportion as restraint has been diminished at Bethlehem so have the means of employment been increased. A large range of commodious workshops were constructed several years ago, and the last Annual Report attests the great extent and variety of the employments for the amusement and occupation of the patients. For the males there are full and well-devised means of occupation, as gardeners, carpenters, engineers, smiths, masons, bricklayers, plumbers, tailors, and shoemakers, and many others; while the females

Observations of the Governors.

are occupied in household work, the laundry, dressmaking, lacemaking, and fancy work, such as crochet and worsted work. Ample provision for amusement is also made; a well-selected library, with various periodicals, a piano, and other instruments, a billiard table, bagatelle boards, chess, and draughts, are provided for the men, while the females have also a separate library, a piano, chess and draught boards, materials for writing and drawing, as well as for different descriptions of fancy work; and the last annual return already referred to, exhibited the gratifying statement that no less than 72 per cent. of the patients were employed by the means above specified,

With reference to the religious exercises and instruction of the patients, the chapel has been enlarged to double its former extent; an organ has been provided, and above one-third of the patients regularly attend the services, which, when the peculiar and recent character of their disorder is considered, must be admitted to be an unusually large proportion, as well as satisfactory evidence of the generally tranquil state in which so large a number is maintained.

At the period Mr. Commissioner Martin wrote, the incurable patients were only partly maintained at the expense of the hospital, the deficiency, about 7*s.* per week per head, being defrayed by the friends of the patients. Five years ago the Governors relieved the friends from this charge, and the expenses of the incurable establishment is now wholly defrayed out of the funds of the hospital.

Case Books and Medical Records.

The Commissioners, referring to the directions of the Governors for the keeping of the Case Books, recognise "the explicit terms of the judicious regulations made by them for this purpose."

These regulations were prepared by the Governors, under the advice of competent medical authority, and it is only medical men who can properly estimate the value or insufficiency of recorded cases. The Governors have kept over them the only check in their power. On the week following the discharge of any patient, they required the case of that patient, as entered, to be laid before them, signed by one of the physicians, as a proof of his approval thereof; and this has always been done. If the physicians were not satisfied with the mode in which the other cases were kept, they should

Observations of the Governors.

should at least have reported the circumstance, so that a remedy might have been provided. The physicians, in their remarks on the Commissioners' report, have not adverted to the Case Books, nor to the charge of the Commissioners, that no proper record of the medicine administered to each patient has been kept. Under these circumstances, combined with the fact that Dr. Wood has not forwarded to the Governors any remarks whatever, they are unable to offer any observations on the subject, further than to say that a prescription book has, of course, always been kept, and that in it numerous entries have from time to time been made, many of which are in the handwriting of Sir Alexander Morison. It is obvious that Governors, not medical men, cannot be held responsible for the state of this record.

Medical Pupils.

The Governors have long been desirous of rendering Bethlehem Hospital more extensively useful as a means of imparting information respecting the nature of insanity, and the means of curing mental diseases by inducing pupils to attend, and form a medical school. The physicians were at liberty to introduce into Bethlehem Hospital a limited number of pupils, and in 1843 the Governors agreed to pay to the physicians the fees of four additional pupils, which payments were continued during several years.

In 1848 the hospital was made available for pupils, almost without limitation, by the adoption of the following rules, which are still in force.

1st. That pupils be admitted to attend the hospital practice at Bethlem during two separate terms in every year, the first commencing in October and terminating in March; the second commencing in April and terminating in July.

2d. That as soon as practicable, a course of lectures be given in the second term, principally having reference to, and being illustrated by, the cases under consideration at the time.

3d. That pupils be permitted to enter for both terms, or either of them, or for attendance on lectures only.

4th. That each pupil be required to pay a fee, not exceeding three guineas, for attendance during each

Observations of the Governors.

term, or not exceeding one guinea for attendance on lectures only.

5th. That each pupil be entitled to attend and, as far as possible, have previous notice of all *post-mortem* examinations made in the hospital during his pupilage.

6th. That the attendance of pupils be at such hours daily as shall be convenient to the medical officers of the establishment, and at the same time least likely to interfere with the duties of those who are students in other hospitals.

7th. That the lectures be given from time to time as shall hereafter be arranged.

The number of pupils attending under these regulations has not hitherto been large, but the Governors have reason to believe that it will increase, and that with a permanent resident physician, having no other professional occupation, a numerous class of highly educated pupils will gladly avail themselves of the facilities afforded in Bethlehem Hospital of obtaining instruction in this important branch of medical science, acting as a stimulus to the medical officers, and at the same time, securing by their presence and observation the attainment of that kind and judicious system of treatment for which the Governors have always been solicitous.

Remarks of the Physician and Matron.

The Governors are desirous of abstaining from any lengthened reference to the remarks on the Report of the Commissioners in Lunacy, received from the physicians and the matron, and entered in the Appendix; at the same time they feel it necessary to express their regret that the physicians have not favoured them with more extensive information respecting the particular cases to which the Commissioners in Lunacy advert; and whilst they entirely concur with Dr. Monro, that it was the duty of the Physicians of Bethlehem "to exercise a large and superintending control over the medical and general management of the hospital," and that the carrying out of "the details and all minutiæ" was left with "officers working under them;" they cannot conceive how any physician could exercise so large a control, or could superintend and direct subordinate officers without giving that amount of attention to minutiæ and details absolutely requisite

Observations of the Governors.

requisite to make himself acquainted with, at least, all the ordinary proceedings in the institution under his care.

The Governors are sorry to learn, from Dr. Monro's concluding remarks, that he has not entertained this view of his duties, proving the propriety of those changes in the medical staff that have recently been made.

Changes in the Medical Staff.

The letter of the Governors, transmitted to the physicians under date of the 7th of May 1852, sufficiently explain the reasons which actuated them in making those recent changes in the medical staff, which coincide with the recommendation of the Commissioners.

A resident physician * has been appointed, on whom has devolved those duties hitherto assigned to the physicians who were non-resident. This officer is entrusted with the paramount control of the treatment of the patients, and is responsible for the entire internal management of the institution.

A resident apothecary † has been appointed in the room of Dr. Wood, who resigned his office in July last, and a matron has been appointed in the place of Mrs. Hunter, also resigned.

Bridewell Hospital,
29 November 1852.

P. Laurie, President.
J. E. Johnson, Treasurer.

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* Dr. W. C Hood, formerly resident medical officer in the Middlesex County Lunatic Asylum at Colney Hatch.

† Mr. Helps, M. R. C. S., formerly a pupil of the hospital.

APPENDIX.

Appendix (A.)

Documents and Letters.

COPIES of all Documents and Letters that have been received respecting the subject of the Report of the Commissioners in Lunacy on Bethlehem Hospital, together with Copies of all Replies that have been sent, of all Resolutions that have been passed, and of all Directions that have been given.

On the 25th of April 1851, the Treasurer laid before the Bethlehem Sub-Committee, present, the Treasurer, Henry Kemble, Esq., P. N. Laurie, Esq., P. Green, Esq., H. H. Penny, Esq., R. Baggally, Esq., John Pepys, Esq., James Anderton, Esq., together with the Physicians and the Apothecary, a letter from Mr. T. J. H., of which the following is a copy:—

"H—— Street, Walworth,
"21 April 1851.

"Worshipful Sir,

"Knowing from my boyhood your kindness and urbanity, and your ever ready wish to redress abuse or wrong in any shape inflicted, more particularly in any establishment in which you have any control, I think I am only doing my duty as a parent in the first place, and in the second, to the heads of an establishment, who, I am sure, would never tolerate cruelty in any shape to be practised towards a poor lunatic, and thirdly, to the public.

"I now, Sir, bring to your notice a case of either cruelty or wanton neglect, in which my poor girl (our only child) has fallen a sacrifice, caused by or through the neglect of one of the female nurses or keepers belonging to Bethlem Hospital. Now, Sir, for the facts, which can be verified by many respectable witnesses.

"On Friday, April 4th, my daughter was admitted a patient into Bethlehem Hospital; on leaving her, I was informed I might call in eight or nine days and enquire how she was; I called on April 12th, which was eight days; I saw both the doctor and the nurse, and was told she was somewhat better, that she took her food better; I went away satisfied. On the following Thursday I could not rest, something seemed to haunt my mind my daughter was worse; I consequently wrote a note to Dr. Wood stating my fears, and begging of him if any bad symptoms appeared, to let me know, that her mother might be with her; Dr. Wood was kind enough to forward me a note in return to mine, informing me bad symptoms had appeared, and that my poor girl was discharged; me and her mother immediately went

to

to the hospital, saw Dr. Wood, who rung for my daughter; she was brought up to us. What our feelings were I hardly can tell; my poor girl could not stand, and was a complete idiot. But, Sir, what was my horror when called upstairs by her mother and others, when they had undressed her to put her to bed; her body, her legs, and her arms has above 20 wounds and lacerations on them, two also on her face; her bones ready to start through the skin, how caused or inflicted no one who has seen her but wish and desire to know. Her medical attendant can speak as to her condition, both before her admission and since her return. And if, Sir Peter, you would condescend to pay my humble abode a visit, you would then see I have not made the case one iota worse than it really is; in fact my pen but feebly tells the sad tale. I have no doubt ere these lines reach you, my poor girl will be in her coffin, but that shall not prevent your satisfying yourself as to the truth of my statement.

"Permit me, &c.

"To Sir Peter Laurie." (signed) "*T. J. H.*"

This patient was admitted into the hospital in a very feeble state of health on the 4th of April 1851. She was removed on the 18th, having become paralytic, and died on the 21st of the same month.

The treasurer reported, that on hearing the complaint of Mr. H., he had caused the body of the deceased to be examined by Sir Alexander Morison and Mr. Lawrence, who had furnished him with written certificates respecting its state; and he had since received a further written certificate, as to the state of the body, from Mr. Frederick Augustus Crisp, and Mr. Charles Taylor (the medical attendants of Mr. H.), with Dr. Wood, the apothecary of the hospital, who had together examined the body, and made a *post mortem* examination.

The following are copies of these certificates:—

"Bridewell Hospital, 22 April 1851, One o'clock, p.m.

"By desire of the Treasurer of Bridewell and Bethlem Hospitals, I have just examined the body of H. H., late a patient in Bethlem Hospital; I found several superficial bruises on different parts of her body, and redness and tendency to excoriation about the nates, none of them at all connected with the cause of her death, which was occasioned by general paralysis. The bruises I consider to be accidental, and in no way to be attributed to want of care and kindness.

"*Alex. Morison*, M.D."

"Dear Sir, "Whitehall Place, 22 April 1851.

"I have inspected the body of the young woman lately discharged from Bethlehem, now lying at H—— Street, Walworth, and could see nothing leading to the conclusion or even the suspicion that she had met with ill-usage before death. There had been no open sore at the time of death. The buttocks were red and slightly excoriated

Documents and Letters.

excoriated from having been wetted with urine, as generally happens in dirty patients, and the hips were in a nearly similar state, the bones having become very prominent in consequence of the patient's considerable emaciation, and the skin having consequently been fretted by the position of the body, and probably by the restlessness of the patient. There were four or five brownish and quite dry marks, where the skin had been probably excoriated, principally on the legs, and there was a very faint bruise mark near one of them. The surrounding skin in all these situations was of its natural pale colour; such appearances, and probably to a greater extent, would almost inevitably be found on the body of a patient who had been in a violent state for two or three weeks before death.

"I remain, &c.

"J. E. Johnson, Esq." (signed) "*Wm. Lawrence.*"

"23 April 1851.

"EXAMINATION of the Body of *Hannah H.*

"BODY emaciated, some superficial abrasions on the surface of the lower extremities, probably owing to scratching or picking of the skin, slight ecchymosis under back part of scalp, a small chronic abscess in the integument of the right side of head, apparently connected with an old wound, the scar of which was obvious, but must have been healed some months.

"On removing the calvarium, the arachnoid was found universally opaque, the pia mater loaded with serum, the ventricles considerably distended with fluid, capable of holding from two to three ounces each; nothing further morbid observed in the brain, which was of average firmness; some fluid remained in the base of the skull after the brain was removed; the lungs were healthy; some old adhesions existed in the left pleura; heart rather flabby, abdominal viscera healthy.

"We are of opinion that the death of the deceased was clearly referable to the disease observed within the skull, which had existed some months, and there was no evidence that she had sustained any injury which could in any way have hastened her death.

"*Wm. Wood*, M.D., Licentiate of the Royal College of Physicians.
Frederick Augustus Crisp, M. R. C. S. E. and L. A. C.
Charles Taylor, M. R. C. S. and L. A. C."

The treasurer further reported that he had informed Mr. H. that his complaint would be investigated this day (25th April 1851), and had requested him to attend with such witnesses as he might wish should be heard in the investigation.

Mr. H. attending, was heard at considerable length; after which, six witnesses whom he called, were respectively heard.

Dr. Wood, the matron, and all the attendants in the gallery which the patient occupied, and who received her on admission, were also severally examined, and the certificates of the several medical gentlemen above mentioned were read; after which it was resolved—

"That

"That the Sub-Committee are of opinion that the charge of cruelty against the attendants has not been made out. That the appearances which the body presented must almost inevitably be found on the body of a patient who had been in a violent state for two or three weeks before death."

The slight scratch on one side of the face was accounted for, and had been reported to the medical officers and matron immediately it occurred.

Slight bruises were known to exist on the body of the patient during her stay in the hospital; but as they were exceedingly slight they were considered by the attendants not to be of sufficient importance to be reported to the medical officers or matron. The Sub-Committee thereupon directed that every bruise or wound, however slight, should in all cases be in future reported.

Mr. H. then thanked the Sub-Committee for the great attention they had paid to the investigation, whereupon the inquiry terminated.

On the 12th of May 1852, the treasurer laid before the general committee for conducting the affairs of the hospitals of Bridewell and Bethlem the following letters he had received from Mr. H., with the replies he had directed to be sent to each:—

"Sir, "H—— Street, Walworth, 5 May 1851.

"On Friday, April 25, you informed me I should be furnished with any document or writing I might wish to have concerning the inquiry in my poor daughter's case.

"I now, Sir, crave that permission, which is, that I may be furnished with my letter (or a copy of it) to Sir Peter Laurie; likewise a copy of the testimony of each witness which you have in writing; also Dr. Wood's letter to me, which is in your possession.

"If, Sir, you will inform me when, where, and how, I may obtain my request, I shall feel it my duty to attend your commands.

"I am, &c.

"To John Johnson, Esq., (signed) "*T. J. H.*"
Bridewell Hospital."

"Sir, "Bridewell Hospital, 7 May 1851.

"I am directed by the Treasurer of the Bridewell and Bethlehem Hospitals to forward to you the enclosed papers, which are the copies of the medical reports he promised you on the 25th ultimo, together with Dr. Wood's note, of the 18th April last to yourself.

"I am, &c.

"Mr. T. J. H., (signed) "*B. Welton.*"
H—— Street, Walworth."

"Sir, "H —— Street, Walworth, 8 May 1851.

"In accordance with your promise that I should have any documents I wished, I wrote to you on Monday last to the effect 'That I might be furnished with a copy of my letter to Sir P. Laurie, likewise

Documents and Letters.

wise Dr. Wood's letter to me (which you have), and also a copy of the evidence of all the witnesses.'

"Now, Sir, I must ackowledge I feel greatly surprised I have received no answer to my letter of that date; the reasons rest with your worthy self; I have merely asked for what you promised and what I consider only an act of justice and my right. An early answer will greatly oblige, Sir,

"Yours, &c.

"To J. Johnson, Esq. (signed) "*T. J. H.*"
Bridewell Hospital."

"Sir, "H—— Street, Walworth, 8 May 1851.

"I HAVE to acknowledge the receipt of only a part of what I asked you to furnish me with (that is, Dr. Wood's letter); I likewise thank you for the copies of the medical certificates.

"But, Sir, what I asked you to furnish me with was, not only Dr. Wood's letter, but a copy of my letter to Sir P. Laurie, and a copy of the evidence of the witnesses examined.

"Now, Sir, you distinctly told me I should have any writings or documents I might wish. Sir, I wrote you my wish as above in a plain (and I trust in a respectful manner), to which you tamper with a parent's feelings by sending me (after three days' delay) only one of my three requests, and say nothing of the other two. You assign no reason why you withhold them from me. If, Sir, I am to have justice, in God's name let me have it. If I have not wealth on my side I have the naked truth, and the public to fairly weigh my case; I have likewise abundance of most respectable evidence to prove my statement.

"Hitherto, Sir, I have refrained from giving any publicity to the affair, and whatever may have appeared in the public journals has not been my doings in any way, though I have had many applications to that effect.

"But, Sir, the denying me what I have asked of you, that which I consider my right (the evidence of the witnesses) has caused a very different feeling in my mind concerning the whole affair.

"*N.B.*—I should feel greatly obliged by your informing me whether you will furnish me with a copy of the evidence of the witnesses.

"I am, &c.

"To J. E. Johnson, Esq." (signed) "*T. J. H.*"

"Sir, "Bridewell Hospital, 9 May 1851.

"I AM directed by the Treasurer to inform you that he will, on Monday next, submit your two letters, of the 8th instant, to the consideration of the Committee of Governors, by whom the affairs of the Bridewell and Bethlem Hospitals are conducted.

"I am, &c.

"Mr. T. J. H., (signed) "*B. Welton.*"
H—— Street, Walworth."

The

Documents and Letters.

The Committee, after considering these letters, resolved,

1st. That this Committee approve of the course pursued by the treasurer; and with the consent of the President, Sir Peter Laurie, readily comply with Mr. H.'s request to be immediately furnished with a copy of his letter to the President, of the 21st of April last.

2d. That no complete notes of the evidence of the several witnesses examined at Bethlem Hospital on the 25th of April last were taken, but if Mr. H. have further evidence to offer, or be desirous of having his case re-heard, the Committee will immediately afford him an opportunity, when he will be at liberty to take any notes he may think proper.

Copies of these resolutions were forwarded to Mr. H. on the 12th of May 1851, with the following letter:—

"Sir, "Bridewell Hospital, 12 May 1851.

"I AM directed to forward you the enclosed minute of the Committee of Governors, held this day, together with a copy of your letter to Sir Peter Laurie, the President, of the 21st of April last.

"I am, &c.

"Mr. T. J. H., (signed) "*B. Welton.*"
H—— Street, Walworth."

On Friday, 16 May 1851, the treasurer laid before the Bethlehem Sub-Committee another letter he had received from Mr. Hyson, with the reply he had directed to be sent, as follows:—

"Sir, "H——Street, Walworth, 13 May 1851.

"YOU have my sincere thanks for what you forwarded me by post on the 12th (yesterday).

"In answer to your last paragraph of the resolutions, 'That no complete notes of the evidence was taken on the 25th April,' there must be some mistake on your part. I most respectfully beg to inform you that not only your worthy self wrote down what each witness stated, but the gentleman on my right hand (Mr. Welton, I believe); that we are all ready to prove.

"Now, Sir, it is my sincere wish to have another interview with the Board of Governors. I only wish for what is just; nothing more; and I fully believe, or hope so, my conduct throughout this painful business has been nothing but strictly proper.

"If, Sir, you will inform me when an interview will be granted me, I shall feel it my duty to attend your commands.

"I am, Sir,

"To J. E. Johnson, Esq." (signed) "*T. J. H.*"

"Sir, "Bridewell Hospital, 15 May 1851.

"I AM desired by the treasurer to inform you that he found your letter of the 13th instant on his return from the country late last evening, and that he will lay it before the Committee of Governors, which will meet to-morrow at Bethlem Hospital.

"I am, &c.

"Mr. T. J. H., (signed) "*B. Welton.*"
H—— Street, Walworth."

Whereupon

Documents and Letters.

Whereupon it was resolved that Friday, the 23d instant, at 12 o'clock, should be fixed for the further attendance of Mr. H., to whom the following letter was immediately sent:—

"Sir, "Bridewell Hospital, 16 May 1851.

"The treasurer having this day laid before the Sub-Committee of Governors your letter of the 13th of May instant, in which you state that it is your wish to have another interview with the Governors, I am directed to acquaint you that the Sub-Committee are ready to comply with your wish, and will see you at Bethlehem Hospital on Friday next, the 23d of May, at 12 o'clock precisely.

"I am, &c.

"Mr. T. J. H., (signed) "*B. Welton.*"
H—— Street, Walworth."

It is right to observe here that Mr. H. is in error in his statement respecting the notes that were taken during the investigation on the 25th of April. The evidence of the witnesses in support of the complaint was taken at considerable length, but that of the other witnesses was taken very shortly, the general impression being that the case had failed.

On Friday, the 23d May 1851, the treasurer submitted to the Bethlehem Sub-Committee a further letter from Mr. H., to which a reply was directed to be sent.

The letter and the reply are as follows:—

"Sir, "H—— Street, Walworth, 22 May 1851.

"In answer to your letter of the 16th instant, I am sorry to inform you my health is such, owing to continued anxiety in this affair, and acting under advice, I feel myself unable to the task to-morrow.

"At the same time, I must beg the right (with your kind permission) to reserve to myself a future day to bring my case before your 'honourable Board.'

"Permit me to say I will give you sufficient notice of my ability so to bring it forward.

"A line in answer will greatly oblige.

"I am, &c.

"To J. E. Johnson, Esq." (signed) "*T. J. H.*"

"Sir, "Bridewell Hospital, 23 May 1851.

"I am requested to inform you, in reply to your letter of yesterday, addressed to the treasurer, that the Governors, assembled at Bethlehem Hospital this day, are sorry to hear of your indisposition. They will appoint another day for an interview with you, when they hear you are prepared to attend.

"I am, &c.

"Mr. T. J. H., (signed) "*B. Welton.*"
H—— Street, Walworth."

With a view of completing the correspondence with Mr. H., a letter received from him at a much later period, with the reply that was directed to be sent, are here given as follows:—

"Lower Kennington Green,
"Gentlemen, "28 August 1852.

"I HAVE taken the liberty to address you on a subject to me most painful, Bethlehem Hospital.

"It cannot be denied I, in the first instance, took the trouble and expense of waiting on Sir Peter Laurie, and informed him the true state of the case. Feeling assured of Sir Peter's love of justice, I am sure he never thought the system so bad, or he never would have wished to put off the re-hearing for three weeks, seeing that in that time I might have lost my witnesses (they being entire strangers to me); consequently my communicating to the Commission in Lunacy a system of treatment I am sure no one Governor of Bethlehem Hospital would tolerate for one moment.

"The perusal of the 'Report' must convince you, Gentlemen, the great trouble and expense I have been put to in furnishing my share of it; besides of an expenditure of upwards of 30 *l.* in money, I was, through anxiety and broken rest, thrown on a bed of sickness for seven weeks, and being only a poor man it has nearly ruined me.

"Having, Gentlemen, with reluctance on my own part, but by the persuasion of several gentlemen, laid the bare facts before your 'honourable Board' (and which can be verified), I beg to throw myself and my case into your hands, hoping you may deem me worthy your kind consideration, and deserving some remuneration in bringing to your knowledge many facts which never would have come out had it not been for my untiring perseverance.

"Hoping, Gentlemen, you may deem this worthy your favourable answer, allow me to subscribe myself,

"Yours, &c.
(signed) "*Thomas Joseph H.*"

"To the Governors of
Bridewell and Bethlem Hospitals."

"Sir, "30 August 1852.

"I AM requested by the committee of Governors of Bethlem Hospital to acknowledge the receipt of your letter of the 28th instant, and to inform you that they are at all times thankful for any information that may assist them in placing the hospital in the most efficient state for the important purposes for which it was founded; at the same time they feel they cannot comply with your request for pecuniary remuneration.

"I am, &c.
(signed) "*B. Welton.*"

"Mr. Thomas Joseph H.,
Lower Kennington Green."

On Saturday the 28th June four of the Commissioners in Lunacy visited Bethlem Hospital.

The

Documents and Letters.

The following is a report on the subject made to the treasurer, by Dr. Wood the apothecary of the hospital, immediately afterwards :—

"On Saturday, 28th June, Dr. Hume, Messrs. Procter, Campbell and Gaskell, four of the Commissioners of Lunacy, came to the hospital with an order from the Secretary of State, authorizing them to visit and make inquiries as to the management and treatment of the patients, and more particularly of one of the patients, A. M., who was admitted October 1850, and removed at the request of friends the following December. After inspecting every part of the hospital, the Commissioners stated that a complaint had been made by the friends of the patient, A. M., which was supported by the statements of Dr. Nesbitt, the medical superintendent of the Northampton Asylum, that she had been improperly treated and neglected while in Bethlehem Hospital. It was alleged in the written statement of the patient's sister, which was read, that the patient was seen by her sister a few days after her admission with a black eye; that she was made to sleep on straw without any other covering than a single rug or blanket, and consequently without anything to protect her body from the straw; that on one occasion, when she had offended the nurse, she was put to bed without any covering at all, and remained so through the night; and once when she had been dirty, the nurse made her get up, and though at the time in a very weak state, wash her shift herself. It was further complained that the nurses generally used her very harshly, and called her 'Black Sall,' and that when she was taken from the hospital she was exceedingly weak, very much emaciated, was sore about her back and seat, and suffered from prolapsus of the intestines.

"The Commissioners examined the Case-book, and read the report of her case; they also requested me to state anything that I remembered of the patient. Mrs. Hunter and the nurse under whose charge the patient was, also stated what they knew of her, and from these statements it appeared, what indeed was admitted, that the patient was always dirty. It was well known to all that her general health was very much impaired; that she was weak and emaciated, and the nurse stated that the prolapsus was reported to me; that I directed her what to do for it; that the treatment was successful, and that the patient did not suffer from it again. One of the Commissioners remarked, that this was a malady that was not cured, and could only be alleviated from time to time. It was therefore quite possible that the patient arrived at Northampton, after so long a journey, with a return of the symptoms. The nurse denied that the patient was treated harshly, but believed some of the other patients had called her 'Black Sall.' She also denied that she was ever put to bed without proper covering, or that she was ever made to wash her own linen; she admitted that the patient's skin was very red at the bottom of the back and seat, from her being continually wet and dirty, but denied that the skin was broken. The statement about the black eye was believed to be true, but by what accident it occurred could not be remembered.

"The Commissioners proceeded to make some inquiries into the general management of the hospital, and the rules for the various officers and servants, and said they would make an official application to

to be furnished with copies of the rules, and of the case of the patient, A. M., as it appeared in the Case-book, and any other records of the hospital.

(signed) "*W. Wood.*"

On Friday, the 4th July 1851, the president laid before the Bethlehem Sub-committee a letter from the Commissioners in Lunacy, of which the following is a copy:

Office of Commissioners in Lunacy,

"Sir, "19, New-street, Spring Gardens, 3 July 1851.

"I AM directed by the Commissioners in Lunacy to inform you that conformably to the intention expressed in my letter of the 27th ultimo, four members of the Board visited Bethlehem Hospital on Saturday last.

"The Commissioners direct me to state that one special object of their visit was to inquire into a case of alleged ill-treatment or neglect, on the part of one or more servants of the establishment, towards a female patient of the name of A. M., who was admitted therein on the 6th October last, and was removed on the 27th of the following December, and (within a day or two afterwards) placed in the Northampton Lunatic Hospital.

"The statement submitted to the Commissioners in Lunacy, in reference to this case, was to the following effect; viz.

"That within a few days after the patient's admission she received a black eye, the cause of which her friends were unable to ascertain; that she was soon afterwards placed in the basement story, where she lay on straw, and suffered very much from the cold; that she was treated with great harshness by the nurse to whose care she was entrusted; that the nurse (being angry) on one occasion removed the quilt under which the patient usually lay, so that she was exposed throughout the night to the cold without having any covering upon her; that on another night the nurse gave her a shower-bath, and on a third night made her get up (although then very ill), and forced her to stand at the wash-tub and wash some of her linen; and further, that the nurses in that part of the hospital were in the habit of addressing her by certain offensive names.

"That the patient was eventually removed from Bethlehem Hospital on the 27th of December last; that at this time she was in very bad bodily health and condition, being very much emaciated, having swollen legs, a prolapsus causing extreme pain; a sore on each hip, and her back extensively excoriated, apparently caused by lying on the straw, added to which her bowels were almost unceasingly in action.

"On the day after her removal from Bethlem Hospital the patient was admitted into the Northampton Hospital, where the treatment adopted was so successful, that her bodily as well as mental health speedily began to improve, and was eventually re-established; she has since been restored to her friends quite recovered.

"The foregoing charge or statement, so far as respects the bodily condition of the patient on her admission into the Northampton Lunatic

Documents and Letters.

Lunatic Hospital, was corroborated by Dr. Nesbitt, the resident medical officer of that institution, who stated as follows; viz.

"Her state, upon admission, was most deplorable, with an attenuated frame; her system was so enfeebled that she was unable to sit up. She had prolapsus of the uterus and anus, with great mucous discharges, and suffered severely from tenesmus. Her lower extremities were livid and œdematous, and their motion paralysed. On the hips and nates were a great many abrasions of the surface, varying in size from a millet seed to a split pea; she had also, on different parts of the body, copper-coloured eruptions. She was quite unconscious of the calls of nature, and her urine and fæces passed under her.

"The treatment pursued was, in the first place, to give her a comfortable bed, and to attend to her infirmities by frequent change of linen. Morphia, the hydriodate of potass, and the local application of oak bark decoction, with generous diet, enabled her to get up in the course of three weeks, and from that time to this her course has been one of progressive improvement.

"She was always a quiet patient, and grateful for attention, and after one month's residence, all her faulty habits entirely left her.

"Dr. Nesbitt, having been asked for his opinion as to the cause of the abrasions and sores on the body of the patient, replied that he had no hesitation in stating that such appearances were referable to neglect. After proceeding to relate that the patient had uniformly complained to him of the 'harsh and coarse treatment' to which she was subjected in Bethlehem Hospital, of her lying on the straw, without anything being interposed between that and her body; of her being without covering, and of the conduct of the nurses, who 'treated her like a brute.' Dr. Nesbitt concludes by saying:—

"As the patient is remarkable for truthfulness, and more desirous of burying in oblivion that part of her life spent in Bethlehem, I cannot arrive at any other conclusion than that the abrasions are referable to the straw which, in both its wet and dry state, would produce an irritation of the surface exactly calculated to tend to a solution of continuity in a bedridden patient, and in connexion with her want of cleanliness.

"In the course of the investigation made at Bethlehem Hospital, on Saturday last, the Visiting Commissioners endeavoured to ascertain on whom the duties devolved of taking care of Miss A. M., of visiting her, and inquiring into her case from time to time, and of reporting upon it, and generally upon whom the responsibility would rest in case of any ill-treatment or neglect being proved. In the absence, however, of the various Rules and Regulations now in force in Bethlehem Hospital, the Commissioners were unable to form any conclusive opinion, and have therefore adjourned the inquiry. And they now direct me to say that they will feel obliged by your ordering copies of those Rules and Regulations to be transmitted to this office, in order to enable the Commissioners to make the necessary report to Secretary Sir George Grey, and to answer any inquiries that the Board of Governors may deem it expedient to make on the subject.

"The

Documents and Letters.

"The Rules and Regulations which I am instructed to apply for are,—

"1. The General Rules for the management of the hospital.

"2. The Rules and Regulations for the guidance of the officers of the institution.

"3. The Rules and Regulations for the guidance of the attendants.

"Together with any recent alterations, resolutions, or directions in reference to any of the above.

"I am instructed to say that the Commissioners will be very glad to receive any suggestions or assistance which the Board of Governors may do them the favour to afford to them, on the subject of this inquiry.

"I have, &c.
(signed) "*R. W. S. Lutwidge,*
Secretary."

"*P.S.*—The Commissioners direct me to add that other cases have been brought before them in reference to the treatment of patients in Bethlem Hospital, and that one of them is now under the consideration of the Board."

"To Sir Peter Laurie, &c. &c. &c."

Whereupon it was resolved and ordered,—

That the several documents required by the Commissioners in Lunacy be transmitted to them forthwith, and that the Commissioners be informed that the Governors will most readily co-operate with them, and afford every assistance in the investigation of any case relating to the treatment of any patient in the hospital.

On the same day the secretary of the Commissioners in Lunacy attended at Bethlem Hospital, and served on the treasurer a summons, of which the following is a copy:—

"8 & 9 Vict., Cap. 100, Section 100.

"We, the Commissioners in Lunacy, appointed under or by virtue of an Act passed in the ninth year of the reign of Her present Majesty, entitled 'An Act for the Regulation of the Care and Treatment of Lunatics,' do hereby summon and require you personally to appear before us, at the office of the Commissioners in Lunacy, situate No. 19, New-street, Spring-gardens, in the city of Westminster, on Monday, the 7th day of July instant, at the hour of one in the afternoon of the same day, and then and there to be examined touching certain matters relating to the execution of the said Act, more especially with reference to Bethlem Hospital, and the cases of certain persons late patients therein.

Documents and Letters.

"Sealed with the common seal of the 'Commissioners in Lunacy,' this 3d day of July, in the year of our Lord 1851.

"Witness,

(signed) "*R. W. S. Lutwidge,* (L. S.)
Secretary."

"To — Johnson, Esq.,
Treasurer of the Royal Hospital of Bethlehem,
St. George's Fields."

Summonses similar, as it is believed, were served at the same time, on the apothecary, the matron, and several attendants.

On the following day the treasurer received from the secretary to the Commissioners in Lunacy, a letter, as follows:—

"Office of Commissioners in Lunacy,
"Sir, 19, New-street, Spring Gardens, 4 July 1851.

"SINCE I was at Bethlem Hospital this morning, I have communicated with the Commissioners in Lunacy, by whom I am directed to express their wish to see Sarah Burrows, late a nurse, and now a servant in the hospital. With this view, I am to request that you will favour the Commissioners by causing the accompanying summons to be delivered to her.

"I am, &c.

(signed) "*R. W. S. Lutwidge,*
"J. E. Johnson, Esq." Secretary."

This letter contained a summons for an attendant named Sarah Burrows, which was given to her.

The treasurers and the officers and attendants, as above stated, were examined at the office of the Commissioners in Lunacy, on the 7th of July, and various others were examined afterwards, during a period of many weeks.

On the 1st of August 1851 the president received from the Commissioners in Lunacy a letter, as follows:

"Office of Commissioners in Lunacy,
"Sir, 19, New-street, Spring Gardens, 1 August 1851.

"I AM directed by the Commissioners in Lunacy, with reference to the pending inquiry relative to the Royal Hospital of Bethlehem, and the treatment of patients therein, to apprise you, as president of the hospital, that in making their report to Secretary Sir George Grey, which they are about immediately to do, the Commissioners will probably feel it their duty to offer some observations, and submit some suggestions upon the subject, with a view to the improvement of its system of management.

"Before, however, so doing, the Commissioners desire to afford the Committee of Governors and yourself an opportunity of making any statements or communications which you, or any other member of the committee, may be disposed to submit for the consideration of this Board.

"You

"You will oblige the Commissioners by availing yourself of the earliest convenient opportunity to communicate the contents of this letter to the Committee of Governors, and by informing them of the result with as little delay as possible.

"I am, &c.
(signed) "*R. W. S. Lutwidge,*
Secretary."

"To Sir Peter Laurie,
7, Park-square, Regent's Park."

On the following day the president attended at the office of the Commissioners in Lunacy, and in the absence of the Commissioners in formed their secretary that so long as the Governors were unacquainted with the wishes of the Commissioners, and of what had occurred before them it would be impossible for the Governors to make any statement.

On the 8th August the president received the following, which he immediately forwarded to the treasurer with a note asking if he had any one to propose for examination:—

"Office of Commissioners in Lunacy,
19, New-street, Spring-gardens, 7 August 1851.

"Dear Sir,

"WITH reference to your letter of the 3d instant, in reply to mine of the 1st, which has been laid before this Board, I am instructed to say, that being desirous of obtaining full information upon all matters relevant to the subject of the pending inquiry into the management of, and treatment of, patients in Bethlehem Hospital, the Commissioners in Lunacy are prepared to examine yourself and any other Governors, or any of the officers of the institution, or other parties, whose names you will do them the favour to suggest.

"I am to add, that the inquiries of the Commissioners are specially directed to the system of management and the arrangements, medical and otherwise, bearing upon the care and treatment of the patients.

"You will oblige the Commissioners by a reply at your earliest convenience, with a view to the prosecution of the inquiry and examination of witnesses on Thursday next, the day of weekly meeting of the Board.

"I remain, &c.
(signed) "*R. W. S. Lutwidge,*
Secretary."

"To Sir Peter Laurie,
&c. &c."

On the 9th August the treasurer addressed the president as follows, in reply:—

"Bridewell Hospital, 9 August 1851.

"My dear Sir Peter,

"I FOUND your letter of yesterday, inclosing that of the Commissioners in Lunacy of the preceding day, on my return last evening from the Surrey Assizes. I have no one to propose for examination before the Commissioners on Thursday next. I feel it to be quite impossible for any Governor to offer on behalf of the hospital, any

Documents and Letters.

defence against charges the particulars of which have not been communicated to him, especially when (presuming that his examination will be conducted as mine was) he will not be at liberty to make the statements he may be most desirous of making, but will be confined to the answering of such questions as may be put to him.

"It is only just that any charge made against the hospital should be communicated to the Governors, that the investigation of such charge should be conducted in their presence, and that they should have the opportunity of submitting any defence they may have to offer.

"I am certain I am expressing the sentiments of a large majority, if not of the whole, of the Governors, when I state that they are desirous that the hospital should be as perfect as circumstances will admit; that they will be the very last to excuse any misconduct in any of their officers or servants, and that they will thankfully receive and consider any suggestions that may be made to them for the amelioration of the institution; at the same time I feel they ought not to be required to make any reply to charges of the particulars of which they have no knowledge, and which have been investigated with closed doors and in their absence. I trust you will continue to press on the Commissioners the propriety of their submitting to the Governors the various charges made against the management of Bethlem, and the treatment of patients therein, before they require from such Governors any information as to the improvements they have in contemplation.

"Believe, &c.
(signed) "*J. E. Johnson*,
Treasurer."

"Sir Peter Laurie."

On the 12th February 1852, the following letter was addressed to the president:—

"Office of Commissioners in Lunacy,
19 New-street, Spring-gardens, 12 Feb. 1852.

"Dear Sir,

"I AM directed by this Board to apprise you, for the information of the Governors of Bethlem Hospital, that after some unavoidable delay the Report of the Commissioners in Lunacy upon the management of, and treatment of, patients in the hospital, with a copy of the shorthand writer's notes of the evidence taken upon the inquiry, has been transmitted to Secretary Sir George Grey.

"I remain, &c.
(signed) "*R. W. S. Lutwidge*,
Secretary."

"To Sir Peter Laurie, President,
Bethlem Hospital."

On the 21st February 1852, four printed copies of the Report of the Commissioners in Lunacy of Bethlem Hospital, marked confidential, were received at the hospital with the following letter:—

"Gentlemen, "Whitehall, 21 February 1852.

"I AM directed by Secretary Sir George Grey to transmit to you herewith some copies of a report which he has received from the Commissioners

Commissioners in Lunacy relative to the condition and management of Bethlem Hospital, and I am to request your attention to the alleged defects in the management of the hospital, and to express Sir George Grey's hope that measures will be adopted without delay for remedying such defects.

"The evidence which accompanied the report shall be transmitted to you if you desire it.

"I have, &c.

(signed) "*H. Waddington.*"

"The Governors of Bethlem Hospital."

The following reply was sent:—

"Bridewell Hospital, New Bridge-street, Blackfriars,

"Sir, 24 February 1852.

"I AM directed by the president and treasurer of the Royal Hospitals of Bridewell and Bethlem, to acknowledge the receipt of your letter of the 21st inst., together with some copies of the Report to Sir George Grey, from the Commissioners in Lunacy, relative to Bethlem Hospital, and to acquaint you, for the information of the Secretary of State, that a Special Court of Governors will be summoned, who will give their best consideration to the matters referred to therein.

"I am further directed by the president and treasurer to request that the evidence which accompanied the report may be transmitted to them.

"I have, &c.

"H. Waddington, Esq. (signed) "*B. Welton,*
Under Secretary of State, Home Department." Clerk."

On the 25th February the evidence, as requested, was sent with the following:—

"Sir, "Whitehall, 26 February 1852.

"IN pursuance of the request of the president and treasurer of the Royal Hospitals of Bridewell and Bethlem, expressed in your letter of the 24th instant, I am directed by Secretary Sir George Grey to transmit to you herewith the evidence which accompanied the Report of the Commissioners in Lunacy on the management of Bethlem Hospital.

"I am, &c.

"The Clerk of Bridewell and Bethlem Hospitals, (signed) "*H. Waddington.*"
New Bridge-street, Blackfriars."

The reply was:—

"Sir, "Bridewell Hospital, 28 February 1852.

"I AM directed by the president and treasurer of the Royal Hospitals of Bridewell and Bethlem to acknowledge the receipt of your letter of the 26th instant, together with the evidence, in 16 parts, which accompanied

Documents and Letters.

accompanied the Report of the Commissioners in Lunacy to the Secretary of State, on the management of Bethlem Hospital, and I am to convey to you the thanks of the president and treasurer for the same.

"I have, &c.
(signed) "*B. Welton*, Clerk."

"H. Waddington, Esq.
Under Secretary of State, Home Department."

AT a general meeting of the committee for conducting the affairs of the hospital, held on the 8th March 1852, the letters just given, and the replies thereto, were read, and the copies of the reports and evidence were laid upon the table, whereupon it was ordered—

"THAT the letter from Mr. Waddington, the Under Secretary of State for the Home Department, transmitting a report, marked 'confidential,' of the Commissioners in Lunacy on Bethlem Hospital, to the Secretary of State, be printed with such report, and the evidence subsequently received; and that a copy thereof be, in the first instance, forwarded to each member of this committee."

The printing of the report and evidence was completed, but no copy had been issued, when the following was received :—

"(Immediate.)

"Gentlemen, "Whitehall, 27 March 1852.

"IT having been represented to Mr. Secretary Walpole that you have taken steps for the printing of the evidence annexed to the Report of the Commissioners in Lunacy on Bethlem Hospital, which was transmitted to you for perusal on the 26th ultimo, I am directed by Mr. Walpole to desire that the evidence may not be printed without the sanction of the Secretary of State.

"I have, &c.
(signed) "*Wm. G. H. Jolliffe.*"

"The Governors of Bethlem Hospital,
care of Mr. Welton,
Bridewell Hospital, New Bridge-street."

The following was the reply :—

"Sir, "Bridewell Hospital, 31 March 1852.

"I AM directed by the president and treasurer of Bethlem Hospital to acknowledge the receipt of your letter of the 27th instant, intimating the desire of Mr. Secretary Walpole that the evidence annexed to the Report of the Commissioners in Lunacy on Bethlem Hospital may not be printed without his sanction; and I am to acquaint you, for the information of Mr. Secretary Walpole, that the reason which actuated the Committee of Governors in directing the report and evidence to be printed was the great difficulty of the several members forming an opinion upon the Report of the Commissioners in Lunacy, without having the opportunity of carefully and leisurely examining the evidence upon which such report is founded; at the same time they

they directed that, with a copy of the report and evidence, a letter should be sent to each member of the committee, stating the confidential nature of the document.

"The printing of the report and evidence was completed before the receipt of your note of the 27th instant, and a copy is sent herewith. No other copy has been issued, and the president and treasurer will, of course, suspend the transmission of a copy to any member of the committee until they have the sanction of the Secretary of State for so doing.

"I have, &c.
(signed) "*B. Welton*, Clerk."

"Sir Wm. G. Hilton Jolliffe, Bart.
Home Office, Whitehall."

On the 2d April the following was received :—

"Sir, "Whitehall, 2 April 1852.

"I HAVE laid your letter of the 31st ultimo before Mr. Secretary Walpole, and I have to inform you that it would have been more regular for the Committee of Governors of Bethlem Hospital to have obtained the permission of the Secretary of State before printing the evidence annexed to the Report of the Commissioners in Lunacy on that hospital; but as the printing of the evidence has taken place Mr. Walpole will not object to its being transmitted, in the strictest confidence, to the members of the committee.

"I am to desire that the manuscript evidence may be returned to this office.

"I am, &c.
(signed) "*H. Waddington.*"

"Mr. B. Welton, Bridewell Hospital,
Bridge-street, Blackfriars."

On the 5th April copies of the report and evidence were sent to the acting members of the committee with the following :—

(Copy.)

"Sir, "Bridewell Hospital, 5 April 1852.

"I AM directed to forward to you the accompanying copy of a Report of the Commissioners in Lunacy on Bethlem Hospital to the Secretary of State, together with the evidence on which such report is stated to have been founded. This report has been forwarded to the Governors by the Secretary of State as a 'confidential communication,' but he 'does not object to its being transmitted, in the strictest confidence, to the members of the committee.'

"I am, &c.
(signed) "*B. Welton.*"

On the 8th April the following was received :—

"(Immediate.)

"Sir, "Whitehall, 8 April 1852.

"I AM directed by Mr. Secretary Walpole to request that you will inform him why the manuscript evidence, annexed to the Report of the

Documents and Letters.

the Commissioners in Lunacy on Bethlem Hospital, has not been returned to this office, agreeably to the directions contained in Mr. Waddington's letter of the 2d instant.

"I am further to request that the manuscript evidence may be returned forthwith, and that another copy of the printed evidence may be sent at the same time.

"I have, &c.
(signed) "*W. G. H. Jolliffe.*"

"Mr. B. Welton, Bridewell Hospital,
Bridge-street, Blackfriars."

The reply to which was,—

"Sir, "Bridewell Hospital, 12 April 1852.

"In reply to your letter of the 8th instant, I beg to acquaint you that the manuscript evidence annexed to the Report of the Commissioners in Lunacy to the Secretary of State, shall be forwarded to the Home Office on Wednesday next, the 14th instant, which, on account of the holidays, is the earliest period it can be obtained from the printers, who have it to clean and put into a proper condition.

"I beg to add, that on the receipt of Mr. Waddington's letter of the 2d instant, I received directions from the treasurer of the hospital to return immediately the manuscript in question, but could not do so in consequence of the state it was then in.

"I forward herewith another copy of the report and evidence, as requested in your letter of the 8th instant.

"I have, &c.
"Sir Wm. G. H. Jolliffe, Bart., (signed) "*B. Welton,*
Home Office." Clerk."

On the 14th April 1852, the manuscript copy of the evidence was returned with the following:—

"Sir, "Bridewell Hospital, 14 April 1852.

In pursuance of the request contained in your letter of the 2d instant, I am directed by the treasurer of Bridewell and Bethlem Hospital, to return to you herewith the evidence which accompanied the Report of the Commissioners in Lunacy to the Secretary of State on Bethlem Hospital.

"I am, &c.
"H. Waddington, Esq., (signed) "*B. Welton,*
Under Secretary of State, Home Office, Clerk."
Whitehall."

On the 26th April, the Committee of Governors determined on the appointment of a resident physician of eminence to be the chief medical superintendent of the hospital, in accordance with a recommendation to that effect from the General Committee, and on the 12th July such an appointment was made in the election of D. Hood.

On the 28th May, the following was received, containing further examinations, which are appended.

"(Confidential.)

"(Confidential.)

"Gentlemen, "Whitehall, 28 May 1852.

"I AM directed by Mr. Secretary Walpole to transmit to you, with reference to my letter of the 21st February last, the enclosed copies of the examinations, taken upon oath, of Miss A. M. and her sister Miss F. M., relative to the treatment of the former as a patient in Bethlem Hospital.

"I am at the same time to request that you will furnish Mr. Walpole with your observations on the Report of the Commissioners in Lunacy, as soon as you have completed your investigation into the subject.

"I have, &c.
(signed) "*H. Waddington.*"

"The Governors of Bethlem Hospital.'

The receipt of these was immediately acknowledged, and on the 9th June, the General Committee directed the following reply to be sent:—

"Sir, "Bridewell Hospital, 9 June 1852.

"I AM directed to inform you that your letter of the 28th ult., addressed to the Governors of Bethlem Hospital, with enclosed copies of the examinations of Miss A. M. and her sister Miss F. M., taken on oath, on the 30th July 1851, were laid before the General Committee of Governors on the 7th instant; and I am instructed to acquaint you, for the information of Mr. Secretary Walpole, that the president, treasurer, and the general committee have considered, that in consequence of the number of patients having greatly increased since the appointment of the present physicians, and the introduction of the improved and daily improving treatment of lunatics, a degree of constant supervision, direct control, and undivided responsibility is required, which it is not in the power of non-resident physicians to secure; and the Court of Governors concurring unanimously in this opinion, which coincides with the chief recommendation of the Commissioners in Lunacy, have determined on the appointment of a resident physician, and measures are now in progress for the election of such an officer at a very early date. The Governors have decided that his qualifications, duties, and salary shall be as shown in the accompanying printed paper. The appointment of this officer will necessarily affect the position and duties of other officers, and render it indispensable that some of the rules of the hospital should be revised, but on the fullest consideration, the committee are of opinion that the course likely to be most beneficial to the institution and best calculated to increase its usefulness, will be to defer the completion of this revision, and the further consideration of the report re-referred to in your letter, until after the appointment of the resident physician, as he will be responsible for the medical and general treatment of the patients in the hospital, and the Governors will have the benefit of his experience and advice.

"I am further directed to add, that when this appointment has been made

Documents and Letters.

made, and the various alterations consequent on it have been completed, the particulars of the whole will be forwarded to Mr. Secretary Walpole, and it is trusted will meet with his entire approbation.

"I am, &c.
(signed) "*B. Welton*, Clerk."

"H. Waddington, Esq.,
Under Secretary of State, Home Office, Whitehall."

On the 11th June the following was received :—

"Gentlemen, "Whitehall, 11 June 1852.

"I HAVE laid Mr. Welton's letter of the 9th instant, and its enclosure, before Mr. Secretary Walpole, and I am to request that your report on the matters referred to in the Report of the Commissioners in Lunacy, which has been in your possession since the 21st February, may be transmitted to Mr. Walpole as soon as it is complete. He is very desirous of receiving it without further delay.

"I am, &c.
(signed) "*H. Waddington.*"

"The Governors of Bethlehem Hospital.'

To which the reply was,—

"Sir, "Bridewell Hospital, 15 June 1852.

"I AM directed to acknowledge the receipt of your letter of the 11th instant, and to acquaint you that the Committee of Governors for conducting the affairs of the Royal Hospitals of Bridewell and Bethlem will transmit to Mr. Secretary Walpole the result of their consideration of the Report of the Commissioners in Lunacy on Bethlem Hospital with as little delay as possible.

"I am, &c.
(signed) "*B. Welton*, Clerk."

"H. Waddington, Esq.
Under Secretary of State, Home Office, Whitehall."

On the 23d June 1852, the Committee deemed it right to make to the Secretary of State the application contained in the following letter :—

"Sir, "Bridewell Hospital, 23 June 1852.

"I AM directed by the Committee of Governors for conducting the affairs of the Royal Hospitals of Bridewell and Bethlem, to apply for the permission of Mr. Secretary Walpole to furnish the medical and other officers of Bethlem Hospital with copies of the Report of the Commissioners in Lunacy to Sir George Grey on the said hospital, to enable the medical and other officers to prepare answers in writing to statements made in that report.

"I am, &c.
"H. Waddington, Esq. (signed) "*B. Welton*,
Under Secretary of State, Home Office, Clerk."
Whitehall."

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The reply was,—

"Sir, "Whitehall, 26 June 1852.

"I HAVE laid your letter of the 23d instant before Mr. Secretary Walpole, and I am to convey to you his authority to furnish to the medical and other officers of the Bethlem Hospital, copies of the Report of the Commissioners in Lunacy on that hospital, upon condition that such copies are not made use of for any purpose excepting that of preparing answers by the officers to statements made in the report.

"I am, &c.

"Mr. B. Welton, Clerk (signed) "*H. Waddington.*"
to the Governors of Bethlem Hospital,
Bridewell Hospital."

The following letters and copies of letters have been received from Sir Alexander Morison, one of the physicians of the hospital:—

"To the President, Treasurer, and Governor of Bethlem Hospital, &c.

"A PRINTED paper, purporting to be a Report from Commissioners in Lunacy to the Home Secretary of State, and signed 'Shaftesbury,' has been put into my hands.

"In it I find assertions respecting my conduct as one of your physicians, calculated to injure me in your estimation, and in that of the public.

"As these assertions are unfounded, I beg respectfully to have a strict enquiry made into the matter in which I have performed the duties of physician to your noble institution during the 17 years I have had the honour to occupy the situation, in order to refute the misrepresentations respecting myself contained in the said report.

"I have, &c.

"25 February 1852." (signed) "*Alex. Morison.*"

"TO the Commissioners in Lunacy.

"My Lords and Gentlemen,

"I HAVE seen a printed paper stated to be a Report from the Commissioners in Lunacy to the Home Secretary of State respecting Bethlem Hospital; this report, although it is entitled 'confidential,' may obtain extensive circulation.

"In it I find the following statements:—

"Page 3.—'According to the evidence of the resident apothe-
'cary, by far the greater portion of the medical treatment of the
'patients appears in practice to devolve upon him, and thus his
'own peculiar duties are neglected.

"Page 7.—'In point of fact, nearly the whole of the treatment
'(medical as well as moral,) and much of the business of general
'supervision

Documents and Letters.

'supervision, are at present thrown upon Dr. Wood, who, as he 'candidly admits, has not been equal to the burden, and the 'services of the visiting physicians (which apparently are most 'entirely confined to examining the patients before admission 'and discharge, and to occasionally prescribing for them in cases 'of severe illness), occupy but a small portion of their time, and 'have not been always regularly or assiduously performed, the 'result has been that the care of the patients is left far too much 'to the uncontrolled direction of the attendants.'

"Not having seen the evidence on which you have founded your report, of course I do not know what Dr. Wood has said, but if he has made a statement according to this report he has stated what is untrue; for that I have diligently and efficiently discharged my duty from the first day of my appointment to the present time, a period of nearly 17 years, and that Dr. Wood has not done my duty upon any occasion, ample evidence is ready to be produced.

"I feel, therefore, I have some reason to complain that such opinions should be circulated by the Commissioners, upon statements made behind my back, and of which I have known nothing, and have had no opportunity of correcting and showing their falsehood.

"This report is calculated to injure me in the opinion of the Governors of the hospital and of the public generally. Allow me then to express my regret that you should have made such report without affording me an opportunity of co rrecting it.

"I have, &c.
(signed) "*Alex. Morison.*"

"Bethlem Hospital, 23 March 1852."

Reply,—

"Offices of Commissioners in Lunacy,
19, New-street, Spring-gardens,
"Sir, 24 March 1852.

"I BEG to acknowledge the receipt of your letter of yesterday's date, objecting to certain statements and observations contained in the Report recently made by the Commissioners in Lunacy to Secretary Sir George Grey, relative to Bethlem Hospital, and to say that I will lay the same before this Board at their meeting to-morrow. In the meantime I think it right to state that the evidence upon which the report was founded was sent with the report to the Home Office, and by direction of Sir George Grey transmitted to the President and Governor of the hospital.

"As a matter of convenience, the report, instead of being copied in manuscript, was privately printed at the Government press, and in that form sent marked 'Confidential' to Bethlem Hospital.

"It was accompanied, as I have since been informed, by the copy of the shorthand writer's notes of the evidence.

"I remain, &c.
(signed) "*R. W. S. Lutwidge,*
"Sir A. Morison, M.D." Secretary."

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Documents and Letters.

The following letter from Dr. Monro, the other physician of the hospital, addressed to the treasurer, with the treasurer's reply, was laid before the General Committee of the Governors on the 7th May 1852:—

"37, Harley-street, Cavendish-square,
"27 April 1852.

"Dear Mr. Johnson,

"I HEAR many rumours, and I receive no official information. I should therefore feel obliged to you if you will inform me as to my true position, that I may neither neglect the interests of the hospital nor compromise my own honour and dignity.

"The approach of a course of lectures makes it the more necessary to see my way clearly before me.

"Having received no trial or animadversion from the Committee or from any of the Governors in the way of complaint, and having undergone no examination whatever at their hands upon any point under consideration, I am altogether in the dark, and request some counsel and information from yourself.

"As the matter stands at present, I must conclude that no complaint or ground of inquiry exists, for I had always imagined, where any sort of inquiry is necessary, that the party would be examined against whom it might be alleged.

"Understanding that I was re-elected yesterday (a mark of the continued confidence of the Governors), I shall continue to do my duties as heretofore.

"You are quite at liberty to make any use of this note you may desire, and I am quite willing it should be respectfully laid before any party whom it may concern.

"I remain, &c.
(signed) "*Ed. Thos. Monro.*"

"J. E. Johnson, Esq. Treasurer."

"Bridewell Hospital,
28 April 1852.

"My dear Sir,

"I HAVE received your letter of yesterday, and feel obliged for the liberty you give me respecting it; I have always regarded our resident medical staff at Bethlem as insufficient, and am happy to find that your opinion on this point coincides with my own.

"It is only necessary to advert to the fact that the hospital is left for several hours almost daily without medical superintendence, to satisfy any one that additional medical assistance is required; at the same time I have hitherto been unwilling to recommend the appointment of a second resident medical officer, until, some vacancy having arisen, the whole subject could be reconsidered and placed on a more satisfactory footing. Recent events have, however, rendered it imprudent to delay any longer the re-arrangement of the medical staff. The Governors have, therefore, determined on the immediate appointment of a resident physician to be the chief of the medical department; and as this appointment will probably affect, to a considerable

Documents and Letters.

siderable extent, the duties of the other medical officers, the Governors re-appointed them on Monday last, subject to such changes in their duties, salaries, &c. as may hereafter be deemed advisable.

"I am, &c.

"Dr. Monro." (signed) "*J. E. Johnson.*"

And on the same day, the 7th May 1852, another letter from the physicians and apothecary jointly was read as follows:—

"To the President, Treasurer, and Committee of the Royal Hospitals of Bridewell and Bethlem.

"My Lords and Gentlemen,

"We have heard that a special meeting of the Committee is to be held at Bridewell on Monday next, to consider and report what should be the duties, salary, and emoluments of the resident physician of Bethlem Hospital; and upon no other business.

"And it is further rumoured, that a special general court is to meet on the following Monday, to confirm the resolutions of this Committee.

"As no other business than that above referred to is to be considered, we have no other means of obtaining a hearing than by addressing the individual members of the Committee; and the urgency with which important changes in the medical staff of the hospital are to be carried out, without our being informed of any ground of complaint against the present officers, seems to justify this course.

"If the changes which the Governors have resolved to make have been determined on in consequence of a report which has been made to the Secretary of State by the Commissioners in Lunacy, we most respectfully claim the right to be informed what the report is, and the evidence upon which it is founded.

"We feel that we can confidently challenge comparison between the condition of Bethlem Hospital and that of any similar institution; and those Governors who have attended the Sub-committee, and visited the wards, have uniformly expressed their opinion of its good order, and the satisfactory state of the patients generally, in a book under their own hands.

"The cures during the last seven years have not only equalled but exceeded those of any corresponding period since the hospital was founded; mechanical restraint has been gradually diminished, and at last altogether discontinued. Upon these grounds, we earnestly appeal to the Committee whether changes which must necessarily degrade us all, and, in our persons, dishonour our profession, should be thus hastily made, without giving us the opportunity of defending ourselves against any charges which may have been made against us.

"We have, &c.

(signed) "*Ed. Thos. Monro*, M.D.
"*Alex. Morison*, M.D.
"*Wm Wood*, M.D."

"Bethlem Hospital,
30 April 1852."

To

To these several letters the following is the reply of the Committee:—

"Bridewell Hospital,
7 May 1852.

"Gentlemen,

I BEG to inform you that your letters of the 27th and 30th of April last, and the 3d May instant, with an enclosure addressed to the President, Treasurer, and Committee of Bethlem Hospital, were laid before them, and read at their meeting this day; and I am directed to acquaint you in reply, that the Committee are very desirous of removing, so far as lies in their power, any impression on your minds that the proceedings which they have taken, with reference to the appointment of a resident physician, are the result of an acquiescence on their part with the Report of the Commissioners in Lunacy to the Secretary of State for the Home Department.

"The appointment of a resident physician and a medical superintendent, which was unanimously agreed to by the Committee, and unanimously confirmed by the last Court, had long been felt by the president and treasurer, and many Governors, who have devoted much attention to the administration of Bethlem Hospital, and who possessed considerable experience in the direction of similar establishments, to be a necessary and desirable alteration in the system pursued at Bethlem Hospital, where, in consequence of the number of patients having doubled since the appointment of the present physicians, the introduction of employments on an extended scale, the classification of the patients under the charge of numerous subordinate officers, and the increased duties involved in the improved and daily improving treatment of lunatics, a degree of constant supervision at all hours, direct control, and undivided responsibility, was imperatively demanded, which was not in the power of any non-resident physician under the present system to secure.

"It is both the duty and the desire of the Governors to afford any officer who may feel himself aggrieved the fullest opportunity of explanation and defence; and had the report and evidence complained of by the physicians been a document under the control of the Committee, they would most readily have furnished them with copies; but the physicians are aware that the investigation originated with the Commissioners in Lunacy; and that, by the express and positive direction of the present Secretary of State, the evidence must be confined, in the strictest confidence, to the members of the Committee.

"As the Secretary of State is alone empowered to furnish the physicians with copies of the report and evidence, the Committee can only refer them to that authority for compliance with their request; should they, however, wish to submit any statement on the subject, the Committee will willingly receive it, and give it their best consideration.

"The physicians will thus understand that the Committee have not entered upon the consideration of the matters which may be in that report, and that therefore no opinion has been expressed by them on the several conclusions at which the Commissioners in Lunacy may have arrived; and although it is true that the present

Documents and Letters.

medical staff is stated to be insufficient in resident officers for the due management of the hospital, that is a defect in the system (as before stated) which they have long intended to remedy when an opportunity occurred.

"I am, &c.
(signed) "*B. Welton.*"

Immediately afterwards the letter in the Appendix was received from Sir Alexander Morison, which was referred by the Court to the Committee to consider and to take such steps therein as they may see fit. On the 14th June the Committee considered this letter, but gave no direction respecting it, feeling that all the reply that could be given was contained in their letter of the 7th May above given.

On the 26th January the matron resigned her appointment, and on the 20th September her successor was appointed; the Governors being unwilling to proceed to this election until they had appointed a resident physician, and were in a position to be guided by his advice in determining her new duties.

On the same day a resident apothecary was elected in the place of Dr. Wood, who had resigned his appointment on the 13th July.

The duties and salaries of the resident physician, the apothecary and the matron, as agreed on by the Governors, are appended.

The remarks of Dr. Monro and Sir Alexander Morison, the physicians, and of Mrs. Hunter, the matron, on the Report of the Commissioners in Lunacy are also appended.

No report has been received from the apothecary, but he has written as follows:—

"Dear Sir, "Bethlem Hospital, 9 July.

"I HAVE to acknowledge the receipt of the Commissioners' Report and Evidence, which I have been prevented answering sooner in consequence of having to await the reply of the Commissioners to my application for a further inquiry, in which I might have an opportunity of defending myself against charges made by persons utterly unworthy of credit. Although the character of the witness is, in some of these instances, stamped upon the evidence, I shall not be content with pointing out its intrinsic worthlessness, but proceed with the least possible delay to reply to every part of the Report and Evidence which appears to reflect upon me.

"I should feel much obliged if you would inform me when the answer must be completed.

"I remain, &c.
"B. Welton, Esq." (signed) "*W. Wood.*"

"Kensington House,
"My Dear Sir, 6 October.

"I HAVE this day been shown other newspapers in which there are articles on the subject of Bethlem Hospital, and extracts from the Commissioners' Report which are calculated very seriously to injure my reputation, and more than ever require a very particular and circumstantial

circumstantial answer. Under these circumstances I think I ought not to be satisfied with such imperfect observations, as I should be obliged to furnish to the Governors in time for them to make their reply. My time has been, and is still, so much occupied, that I see no prospect of being ready for the meeting of the Committee at which this subject is to be considered, and I think it will be better, therefore, that they should not wait for my remarks, but take what steps they think proper, and leave me to send my answer, which must, under existing circumstances, be made public, when I have had time to prepare it with that consideration which it requires. So long as the report was kept private I had only to meet it as reflecting upon the institution with which I was connected, but now that it has become public, and my professional reputation is endangered, it is a much more personal matter. As I understood from you that it was probable the committee would proceed to the consideration of the subject within the next fortnight, I think it right to say, that I cannot possibly complete my observations within that time, and therefore beg that they will leave me at liberty to make my answer independently of their report.

"Believe, &c.

"B. Welton, Esq." (signed) "*W. Wood.*

A copy of a correspondence between the treasurer and the Commissioners in Lunacy will also be found in the Appendix.

Appendix (B.)

REMARKS on the Report of the Commissioners in Lunacy by the Physicians and the Matron.

1.—Remarks by Dr. *Monro.*

TO the Governors of Bridewell and Bethlehem Hospitals.

87, Harley-street, Cavendish-square,

My Lords and Gentlemen, 8 July 1852.

Being requested to make any observations I may think proper on the Report of the Commissioners in Lunacy respecting Bethlehem, and the evidence which accompanies it, I would first observe that it appears to me that the leading fallacy of the whole matter, so far as the physicians are concerned, is an impression that they have been remiss in the execution of duties, which, in fact, they never undertook, and which belong rather to some medical officer of a very different grade.

The recognized duty of the physicians of Bethlehem hitherto has been to pay certain periodical visits (four times each in the course

Documents and Letters.

of the week) and to exercise a large and superintending control over the medical treatment and general management of the hospital, and they by no means ever contemplated the regulation of details which must attach to subaltern officers, and which involving questions of management and practice at all hours of the day and night, could never, by possibility, come under their cognizance; indeed such points as these I now refer to, never have constituted any part of a physician's duty, who, as a sort of general officer, has taken a large view of all the leading points of the case, and leaves the details and all the minutiæ to the regulation of officers working under him. Such an attention to minute details has been manifestly out of the question and wholly impracticable, each physician having, on an average, 200 patients under his charge; if he devoted even three minutes to each, must have employed 10 hours at each visit. This supposition is monstrous, and could never have been contemplated or expected. The physicians hitherto have been selected from those in considerable practice and of tried experience and repute. Such practitioners can never have it in their power to devote any portion of time approaching to 10 hours to any one purpose of this nature; neither do they pretend to do one quarter as much as this in any hospital in London. Your own letter, addressed to us on the 7th May last, admits the impossibility of such an undertaking, when you state that the number of patients having doubled since the appointment of the present physicians, the introduction of employments on an extended scale, the classification of the patients under the charge of numerous subordinate officers, and the increased duties involved in the improved and daily improving treatment of lunatics, a degree of supervision at all times, direct control and undivided responsibility was imperatively demanded, which it was not in the power of any non-resident physician under the present system to secure.

The modern idea appears to incline to that hardworking attention to minute particulars which has never hitherto characterized the mental physician exercising a high profession in a liberal manner; and if the duties of the future medical officer are to be so minute and so extensive and so laborious, he must, indeed, be of a very different grade and calibre from all physicians who have heretofore exercised this high calling.

The condition of Bethlehem Hospital has been in fact a subject of encomium for years, as is incontrovertibly verified by the uninterrupted succession of approbation contained in the written observations of the Governors, and visitors from every quarter of the globe for very many years. It is difficult to find any variation. These books alone proclaim the impression and opinions of half the world, and of many of the Governors themselves, and are a clear justification of the past. For myself, after 36 years' unremitting attendance, I may be permitted to speak of the institution and its inmates with the deepest regard. Nobody can pretend to entertain the same amount of interest, preceded as I have been by several of my immediate ancestors through a period altogether of 125 years. I look at Bethlehem Hospital with peculiar interest, and will yield to no man breathing in the amount of my attachment.

In the question before us, I would also observe that the evidence of persons

persons but recently discharged as recovered, from the hospital, is taken as equally valid with those of persons of unimpeachable sanity. Some of these were very illiterate and of the humblest grade in society, and whose recollection of the subject-matter of their evidence must be leavened and perverted by their unsound state when their impressions were formed. One of these witnesses does not at all bear out the complaints and assertions of her own mother.

This patient, Mary Elizabeth W., after leaving the hospital, and having been discharged well, scarcely four weeks, in the presence of the Commissioners and in the absence of the nurses and matron, who, in the course of duty, is always present when patients are discharged by the Bethlehem Committee, states, in opposition to her mother's complaints, that she was pretty comfortable in the hospital, and that she did not recollect a supposed injury to her finger, or the supposed violence of the nurses, or that she herself was black and blue, or that the nurses used any coarse language.

Her evidence appears to have been a complete failure, though she was herself the party supposed to be aggrieved, and she repeatedly expressed her ignorance of imagined ill-usage.

Some strong observation is thrown out, and unless the physicians can absolutely verify it, or absolutely deny it, an appearance of inattention or neglect attaches to them.

There is nothing which might not be suggested by such evidence, and the physicians disclaiming all knowledge of such matters, as well they might, are immediately considered inattentive or inefficient. For instance, it might be suggested—Did you not know that a certain patient was fed by the keepers with brimstone and treacle? I never saw anything of the kind.—But do you not, in your capacity as physician, know that such was the case? Indeed, I do not.—Why here, gentlemen, is a medical officer of thirty-six years' standing who does not know whether it be true that a certain patient lived on brimstone and treacle.

I honestly believe that any institution subjected to the same scrutiny would be found equally liable to the same animadversions; that praise or blame are often, so to speak, matters of accident, and depend on some fortuitous event, and I as honestly believe that in the main there are as few defects in the conduct of Bethlehem Hospital as in that of any similar institution, and that the cures are very nearly as numerous.

Among all the witnesses there are none of any consideration (Mr. Laurie excepted) who pass any sort of observation on my mode of conducting my professional visits; he has never personally witnessed that mode, and being engaged in his own profession, can by no means appreciate the propriety of those measures which, from long experience, I had found best. Every man in his own craft.

The habit adopted some years since, of visiting when the patients were at dinner, gave me a most suitable opportunity, which enabled me quietly to observe the condition of each, and which ensured an inspection of every individual case; the object was not always to ascertain delusions already familiar. At other times the patients are in every conceivable direction, and engaged in miscellaneous pursuits. Bethlehem does not resemble sick hospitals, where every patient is in

Documents and Letters.

bed, or at all events in their bed-rooms, and therefore the same rules will not apply.

The Christmas reports, though much criticised by Mr. Laurie, are of late years prepared with much pains, and contain all necessary information, and as to their length, I can only say that a very influential Governor has suggested that it is very desirable they should be as short as possible; I have therefore just reason to complain of Mr. Laurie's evidence. The statements respecting the patient H——— are perfectly new to me, and indeed could never, in my sphere of duty, fall within my cognizance at all.

If truly stated, which it is very difficult to believe, coming as it does from discarded servants who had misdemeaned themselves, and who never mentioned the circumstance at the time, they are most reprehensible, but unless a supervisor possess something like ubiquity it will be very difficult to prevent the coarse and heartless treatment of some attendants.

The evidence of Eleanor W.,* respecting the application of a mop as a part of a process of washing a patient, does not appear to be borne out by any other witness of any denomination. We have, therefore, great reason to complain of the prominence given to this supposed treatment in the report. If there were any truth in this statement, I should be among the foremost to express my abhorrence of any such system.

I regret that the evidence of Miss A. M. and Miss F. M. does not appear; if it refers to the M.'s,* I must believe, from the friendly intercourse I held with the same sister, and from her letter of gratitude, that all she said would be of the same character; anything else must involve inconsistency on her part.

What is really wanted, more than anything else, is the constant presence in the wards, especially the basements, of thoroughly trustworthy and respectable supervising inspectors, analogous to those among the police, who being of a superior grade to the ordinary attendants, would exercise a control over them, and not being exposed to the petty excitement to which their subordinates are subject while dressing, washing, or feeding their patients, would calmly direct and sedulously observe all their procedure.

I must repeat, that according to the tenor of the system hitherto adopted, it has been absolutely impossible that the physicians should be cognizant of anything which may take place in their absence. Their prescribed duties were quite of another character, and their standing in society did not admit of so large an apportionment of time as seems to have been contemplated by some. I am sure it must be evident to every Governor who carefully considers the whole case, that the matters complained of are out of their jurisdiction.

After so very long a service the sudden transition to new modes involving (to say the least) many modifications of my own duties, is of course very painful and wholly unexpected.

The regulation and adjustment of these conflicting arrangements I must

* In the original these names are stated in full.

I must leave to the kind discretion and consideration of the Governors, who, from a sense of equity and fairness, must perceive that one part of their present adjudication will be to protect at such a moment the interest and long standing claims, the reasonable advantages, and the professional honour of their present physicians.

Let me say in conclusion, that whatever course the Governors may think it right to adopt in other matters, it is quite clear that officers who have so long enjoyed the countenance and approbation of the Governors must look to them for the defence and vindication of their professional integrity, which can alone be satisfactorily shown by some express minute to this effect.

I have, &c.
(signed) *Edw. Thos. Monro*, M.D.

To the President, Treasurer,
and Governors of Bethlem Hospital.

P. S.—As regards the evidence respecting A. M. just sent to me, I must state that I am very much shocked at its contents, if true.

I can only hope that the patient had a morbidly sensitive view of what really occurred, but if anything approaching this was the case I should be among the first to see the necessity of thorough reform, and correction of the past in all these details.

At the same time, I repeat that this department was clearly as distinct from my sphere as that of the architect or the cook.

14 July 1852. *Edward Thomas Monro.*

"Sir "26, Cavendish-square, 15 July 1852.

"I HAVE received your letter of yesterday, enclosing copy of examinations received from the Secretary of State respecting Miss A. M., and I have to report that such patient was under the care of Dr. Monro and Dr. Wood, and she was never, to my recollection, brought to my notice.

"B. Welton, Esq., "I am, &c.
Bridewell Hospital." (signed) "*Alex. Morison.*"

2d.—REMARKS by Sir *Alexander Morison*, M. D.

Sir, 26, Cavendish-square, 17 July 1852.

IN compliance with the request communicated to me in your letter of 28th June, I beg that you will lay before the Committee authorised to transmit the Report of the Commissioners in Lunacy to the Secretary of State on Bethlem Hospital, and the evidence on which the same is founded, the following observations thereon, which I think right to preface by stating the manner in which my weekly duties have been performed.

I commence by Friday.

Documents and Letters.

On this day I receive patients alternately with Dr. Monro; I take a full copy in writing of the case of each patient who is placed under my care, after a careful examination; I am also present on the alternate Friday, when Dr. Monro admits his patients.

On the same day I attend the weekly meeting of the Sub-Committee, and report such patients as have been admitted, or are to be discharged; after this meeting I visit the wards, and I direct my attention particularly to the patients recently admitted, in order to prescribe for them immediately, if required, so that no time may be lost.

If I think it necessary to see them on the following day (Saturday), I call at the hospital.

On Sunday I visit every patient, and I insert in the chaplain's book the names of those patients who I think may derive benefit by attendance in the chapel, or I withdraw from the list those who require it, and I have not unfrequently attended divine service in the chapel, to observe the demeanour of the patients, and the effect of the service upon them.

On Monday I visit the patients in general; on the first and third Monday of each month, the visiting days of the friends of patients, I converse with those friends, observe the manner in which they are received, sometimes learn circumstances respecting the patients of which I may not have been previously informed, and also their opinion of the patient's progress towards recovery.

I ought to mention that I also frequently converse with my patients themselves, without the immediate presence of the attendants.

On Tuesday I occasionally visit.

On Wednesday I always attend, and occasionally on Thursday, in order to determine what otherwise I do on Friday morning, the patients I propose to recommend to the Sub-Committee to be discharged as recovered, uncured, for leave of absence on trial, or for longer residence in the hospital, as offering some prospect of recovery.

I write the names of all such patients myself, as well as those inserted in the book of convalescent patients, and in the Chaplain's book, in which I make weekly entries; I also examine the Diet-book, frequently make entries therein, and, once a week, give my sanction to the same.

I enter my prescriptions in the Prescription-book, and I very frequently give the medicines I think required on the spot, in the form of pills or powders, already prepared, and, in urgent cases I have often made up draughts or mixtures myself.

I also frequently attend patients at the house of occupations, and occasionally at Bridewell.

Ever since my election, in April 1835, I have given lectures upon insanity, and have been accompanied by my pupils in my visits to the hospital long before the attention of the Governors was drawn to the subject; and my recommendation of nearly 30 years' standing (viz. in 1823), that practical knowledge of mental diseases should be acquired by every medical student is now being acted upon, the East India Company requiring it in all their medical officers. *See* Appendix No. 1.

I also carefully consider all the cases under my charge, for the purpose of classifying them in the Case-book, and I enter the same for the benefit

benefit of the pupils. I sign all the discharges in that book, and I assist in making an annual report. It was my wish to make a separate report of the patients under my own immediate care, being more fully acquainted with them, and in 1838, with this view, I presented a detailed report to the Governors.

In 1841 I also presented to them a report of the result of the preceding five years, which I presume contains much practical information. *See* Appendix No. 2.

This was printed at my own expense, and sent to the Governors and others.

I merely allude to this circumstance, as the reports of the physicians are referred to by one of the witnesses.

I may also mention that Mr. Martin, in his Report of the Commissioners of Inquiry concerning Charities in 1838, states:—"The duration of Dr. Morison's visits is from one to four hours or upwards. The curable, incurable, and criminals, receive an equal share of attention, depending on the circumstances of each individual case; the patients are visited by him individually, every one of them being considered under his own peculiar care, without reference to any other officer of the establishment." Since that period my attendance has very considerably increased. I shall now proceed to notice, and to refute, some of the erroneous statements of the Commissioners in Lunacy, in order to vindicate myself as one of the visiting joint physicians of Bethlehem Hospital.

In page 5 of their report it is stated, "The duration of the visits of the physicians is evidently of no long duration."

This assertion, as regards myself, is by no means borne out by the evidence, for—

In page 43, No. 103, the treasurer states, "The other gentleman (Sir Alex. Morison) is there about two hours and a half."

In page 114, No. 1125, Sir A. Morison states, "From one to seven hours, or from two to three hours."

In page 130, No. 1347, P. N. Laurie, Esq., states, "Sir Alex. Morison devotes a considerable portion of his time."

In page 193, No. 2142, Mr. Nicholls states, "I have known that Sir A. Morison has stopped a night or two at the hospital during the apothecary's absence."

In page 200, No. 2239, Mr. Nicholls states, "I have known him occasionally, on an emergency, at my request, to sleep at the hospital, and, perhaps, at Dr. Wood's too, but I, on one or two occasions, asked him myself, that no difficulty should occur, and Sir Alexander Morison has done so very kindly."

In page 230, No. 2739, William Marson states, "Sir Alex. Morison comes every Sunday."

No. 2740, "Sir Alex. Morison is sometimes there for two hours, and sometimes longer."

In page 253, No. 3061, Dr. Wood states, "Sir Alexander Morison is very active; he is there (now that Dr. Monro is unwell) very frequently."

In page 279, No. 3383, Mr. David Kidd states, "Sir Alexander Morison always comes on his days, and frequently more. Sir A. Morison most goes up stairs and sees his patients."

Documents and Letters.

No. 3384. "Sir A. Morison sometimes sees and examines other patients besides his own."

No. 3385. "When we call Sir Alexander Morison's attention to any other patients that are ill, he will attend to them directly."

In page 6 of the report, "It does not appear that they (the visiting physicians) prescribe for all their patients, or that they visit all parts of the hospital, or that they sign such Case-books as are required to be kept."

In page 7, "According to the evidence of the resident apothecary, by far the greater portion of the medical treatment appears, in practice, to devolve upon him."

In page 15, "And, in point of fact, nearly the whole of the treatment (medical as well as moral), and much of the business of general supervision, are at present thrown upon him, and the services of the visiting physicians (which apparently are almost entirely confined to examining the patients before admission and discharge, and to occasionally prescribing for them in severe illness), occupy a small portion of their time, and have not always been regularly or assiduously rendered."

In page 33, "That the duties of the visiting physicians are very imperfectly performed; that their visits to the hospital are of too formal and superficial a character; that they never inspect the hospital or visit their patients at night, and that their treatment of their respective patients is, in a great measure, left to the resident apothecary."

All this (with the exception of not visiting at night) I deny.

As already mentioned in the statement of my weekly duties, I see and prescribe for and recommend for occupation all my patients; and I not only prescribe for them, but actually administer many medicines to them, and occasionally to those of Dr. Monro.

The apothecary, Dr. Wood, never did my duty for me. When I have required to be absent for a short period of time from the hospital, I have always secured the promise of Dr. Monro to attend for me, except when circumstances have called both him and myself away, which has occurred; and then Mr. Lawrence, at my request, kindly officiated for me, so careful have I been to avoid leaving my patients entirely to the charge of Dr. Wood.

As I have already stated, I write in my private Case-book the history of every patient, in order to consider their cases at my leisure at home.

I also examine, and occasionally extract from the Case-books kept by Dr. Wood, in which I have expressed to him my opinion, that I would make a weekly entry in every case, although such entry might amount to merely "no change," or the same.

I also make it a rule to examine the Prescription-book and the Diet-book, to ascertain whether or no I approve of any addition or change affecting my patients that may have been made by the apothecary in my absence.

As to visiting patients in the night-time, that was never expected of me, although, had occasion required, I was quite ready to do so; and in another large institution, where I am required occasionally to sleep, I have visited the wards at all hours of the night.

By

By the regulations agreed to in May 1843, I am required to attend four times in each week. On examining the book of attendance, I find that during the nine years since that time, I have exceeded the number required by 135 attendances, besides those days on which Dr. Monro and Mr. Lawrence have attended for me.

In page 33, "That Miss H. H. was neglected by the medical and other officers of the hospital."

This, in as far as I am implicated, I deny. She was admitted on the 4th April 1851.

Sick diet was prescribed for her, and such medicines as her symptoms indicated.

The basement portion of the hospital is allotted for patients who are mischievous, are of dirty or indecent habits, or very noisy, and consequently would annoy patients of a different description; being one of these (as stated in her case by Mr. Taylor), she was, according to custom, placed there.

I visited her on the 6th, 7th, and 9th, and on the 16th of April, and Dr. Monro on the 10th, 12th, and 15th; and so far as the services of the visiting physicians were required, she received them.

A great deal of pertinacity was exercised by the chairman of the Commissioners in his examination as to the exact time of my being aware of H. H. being a dirty patient, and two queries in writing were ordered to be given to me. I submit that it would have been common justice in the Earl of Shaftesbury to have inserted my replies to those queries in his report. They are as follows:—

"1st Query.—Did you, or did you not, know when you first saw Miss H. that she was a dirty patient?

"2d Query.—When did you first know that she was a dirty patient?"

The reply was as follows:—

"On referring to my notes respecting H. H., I find that she was a patient in Bethlem Hospital only from the 4th to the 18th of April; that I was present on her admission, and was informed that she was a mischievous patient; consequently she was placed in the department of the hospital appropriated to such patients. I was not informed that she was a dirty patient."

Important concerns requiring my presence in the country soon after her admission, the care of her case was left chiefly to Dr. Wood, with the advice of Dr. Monro, if required.

On my return to London, on the 16th of April, my attention was called to her being in a state of paralysis, and to her having some bruises and marks, stated to have arisen from falls, and from having picked her skin, which she was in the habit of doing.

On the representation of Dr. Wood, on the morning of the 18th, H. H. was discharged; and by desire of the treasurer I examined the body after death, and gave a report thereon. This interruption of my attendance accounts to me for my inability to recollect the circumstances of the case sufficiently to give the replies to the queries of the chairman.

Upon the whole, I would observe, that there appears to me to be an animus pervading the report, of anything but a liberal and impartial description in search of the true nature of the case, and the

Documents and Letters.

style of examination partakes too much of what formerly prevailed in certain places, but it is now almost discontinued; for when the case of H. H. is followed out and traced into the hands of Mr. Lawrence, it is dropped at once, he never having been questioned on the subject, although a material witness, and particularly referred to by me.—(*See* page 124, No. 1268.)

I am deeply grateful that circumstances, over which I had no control, have enabled me at length to see this report and the evidence it is pretended to be founded on, and to have it in my power, in so far as I am individually attacked, in the most earnest manner to call the attention of the Governors to the sweeping assumptions and broad assertions of dereliction of duty, not one tittle of evidence existing for the same.

The objects in view, and motives of such injustice, I shall not enter upon, but will content myself with respectfully affirming that I have at all times, and to the best of my ability, fulfilled the duties required of me in the highly responsible situation I have had the honour to hold in the institution, and that I am very desirous of, and challenge a full inquiry.

"I am, &c.

(signed) *Alex. Morison.*"

"B. Welton, Esq., Bridewell Hospital."

Sir A. Morison's Appendix, No. 1.

A Paper suggesting the propriety of the Study of the Nature, Causes, and Treatment of Mental Diseases, as forming part of the Curriculum of Medical Education, read before the Society for Improving the Condition of the Insane, by Sir *A. Morison*, M.D.

Gentlemen, 1 July 1844.

I embrace the present opportunity of offering a few observations upon a subject intimately connected with the object of our society, the extension amongst medical men of the knowledge of the nature, causes, and treatment of mental diseases.

For many years past I have studied to accomplish this very desirable object, and have attempted, in various ways, to induce medical men to turn their attention to it. At the present time the public appears to take an interest in it, and I have great hopes that something may be effected.

Above

Above 20 years ago, encouraged by his Royal Highness the late Duke of York (the guardian of his father, King George the Third, during his long and melancholy illness), I arranged a course of lectures upon the subject, which I delivered in 1823, and which I have continued to the present time. His Royal Highness was pleased to communicate his approbation in the following terms: "His Royal Highness the Duke of York much approves of the proposed undertaking of giving a course of lectures on the cure and prevention of mental diseases, and commands me to acquaint you that he will most readily afford you his patronage on the occasion. (signed) *Patrick MacGregor.* 1 October 1823."

Although the number of gentlemen who have been induced to honour these lectures by their attendance scarcely amounts to 150, you will find in the list appended the names of men of very considerable eminence.

In 1823 I made an application to the University of Edinburgh that these lectures might be attached to the course of study of the medical students in that place, and notice is taken of them in the Report of the Commissioners on the Universities in Scotland, vol. 1, p. 216 and p. 348, printed in 1837.

At page 216, Professor Alison, on 24th October 1826, in his examination, says:

"There is one point in regard to the medical school which I did not mention. It has been talked of at different times that there should be a professorship of mental diseases. This is what has occurred to me as being an improvement that might be useful in the University not that it might be imperative on the students, but that it might be an adjunct to the medical school.

"A number of men study here who afterwards become physicians to the lunatic hospitals in different parts of the country, and have the charge of many persons there confined, and to whom it is an object to have the care of such patients. I have thought, if that were the case, there might be a sort of clinical ward, put under the charge of such a professor in the establishment for lunatics here, which are very considerable.

"There is an institution of that kind at Paris; there is not a professorship attached to it, but there is a physician who has the charge of the lunatics. At the Salpetrière there is a full course of lectures given on the subject. I have heard some of them myself; they have been attended by several friends of mine at Paris, Englishmen, who have thought it very useful; and a similar institution, I think, might be easily formed here."

The question was put, "Would not that interfere with the treatment of the patients?—Of course, if such an establishment were formed, it could not be all the lunatics that could be made the subject of clinical lectures, but a certain number might." And at page 348 of the same Report, Dr. J. Abercrombie, in his examination, 10th November 1826, says,

Documents and Letters.

says, in reply to the question, "Would you consider that any advantage was likely to be derived from the institution of a class for the purpose of lectures on mental diseases, connected with the asylum, if it could be done?—I do not know; it comes in always as a part of the class of the practice of physic. I do not see much encouragement for a separate professorship of that kind; but a lectureship on that subject might be attached to the University with advantage."

The Rev. George H. Baird, principal of the University, in a letter dated 31st July 1827, says, "Though I am not professionally a medical person, and may therefore be considered as comparatively an incompetent judge of the value of a separate course of lectures on mental diseases, yet I presume to state my decided opinion, both on general principles and on a careful perusal of the syllabus of that course which you have repeatedly given here, and which was given, to my personal knowledge, with the high approbation of skilful medical men, that such a course would form an useful and important addition to the means of education at once for the physician and the surgeon."

Some time after I made an application to Government, but the importance of the subject did not then appear to be sufficiently appreciated. Of this importance, Sir William Ellis, a practical author of much experience, in his publication on insanity, 1838, says, "It is perfectly inconsistent with common sense to suppose that a man shall intuitively know how to treat insanity. It is universally acknowledged to be a most difficult and mysterious disease, and yet it is almost the only one on which the medical student receives no particular instruction. In his attendance on the hospitals, he will in all probability have met with almost every other variety of disease which afflicts human nature; at all events his lectures will have supplied him with some information as to their treatment; but I believe that my friend and colleague, Dr. Morison, of Cavendish-square, is the only lecturer in London expressly on insanity, and I understand that he has not a large class. The result is, that professional men, in other respects well educated, commence practice almost in a state of total ignorance on the subject. This ought to be remedied. The first step would be not to permit any student to be qualified to pass an examination either as a physician, surgeon, or apothecary, without producing certificates of having previously attended a course of lectures on insanity." He further adds, "I am aware that the instruction obtained from the mere attendance upon lectures would not be sufficient to qualify a professional man for undertaking the moral as well as the medical arrangement; but the knowledge that would by this means be gained of the premonitory symptoms, would frequently prevent an attack of insanity coming on. Clinical lectures have been very strongly recommended, and if the instruction of the pupils were the only object, there can be no doubt that they ought to be adopted; but it must be remembered that the first things to be considered are the care and welfare of the patients; and any one practically conversant with the disease will, I am sure, acknowledge that the excitement which would be produced in the minds of the patients by a number of pupils going round an asylum, in the same manner as they go round an hospital, would be most prejudicial. In many cases it would entirely prevent recovery.

recovery. This, therefore, as a general practice, can never be adopted; but there would be no objection to permit such members of the profession as determined to apply themselves exclusively or more particularly to the study of this disease, to attend public asylums daily."

In October 1839, I presented a petition to the magistrates managing the Middlesex Asylum at Hanwell, which I had been appointed by them consulting physician in 1832. The petition stated, "That great difficulty is found by the student of medicine in rendering himself familiar with the appearances of mental diseases, that the want of opportunity of becoming so during his studies, is often severely felt by the practitioner when called upon to undertake the treatment of insanity, to sign a certificate of his opinion of the mental condition of his patient, or to give evidence in a court of justice; that this opportunity may be obtained in the asylum under your management, in which there are now above 600 patients; that your petitioner has for many years been employed in preparing lectures on the nature, causes, and treatment of mental diseases, testimonials of the utility of which are laid before you; that he has continued to deliver these lectures since they were instituted in 1823, being, he believes, the only regular course of lectures on that subject delivered in this kingdom; that the utility of these lectures would be extended by your allowing your petitioner to take with him, once or twice a week, a limited number, not exceeding two or three pupils to visit Hanwell Asylum, in order to explain to them the different varieties of mental diseases, the various stages, complications, and terminations thereof, the mode of treatment, and the *post-mortem* appearances. Your petitioner confidently trusts that a due consideration of the advantages that may result to the community from this measure, in extending the practical knowledge of this important class of diseases, will induce you to grant the petition he has now the honour of laying before you."

The petition was agreed to "with the unanimous feeling of the magistrates." A similar reply was given to my petition of a similar nature by the magistrates managing the Surrey Lunatic Ayslum in 1842.

And I may add, that greater facility of admission to the wards of Bethlem Hospital and of St. Luke's Hospital is now, by the indulgence of the Governors, offered to students.

All our endeavours, however, will fall short of obtaining the desired object, unless means be taken to induce medical students to devote a portion of their time and attention to obtain a competent knowledge of this subject. This may be done, if, before admission into the medical services of the army, the navy, or the East India Company, or before admission into the Colleges of Physicians or of Surgeons, or into the Apothecaries Company, the applicant be required to produce a certificate of his attendance on a course of not less than lectures on mental diseases, together with such attendance at an hospital or asylum for the insane, containing not less than patients, as may be considered sufficient to ensure a competent knowledge of the subject, the expense of which to the student need not exceed a few pounds.

In conclusion, from the favourable replies to the petitions I have now read, there is little doubt of the managers of the hospitals and asylums for the insane readily giving every facility to this measure.

Sir

Documents and Letters.

Sir A. Morison's Appendix, No. 2.

Copy Report of Sir *Alexander Morison*, presented to the Quarterly Court of Governors, 25 January 1841.

To the President, Treasurer, and Governors of the Royal Hospitals of Bridewell and Bethlem.

Gentlemen,

I have the honour to lay before you the annual report of the state of the medical department of Bethlem Hospital for the year 1840, from which it appears that the number of admissions exceeds that in the preceding year in the proportion of 350 to 300; and the number of deaths in that of 23 to 22, being less in proportion to the number admitted than in 1839; whilst the number of cures, 180, is considerably greater than that in 1839, having been 142 in that year.

United Annual Report, of January 1841.

From the General Book of Entries and Discharges of both the Physicians.

	Curables.			Incurables.			Criminals.			Totals.		
	Males.	Females.	Total.	Males.	Females.	Total.	Males.	Females.	Total.	Males.	Females.	Total.
Remained in Hospital, 1 January 1840, including those out on leave of absence -	61	110	171	26	38	64	65	15	80	152	163	315
Admitted during the year 1840 - -	128	180	308	17	14	31	7	4	11	152	198	350
	189	290	479	43	52	95	72	19	91	304	361	665
Discharged:												
Cured - - - - - - -	64	109	173	0	1	1	5	1	6	69	111	180
Uncured - - - - - -	25	44	69	0	0	0	0	0	0	25	44	69
By request of friends - - -	1	3	4	2	0	2	0	0	0	3	3	6
Improper objects - - - -	21	16	37	0	0	0	0	0	0	21	16	37
Having been sent out on leave of absence, and no accounts afterwards received of their state of mind -	2	8	10	0	0	0	0	0	0	2	8	10
Died - - - - - - - -	4	8	12	3	1	4	5	2	7	12	11	23
Remaining, 31 December 1840:												
Out on leave - - - - -	7	9	16	0	0	0	0	0	0	7	9	16
In Hospital - - - - -	65	93	158	38	50	88	62	16	78	165	159	324
Totals - - -	189	290	479	43	52	95	72	19	91	304	361	665

Documents and Letters.

In pursuance of the plan adopted by me four years ago, I lay before you a statement of the cases consigned to my care, in the curable department, with the treatment in each of those which was discharged cured. And I also subjoin a summary of the result of five years, from the commencement of my attendance at the hospital.

The employment of the patients, and the restraint imposed upon them, have always been and continue to be subjects of the most earnest solicitude of your medical officers. In my first report to you, in January 1836, I mentioned that during the preceding year, 1835, out of 517 patients, 186 female patients, and 125 male patients, had been induced to employ themselves in various useful occupations; and since that time there has been no diminution in the zealous efforts of your officers to increase the proportion, in which they are cordially assisted by the matron and steward. In an establishment such as Bethlem Hospital, there are difficulties in the way of employing the patients which do not exist in many others, in which much more latitude in the use of instruments of labour is compatible with the safety of the patients. How far the expedient adopted in the Bicêtre, an hospital for male lunatics near Paris, in some respects similar to Bethlem, may be resorted to with advantage, I beg leave respectfully to submit to your consideration. A small farm, named Ferme St. Anne, about two miles from the hospital, has been hired, upon which upwards of 60 of the patients, under the charge of three attendants, are daily employed; and in the report published at Evreux, in 1839, by commissioners sent by the department of the Eure, to obtain the best information respecting the management of the insane in Great Britain and in France, this expedient is stated to have answered the most sanguine expectations.

In Bethlem the quantity of restraint imposed upon the patients in a state dangerous to themselves or to others is very limited, as will appear in the weekly returns laid before you now in a very much improved form; but however anxious your officers may be to avoid imposing it at all, the experience of many years forbids me entertaining a hope, expressed by some, that restraint may in all cases be avoided, without resorting to measures of a more injurious description; this subject, however, has been fully entered into in the report delivered to you in June last.

From the table presented to the court, it appears that, of 562 cases of insanity under my care, 393, or very nearly 70 per cent., have been dischaged well.

That the largest proportion has been of those labouring under the variety termed "mania," which also has been the most prevalent form of the disorder.

That in 13 per cent., or nearly one in eight cases, propensity to suicide has existed.

That the earlier the patient has been removed from exciting causes, and placed under treatment, the sooner and the more frequently has a cure taken place; in the first six months more than double the number have been cured than afterwards*.

That

* In the first six months, 104 males, 159 females; total, 263. Afterwards 45 males, 85 females; total, 130.

That the disease prevails most between the ages of 20 and 40; that more females suffer than males, and more married persons than single; but that a larger proportion recover of the former than of the latter.

That more are attacked in spring and summer than in autumn and winter; and that more recover in summer and autumn than in winter and spring.

That relapses have occurred in about 12 per cent., of whom more than one half have recovered and remain well.

That in about one-fourth of the cases no cause could be assigned; of the remaining three-fourths, hereditary predisposition, previous attacks of insanity, drunkenness, and childbearing; grief, anxiety, vexation, disappointment, and fear, have been the most prevalent causes assigned.

I have, &c.
(signed) *Alexander Morison.*

26, Cavendish Square, 21 January 1841.

STATEMENT of the CURABLE PATIENTS under the Care of Sir *A. Morison*, in 1840.

					Males.	Females.	TOTAL.
Remaining in hospital 1st January 1840, including those out on leave of absence					32	45	77
Admitted during the year 1840					62	91	153
					94	136	230
Cured					38	53	91
Uncured					11	14	25
Discharged :—	M.	F.	Total.				
Improper	0	0	0				
Paralytic	8	3	11				
Epileptic	3	1	4	23			
Idiotic	0	2	2				
Sick and weak	2	4	6				
Removed by friends	1 F.	1 M.	0	2	16	14	30
In default of appearance, or certificate	2 M.	3 F.	0	5			
Died					3	3	6
Remaining 31st December 1840 — Out on leave					3	4	7
Remaining 31st December 1840 — In hospital					23	48	71
TOTAL					94	136	230

From this statement it appears that, deducting the cases excluded by the rules of the hospital, and those remaining on the books 31st December 1840, there are to be accounted for 122 cases, of whom 91 were cured, 25 uncured, 6 died.

FEMALE PATIENTS under Sir *A. Morison's*

	Number.	DESCRIPTION.				Duration on Admission.	Character of the Disorder.
		Age.	State.	Number of Children.	Occupation.		
Not exceeding one month.	1	48	S.	- -	Small annuitant -	3 weeks	Melancholy - - -
	2	53	M.	2	Watchman's wife -	1 month	Monomania, with fear -
	3	36	S.	- -	Needlewoman -	1 month	- - Mania, without delirium.
	4	40	M.	3	Broker's wife -	3 weeks	Mania - - - -
	5	25	M.	2	Coachman's wife -	10 days -	Mania - - - -
	6	23	S.	- -	Needlewoman -	6 days -	Mania - - - -
	7	22	S.	- -	- - Needlewoman, and teacher of Sunday school.	14 days -	Mania - - - -
	8	23	S.	- -	Workhouse servant	1 month	Mania - - - -
	9	36	M.	1	Tea-dealer's wife -	1 week	Mania - - - -
	10	32	M.	3	Hatter's wife - -	3 weeks	Mania - - - -
	11	24	M.	1	Silk-weaver's wife -	4 weeks	Mania - - - -
	12	46	S.	- -	Domestic servant -	3 weeks	- - Monomania, religious pride.
	13	37	M.	1	Clerk's wife - -	1 month	Monomania, with fear -
	14	24	S.	- -	Domestic servant -	1 week	Mania - - - -
	15	22	S.	1	Dressmaker - -	1 month	Acute dementia - -
	16	33	M.	none -	- - Tailor's wife and nurse.	1 week	Mania - - - -
	17	47	M.	3	Carpenter's wife -	1 week	- - Monomania, with jealousy.

* General Remedies (G. R.) are

Care Discharged Cured in 1840.

Assigned Cause.	Hereditary.	Form of Treatment.	Month of Attack.	Month of Recovery.	REMEDIES and OBSERVATIONS.
- - - - -	Yes	6 weeks	Oct. -	Dec. -	- - General remedies.* Hyosciamus; camphor; has had several attacks.
A fright - - -	Yes	7 months	March	Nov. -	G. R.
- - Return to the scene of a former attachment.	No	14 months	April -	July -	- - G. R. Leeches repeatedly applied on the head; warm baths.
- - - - -	Yes	7 months	Sept. -	April -	G. R.
Child-bearing - -	No	1 month	March	April -	G. R.
Disappointed affection -	Yes	5 months	Dec. -	April -	G. R. Tartrate of antimony.
Disappointed affection -	No	6 months	Oct. -	May -	G. R. Tartrate of antimony.
Itch - - - -	No	5 months	Nov. -	May -	- - G. R. Unguent sulphur; deaf and dumb.
Child-bearing - -	Yes	8 months	Nov. -	July -	- - G. R. Croton oil, morphia, warm baths, fed by stomach pump.
Suckling - - -	No	8 months	August	April -	- - G. R. Cold lotions applied on the head.
- - Vexation, bad conduct of her father.	Yes	3 months	Sept. -	Jan. -	G. R.
- - - - -	- -	5 months	Jan. -	July -	G. R.
Suckling - - -	Yes	6 months	Jan. -	July -	- - G. R. Camphor, cinchona, generous diet.
Fright - - - -	No	4 months	March	July -	- - G. R. Hyosciamus, digitalis, camphor, generous diet.
- - - - -	Yes	2 months	March	June -	G. R.
- - Loss of memory, followed by intemperance.	No	5 months	May -	Oct. -	G. R.
Critical period of life -	No	6 months	June -	Dec. -	- - G. R. A course of mild laxatives with bitters.

(*continued*)

described at the end of these Tables.

FEMALE PATIENTS under Sir *A. Morison*'s

	Number.	DESCRIPTION. Age.	State.	Number of Children.	Occupation.	Duration on Admission.	Character of the Disorder.
Not exceeding one month.	18	57	M.	6	Butcher's wife -	3 weeks	- - Melancholy, disposition to suicide.
	19	50	S.	- -	Housekeeper - -	3 weeks	- - Melancholy, attempted suicide.
	20	20	S.	- -	Domestic servant -	1 month	- - Religious melancholy, disposition to suicide.
	21	36	M.	7	Metal refiner's wife	3 weeks	Mania - - - -
	22	30	S.	- -	Dressmaker - -	3 weeks	Melancholy - - -
	23	30	S.	- -	Milliner - - -	14 days -	Melancholy, with fear -
	24	41	S.	- -	Housemaid - -	14 days -	Religious melancholy -
Not exceeding two months.	25	21	S.	- -	Needlewoman -	8 weeks	Acute dementia - -
	26	40	M.	4	Stationer's wife -	2 months	Acute dementia - -
	27	16	S.	- -	- - Domestic servant (Roman-catholic).	6 weeks	Mania - - - -
	28	59	M.	1	Coalporter's wife -	8 weeks	- - Monomania, ideas of grandeur.
	29	34	M.	9	Labourer's wife -	6 weeks	Mania - - - -
	30	36	M.	7	Chairmaker's wife -	5 weeks	- - Acute dementia, attempted suicide.
	31	74	S.	- -	Housekeeper - -	2 months	Mania - - - -
	32	21	S.	- -	Straw-bonnet maker	7 weeks	Acute dementia - -
	33	22	S.	- -	Needlewoman -	2 months	Mania - - - -
	34	30	M.	8	Coachman's wife -	2 months	- - Melancholy, disposition to suicide.

Care Discharged Cured in 1840—*continued.*

Assigned Cause.	Hereditary.	Form of Treatment.	Month of Attack.	Month of Recovery.	REMEDIES and OBSERVATIONS.
- - Vexation, losses in business.	Yes	5 months	July -	Dec. -	G. R.
- - - - -	No	2 months	August	Nov. -	G. R. Generous diet.
- - Terror from a fire, menses obstructed.	No	2 months	August	Nov. -	- - G. R. Warm baths, camphor, aloetic medicines.
- - Fright before child-bearing.	No	2 months	Sept. -	Dec. -	- - G. R. Warm baths, hyosciamus.
Disappointed affection -	No	6 weeks	Sept. -	Dec. -	G. R. Warm baths.
- - - - -	Yes	10 months	Dec. -	Oct. -	- - G. R. A course of mild laxatives with bitters; second attack.
- - Change of mode of religious worship.	No	9 months	Feb. -	Dec. -	G. R.
Suppressed menses -	No	9 months	April -	March	- - G. R. Shower baths, camphor, aloetic medicines.
- - - - -	Yes	11 months	July -	August	- - G. R. Blister to the occiput.
- - - - -	No	10 months	Dec. -	Nov. -	- - G. R. Warm baths, camphor, aloetic medicines.
- - Fright, fell into a deep ditch of water.	No	2 months	Feb. -	May -	G. R.
- - - - -	Yes	6 weeks	March	June -	
Child-bearing - -	Yes	7 months	April -	Dec. -	G. R.
Drunkenness - -	Yes	2 months	April -	August	G. R. A second attack.
- - Hysteria, suppressed menses.	No	4 months	June -	Nov. -	- - G. R. Warm baths, cinchona, camphor, aloetic medicines.
- - Quarrel with her mother.	No	2 months	July -	Nov. -	G. R. A second attack.
- - - - -	Yes	4 months	August	Feb. -	G. R.

(continued)

FEMALE PATIENTS under Sir *A. Morison's*

	Number.	DESCRIPTION. Age.	State.	Number of Children.	Occupation.	Duration on Admission.	Character of the Disorder.
Not exceeding three months.	35	29	M.	6	Baker's wife - -	9 weeks	Mania - - - -
	36	46	M.	3	Stonemason's wife -	3 months	Mania - - - -
	37	50	S.	- -	- - Reduced gentlewoman.	3 months	Melancholy - - -
	38	27	S.	- -	Lady's companion -	10 weeks	- - Monomania, ideas of grandeur.
	39	50	M.	none -	Blacksmith's wife -	3 months	Mania - - - -
	40	50	M.	7	Artist's wife - -	3 months	Melancholy - - -
	41	49	W.	4	Shoe-binder - -	3 months	Monomania, with fear -
	42	25	S.	- -	Domestic servant -	3 months	- - Melancholy, disposition to suicide.
	43	30	M.	3	Shoemaker's wife -	9 weeks	Mania - - - -
Not exceeding six months.	44	34	M.	none -	Bootmaker's wife -	6 months	- - Melancholy, disposition to suicide.
	45	32	S.	- -	Dressmaker - -	6 months	- - Religious melancholy, disposition to suicide.
	46	15	S.	- -	Tailor's daughter -	4 months	Acute dementia - -
	47	37	M.	3	Blacksmith's wife -	4 months	Mania - - - -
	48	35	M.	6	Coachman's wife -	6 months	- - Monomania, with jealousy.
Not exceeding 12 months.	49	42	M.	1	Sea captain's wife -	10 months	- - Melancholy, disposition to suicide.
	50	40	M.	3	Gardener's wife -	7 months	Melancholy - - -
	51	26	S.	- -	Nurserymaid - -	0 months	Religious melancholy -
	52	47	M.	8	Clerk's wife - -	7 months	Melancholy - - -
	51	58	M.	7	Labourer's wife -	8 months	- - Melancholy, disposition to suicide.

Care Discharged Cured in 1840—*continued.*

Assigned Cause.	Hereditary.	Form of Treatment.	Month of Attack.	Month of Recovery.	REMEDIES and OBSERVATIONS.
Child-bearing - -	No	3 months	Oct. -	March	- - G. R. A course of mild laxatives.
Neuralgia - - -	No	12 months	May -	August	- - G. R. Blister to the nape of the neck, ointment, with tartrate of antimony.
Grief and fright - -	Yes	11 months	Sept. -	Nov. -	- - G. R. Warm baths, wine, cure preceded by carbuncles.
- - - - - -	No	4 months	July -	Feb. -	- - G. R. Tartrate of antimony, hyosciamus.
Drunkenness - -	No	8 months	Feb. -	Dec. -	G. R.
- - Vexation, losses in business.	Yes	2 months	Feb. -	July -	G. R. Had menorrhagia.
- - Vexation, from embarrassed circumstances.	Yes	2 months	March	August	G. R. A second attack.
- - Reading on abstruse subjects, and long watching a sick person.	No	4 months	April -	Oct. -	G. R.
- - Terror of her husband's cruelty.	No	3 months	June -	Nov. -	G. R.
Rheumatism - - -	Yes	7 months	August	Sept. -	- - G. R. Blisters to shaved head.
- - Fright, suppressed menses.	No	12 months	Oct. -	May -	- - G. R. Course of mild laxatives, shower baths, hyosciamus, camphor, ammonia, aloetic medicines, hip baths.
- - - - - -	No	4 months	Dec. -	Sept. -	G. R.
Grief, death of child -	No	2 months	April -	O t. -	- - G. R. Hyosciamus, digitalis, camphor.
Child-bearing - -	Yes	9 months	Sept. -	Dec. -	G. R.
A fright - - -	Yes	6 months	Sept. -	Jan. -	- - G. R. Warm baths, douche, valerian, blister, and issue on the neck.
Severe dyspepsia - -	No	15 months	Feb. -	Dec. -	- - G. R. Leeches on her head, seton in the neck, a course of mercury.
- - - - - -	No	4 months	July -	August	G. R. Shower baths.
Child-bearing - -	No	2 months	Jan. -	Sept. -	G. R.
- - - - - -	Yes	2 months	Dec. -	Oct. -	G. R.

MALE PATIENTS under Sir *A. Morison*'s

	Number.	DESCRIPTION.				Duration on Admission.	Character of the Disorder.
		Age.	State.	Number of Children.	Occupation.		
Not exceeding One Month.	1	24	M.	2	-- Dealer in fishing-tackle.	3 weeks	Monomania, with fear -
	2	53	M.	2	-- Keeper of a coffee-house.	14 days -	Acute dementia - -
	3	55	M.	4	Tailor - - -	3 weeks	-- Monomania, with propensity to suicide
	4	31	M.	none -	Fishmonger - -	1 month	-- Mania, succeeded by dementia.
	5	55	M.	7	Gardener - -	2 weeks	-- Monomania, ideas of grandeur.
	6	31	S.	- -	Bookseller - -	1 week -	Mania - - - -
	7	46	M.	none -	Tea-dealer - -	1 month	Mania - - - -
	8	23	S.	- -	Upholsterer - -	1 month	Mania - - - -
	9	46	M.	1	Farmer - - -	1 month	Mania - - - -
	10	37	S.	- -	Solicitor's clerk -	1 month	Acute dementia - -
	11	24	S.	- -	Shoemaker - -	1 week -	Monomania, with fear -
	12	47	M.	7	Tanner - - -	2 weeks	Mania - - - -
	13	36	S.	- -	-- Clerk on the railway.	3 weeks	-- Monomania, ideas of grandeur.
	14	32	M.	3	Corn-chandler -	4 weeks	Mania - - - -
	15	25	S.	- -	Labourer - -	2 weeks	Mania - - - -
	16	17	S.	- -	Upholsterer - -	2 weeks	Mania - - - -
Not exceeding Two Months.	17	17	S.	- -	-- Fishmonger's apprentice.	6 weeks	Mania, religious pride -
	18	31	S.	-	Schoolmaster - -	2 months	-- Mania, ideas of grandeur.
	19	55	M.	none -	Stationer - -	2 months	-- Mania, ideas of grandeur.

Care Discharged Cured in 1840.

Assigned Cause.	Hereditary.	Form of Treatment.	Month of Attack.	Month of Recovery.	REMEDIES and OBSERVATIONS.
Blow on the head - -	Yes	4 months	Feb. -	June -	-- General Remedies. Warm baths.*
- - - - -	No	7 months	Oct. -	May -	G. R.
Much stooping - -	No	5 months	June -	Dec. -	-- G. R. Warm baths, a course of mild laxatives; a second attack.
- - - - -	No	15 months	August	Dec. -	-- G. R. Leeches to the head, blister on nape, seton in ditto, a course of mercury.
Pleurisy - - -	No	4 months	Oct. -	March	G. R. A third attack.
- - - - -	No	15 months	April -	July -	-- G. R. Head shaved, leeches to head, blisters, two blisters to nape, warm baths, douche, a course of mercury; a third attack.
- - - - -	No	4 months	Nov. -	April -	-- G. R. Has had several attacks.
- - - - -	No	4 months	Oct. -	Oct. -	G. R. A second attack.
- - - - -	Yes	3 months	Dec. -	April -	-- G. R. A third attack; tartrate of antimony, hyosciamus, a course of mild laxatives.
-- Vexation from embarrassment of affairs.	No	3 months	Sept. -	Jan. -	-- G. R. Generous diet and wine.
- - - - -	No	3 months	Feb. -	April -	G. R. A second attack.
Typhus fever - -	Yes	1 month	April -	June -	G. R.
-- Over-exertion in business, and drinking.	No	3 months	June -	Sept. -	G. R.
-- Blow on the head, and drunkenness.	No	5 months	April -	Oct. -	G. R. Warm baths.
-- Grief, death of a brother.	No	4 months	July -	Nov. -	G. R.
- - - - -	No	6 weeks	Jan. -	March	G. R.
-- Change of mode of religious worship.	-	6 months	July -	Feb. -	-- G. R. Warm baths and douche.
Over study - - -	- -	9 months	Nov. -	Oct. -	G. R.
A fall - - - -	No	10 months	Dec. -	Dec. -	-- G. R. A course of mild laxatives.

(*continued*)

* *See* Note in following pages, 346–7.

MALE PATIENTS under Sir *A. Morison's*

Number.	DESCRIPTION.				Duration on Admission.	Character of the Disorder.
	Age.	State.	Number of Children.	Occupation.		
Not exceeding Two Months. 20	47	M.	5	Jeweller - -	2 months	- - Mania, ideas of grandeur.
Not exceeding Two Months. 21	21	S.	- -	Gardener - -	2 months	Acute dementia - -
Not exceeding Two Months. 22	26	S.	- -	Silk-manufacturer -	2 months	Mania - - - -
Not exceeding Two Months. 23	47	M.	7	Cabinet-maker -	7 weeks	Mania - - - -
Not exceeding Three Months. 24	49	M.	4	Fisherman - -	3 months	Mania - - - -
Not exceeding Three Months. 25	40	M.	6	Waterman - -	9 weeks	Mania - - - -
Not exceeding Three Months. 26	41	S.	- -	Farm servant -	3 months	Acute dementia - -
Not exceeding Three Months. 27	37	M.	3	Horsekeeper - -	3 months	Acute dementia - -
Not exceeding Three Months. 28	19	S.	- -	Artist's apprentice -	11 weeks	Acute dementia - -
Not exceeding Three Months. 29	21	S.	- -	Bookseller - -	3 months	Acute dementia - -
Not exceeding Six Months. 30	16	S.	- -	Errand boy - -	4 months	Mania - - - -
Not exceeding Six Months. 31	54	M.	4	Tailor - - -	4 months	Mania - - - -
Not exceeding Six Months. 32	30	M.	4	Farm servant - -	4 months	- - Monomania, religious pride.
Not exceeding Six Months. 33	39	M.	none -	Shipwright - -	4 months	Acute dementia - -
Not exceeding Six Months. 34	20	S.	- -	Student - - -	4 months	- - Monomania, ideas of grandeur.
Not exceeding Six Months. 35	50	M.	14	Fishmonger - -	5 months	- - Melancholy, disposition to commit murder.
Not exceeding 12 Months. 36	47	M.	1	Farmer - - -	6 months	- - Melancholy, disposition to commit suicide.
Not exceeding 12 Months. 37	55	M.	11	Farmer - - -	11 months	Mania - - - -
Not exceeding 12 Months. 38	40	M.	2	Dealer in skins -	10 months	Melancholy - - -

* General Remedies are those employed in every case; they include: Removal from digestive organs; regulation of employment, useful or amusing; of the visit of friends;

Care Discharged Cured in 1840—*continued.*

Assigned Cause.	Hereditary.	Form of Treatment.	Month of Attack.	Month of Recovery.	REMEDIES and OBSERVATIONS.
-- Excitement during an election.	- -	3 months	Dec. -	May -	General remedies.*
- - Vexation for having drowned a favourite puppy.	No	6 months	Feb. -	Oct. -	G. R.
- - - - - -	- -	1 month	March	July -	G. R.
-- Vexation on account of his wife's insanity.	- -	10 weeks	Jan. -	May -	G. R. A second attack.
Drunkenness - -	Yes	3 months	Sept. -	March	G. R.
- - A fall, and suppression of an habitual epistaxis.	No	16 months	Sept. -	March	-- G. R. Blister to the nape, a course of mild laxatives.
- - - - - -	No	19 months	Nov. -	Sept. -	- - G. R. Warm baths, douche, a course of mild laxatives and bitters.
Fall on his head - -	No	5 months	Dec. -	August	G. R. Warm baths.
Disappointment - -	No	6 months	Dec. -	Sept. -	- - G. R. Shower baths, warm baths, douche.
-- Getting wet, in convalescence from fever.	No	3 months	June -	Dec. -	G. R.
Scarlet fever - - -	No	1 month	Oct. -	March	G. R. Warm baths.
- - Over study of religious books.	No	3 months	Nov. -	June -	G. R. Warm baths.
- - - - - -	No	2 months	Nov. -	May -	G. R.
Fever - - - - -	No	6 months	Dec. -	Oct. -	G. R. Warm baths, douche.
- - Difficulties on religious subjects.	Yes	6 months	Jan. -	Dec. -	G. R. Warm baths.
Vexation from losses -	No	2 months	Dec. -	May -	G. R.
- Vexation from reduced circumstances.	No	13 months	Oct. -	April -	-- G. R. Croton oil, warm baths.
Vexation from losses -	No	9 months	Oct. -	June -	G. R.
Drunkenness - -	No	9 months	Jan. -	August	- - G. R. Warm baths, issue on course of the sagittal suture, a course of mild laxatives.

exciting causes; attention to the general health, in particular to the state of the
of religious worship.

SUMMARY of 562 Cases of Insanity,

Included within the Rules of Admission to Bethlehem Hospital, treated by Sir *A. Morison*, in Five Years ending 1840.

	Duration of the Disease on the Commencement of Treatment.	FEMALES. Cured.	Uncured.	TOTAL.	MALES. Cured.	Uncured.	TOTAL.	
Mania - -	1 month -	73	12	85	37	5	42	
	3 months -	36	11	47	29	9	38	
	6 months -	11	6	17	9	9	18	
	12 months -	5	2	7	3	4	7	
				Died - 8			Died - 5	
				164	–	–	110 =	274
Monomania -	1 month -	10	2	12	13	2	15	
Elated Insanity -	3 months -	6	3	9	12	1	13	
	6 months -	2	2	4	1	2	3	
	12 months -	1	4	5	0	1	1	
				Died - 2			Died - 3	
				32	–	–	35 =	67
Melancholy Insanity.	1 month -	20	8	28	11	2	13	
	3 months -	26	6	32	7	0	7	
	6 months -	14	3	17	4	3	7	
	12 months -	7	7	14	2	3	5	
				Died - 8			Died - 2	
				99	–	–	34 =	133
Insanity with Love	1 month -	4	2	6				
	3 months -	0	2	2				
	6 months -	1	0	1				
	12 months -	0	3	3				
				12	–	–	- - -	12
Jealous Insanity -	12 months -	0	1	1	1	–	1 =	2
Fear Insanity -	1 month -	5	0	5	6	4	10	
	3 months -	5	2	7	1	0	1	
	6 months -	1	3	4	2	3	5	
	12 months -	1	2	3	1	0	0	
				Died - 1				
				20	–	–	16 =	36

	Duration of the Disease on the Commencement of Treatment	FEMALES. Cured.	Uncured.	TOTAL.	MALES. Cured.	Uncured.	TOTAL.
Monomania Demonia.	3 months -	1	0	1			
	6 months -	0	1	1			
	12 months -	1	0	1			
				3	–	–	- - - 3
Acute Dementia -	1 month -	1	1	2	5	0	5
	3 months -	8	1	9	5	2	7
	6 months -	1	1	2	0	1	1
	12 months -	3	0	3	1	1	2
							Died - 2
				16	–	–	17 = 33
Mania without Delirium.	1 month -	1	0	1			
	3 months -	1	0	1			
				2	–	–	- - - 2
	Total - -	244	86	Died - 19	149	52	Died - 12 = 562

In Five Years - - - { 393 - - - Cured. / 138 - - - Uncured. / 31 - - - Died.

	FEMALES.	MALES.	
Propensity to suicide occurred in 73 of the above cases, viz. - - -	35	17	Recovered - - 52
	11	4	Uncured - - - 15
	4	2	Died - - - - 6
			73
Propensity to murder existed in four cases - - - - - -	1	1	Cured - - - 0
	1	1	Uncured - - - 4
Propensity to steal - - - -	1	- -	Cured - - - 1
Propensity to burn - - - -	- -	1	Uncured - - - 1
Propensity against nature * - -	- -	1	Cured - - - 1
Propensity to drunkenness - -	1	1	Cured - - - 2

* In this case a cure followed the exhibition of large doses of camphor.

AGES.

	FEMALES.	MALES.
Under 15 years - - - - -	2	2
From 15 to 20 - - - - - -	16	15
„ 20 to 30 - - - - - -	101	64
„ 30 to 40 - - - - - -	100	55
„ 40 to 50 - - - - - -	72	41
„ 50 to 60 - - - - - -	43	29
„ 60 to 70 - - - - - -	15	7
	349	213

STATE.

	FEMALES.	MALES.	
Single - - - - - - -	93	75	Cured.
	48	31	Uncured.
	4	3	Died.
	145	109	
	254		
Married - - - - - -	133	66	Cured.
	29	19	Uncured.
	14	9	Died.
	176	94	
	270		
Widowed - - - - - -	18	8	Cured.
	9	2	Uncured.
	1	0	Died.
	28	10	
	38		

SEASONS.

	FEMALES.	MALES.		FEMALES.	MALES.
Commenced in,—			Discharged well,—		
January - -	15	11	January - -	11	5
February - -	24	12	February - -	18	4
March - - -	42	22	March - - -	18	9
April - - -	34	17	April - - -	26	11
May - - -	30	16	May - - -	13	17
June - - -	40	20	June - - -	22	16
July - - -	24	22	July - - -	21	16
August - - -	30	14	August - -	23	11
September - -	30	22	September - -	22	10
October - - -	22	21	October - -	17	17
November - -	23	19	November - -	15	15
December - -	35	17	December - -	38	18

RECURRENCE of the DISORDER in the course of Five Years.

In 1 person three times
In 4 persons twice - - } All of whom recovered.
In 23 persons once - -
In 20 persons once, of whom 1 died, 3 became paralytic, 16 remain insane.

DURATION of TREATMENT in 393 Cases discharged Well.

	FEMALES.	MALES.		FEMALES.	MALES.
1 Month - - -	1	3	10 Months - -	15	1
2 ditto - - -	23	22	11 ditto - -	6	9
3 ditto - - -	50	26	12 ditto - -	11	5
4 ditto - - -	23	20	13 ditto - -	3	2
5 ditto - - -	30	16	14 ditto - -	4	2
6 ditto - - -	32	17	15 ditto - -	0	0
7 ditto - - -	17	10	16 ditto - -	3	2
8 ditto - - -	11	5	17 ditto - -	1	1
9 ditto - - -	12	8	18 ditto - -	2	0

STATION and EMPLOYMENT.

MALES.

1 Clergyman.
1 Surgeon.
1 Solicitor.
1 Stock Broker.
1 Army Captain.
1 Sea Captain.
2 Artists.
3 Schoolmasters and Tutors.
3 Students.
1 Chemist.
2 Engineers.
1 Ventriloquist.
5 Printers.
8 Booksellers, Stationers, and Bookbinders.
19 Shoemakers and Dealers in Leather.
8 Farmers.
9 Gardeners.
6 Greengrocers and Fruiterers.
16 Labourers.
1 Scavenger.
1 Costermonger.
3 Cattle-dealers.
3 Butchers.
6 Fishmongers.
4 Bakers.
9 Tailors.
4 Clothesmen and Hawkers.
4 Linen Drapers.
1 Dyer.
1 Silkweaver.
8 Sailors, Watermen, and Fishermen.
16 Carpenters, Cabinet-makers, Coachwrights, Coopers, Carvers, and Sawyers.
10 Blacksmiths, Founders, and Pewterers.
9 Painters.
4 Publicans and Coffee-house Keepers.
3 Grocers and Tea-dealers.
1 Stoneware Merchant.
1 Mason.
13 Clerks and Shopmen.
2 Butlers.
2 Coachmen.
4 Grooms and Hostlers.
8 Servants.
3 Carriers and Porters.
1 Policeman.
1 Gunner.

FEMALES.

6 Wives and Daughters of Professional Men.
125 Ditto of Tradesmen.
16 Ditto of Farmers and Gardeners.
10 Ditto of Sailors and Watermen.
7 Ditto of Publicans.
34 Ditto of Labourers and Servants.
13 Teachers and Governesses.
35 Milliners, Dressmakers, and Needlewomen.
23 Females, supporting themselves in trade, or with small annuities.
77 Females in Servitude, including Ladies' Companions and Maids, Housekeepers, Cooks, and domestic Servants.
4 Prostitutes.

ASSIGNED CAUSE.

	FEMALES.	MALES.
Hereditary predisposition	26	12
Besides the above, hereditary predisposition was stated to have existed in 45 cases, in which other exciting causes were assigned; viz., 34 females and 11 males.		
Irregularity in the Uterine Functions,		
Suppressed menses - 10		
Uterine hæmorrhage 1	17	0
Abortion - 3		
Critical period 2		
Uterine disease 1		
Pregnancy	3	0
Child-bearing	33	0
Protracted suckling	4	0
Weaning	2	0
Fever	12	4
Inflammation of the eyes	1	0
Bronchitis	1	0
Pleurisy	0	1
Pulmonary disease	1	0
Enteritis	0	1
Constipation	0	1
Falls and blows on the head	3	7
Acute rheumatism	7	3
Tic doloureux	1	0
Chorea	0	1
Exposure to the heat of the sun	1	3
Bathing in very cold water	0	1
Excessive fatigue	1	2
Sea sickness	1	0
Drunkenness	12	31
Fumes of wine	0	1
Fumes of blacking	0	1
Fumes of charcoal and lead	0	1
Lues	1	1
Excessive use of mercury	0	1
Grief	35	1
Vexation	15	13
Remorse of conscience	1	0
Disappointed affection	20	5
Disappointed hope	1	4
Anxiety	14	7
——— distressed circumstances	8	8
Fear, terror	21	7
Surprise	0	1
Joy	1	3
Quarrelling	4	2
Celibacy	0	1
Marriage	0	2
Jealousy	1	1
Adultery	0	1
Excessive mental exertion, including much reading on religious subjects, religious doubts and fears, change of religious opinions	13	10
Previous attacks of insanity	12	7
No cause assigned	76	68

CASES WHO HAVE DIED IN FIVE YEARS.

FEMALES.

No.	Age.	State.	Occupation.	Assigned Cause.
1	16	S.	Servant	
2	24	S.	Lady's maid	
3	29	M.	Joiner's wife	Vexation
4	31	M.	Dress-maker	Drunkenness
5	34	M.	Clerk's wife	Terror
6	36	M.	Blacksmith's wife	Excessive reading the Revelations, &c.
7	40	M.	Broker's wife	Miscarriage; hereditary
8	43	M.	Servant	Formerly insane
9	47	S.	Cook	
10	48	M.	Navy Commissioner's wife	Terror; hereditary; the arrest of husband.
11	50	M.	Groom's wife	
12	52	M.	Bricklayer's wife	Grief; death of child
13	52	S.	Teadealer	Disappointed affection
14	53	M.	Calico printer's wife	Drunkenness; hereditary
15	56	M.	Gardener's wife	Formerly insane
16	57	M.	Victualler's wife	Acute rheumatism
17	57	M.	Wood-dealer's wife	Anxiety about her son
18	59	W.	Butcher's widow	Anxiety
19	60	M.	Miller's wife	Excessive reading on religious subjects.

- - - - CASES WHO HAVE DIED IN FIVE YEARS.

- - - - - - - - FEMALES.

Duration on Admission.	Character of Mental Disorder.	Died after Admission.	CAUSE OF DEATH.
10 days -	Mania - - - -	17 days -	- - Exhaustion after great cerebral excitement.
1 month	- - Melancholy on religion; propensity to suicide.	14 days -	Exhaustion; refusal of food.
6 weeks	- - Melancholy; propensity to suicide.	10 weeks	Exhaustion; refusal of food.
1 month	Mania - - - -	11 days -	Exhaustion.
9 days -	Mania - - - -	18 days -	Exhaustion.
2 weeks	Mania - - - -	3 days -	Exhaustion.
5 weeks	Mania - - - -	7 months	- - Dropsy; fluid in the chest and abdomen; heart diseased.
2 weeks	Mania - - - -	10 days -	Apoplexy.
2 weeks	Melancholy - - -	6 weeks	Exhaustion.
10 weeks	- - Melancholy on religion, with propensity to suicide.	20 days -	Exhaustion; refusal of food.
6 months	Mania - - - -	10 days -	Exhaustion.
10 months	Elated insanity - - -	10 months	Synochus (fever).
7 months	Melancholy on religion -	6 months	Diarrhœa.
2 months	Elated (paralytic) - -	1 month	Strangulated hernia.
6 months	Melancholy - - -	2 months	Hydrothorax.
4 months	- - Melancholy; propensity to suicide.	3 weeks	- - Suicide; cut with a piece of glass, it is said, the superior thyroid artery.
2 months	Fear - - - -	4 months	Pleurisy.
3 months	Mania - - - -	1 day -	Exhaustion.
10 months	Melancholy on religion -	3 weeks	- - Syncope; expired in less than two minutes, without a struggle, and without speaking.

Documents and Letters.

MORBID APPEARANCES.

1. No deviation from the normal condition of the brain and membranes observed, except congestion of the blood-vessels, both external and internal; the cerebral substance, the ventricles, and the arachnoid were perfectly healthy. The left lung was hepatized, and marks of disease were observed in the chest and abdomen.

7. The blood-vessels of the brain and membranes turgid; the cellular texture of the pia mater on the convexities of the cerebral hemispheres largely infiltrated; the fluid in the lateral ventricles increased in quantity. There was much fluid in the cranium after the brain had been removed.

8. The convolutions of the cerebral hemispheres were partially flattened; the blood-vessels of the brain and membranes were loaded. When the dura mater were divided and detached, the subjacent membranes exhibited three or four small patches of a bright yellow discolouration, but no fluid could be squeezed out of them; the cut surfaces of the cerebral substance everywhere exhibited numerous bloody points; the lateral ventricles were distended with about two ounces of turbid fluid in each; there was thick yellow pus, about one or two tea-spoonfuls in the bottom of the reflected horns of each ventricle; the lining membrane of the ventricles exhibited vascular ramifications and minute ecchymoses, and the arachnoid coat covering the pons varolii and neighbouring parts of the brain was thickened and opaque, and of a light yellow colour from purulent infiltration; the substance of the brain was soft, particularly around the ventricles and at the basis. The cause of these appearances is conceived by Mr. Lawrence, to whom I am indebted for the description of the morbid appearances, to have been acute inflammation of the lining membrane of the ventricles and of the arachnoid coat.

15. Much blood escaped on dividing the integuments and sawing the skull, and the vessels of the brain and membranes were enlarged. Five or six quarts of fluid, of a reddish colour, were contained in the chest.

17. The blood-vessels of the brain and membranes were turgid, in other respects the contents of the cranium appeared healthy; marks of inflammation were visible in the pleura, in the cavity of which bloody fluid was contained.

18. A large quantity of blood escaped from the vessels of the head in cutting the skin and sawing through the skull; the vessels of the brain were moderately injected, and there was slight serous infiltration of the pia mater; in other respects the contents of the cranium were perfectly healthy, as also those of the thorax and abdomen.

19. In this case there was general fulness of the blood-vessels, sections of the cerebral substance everywhere exhibiting numerous divided orifices. There was serous infiltration of the pia mater; at some points of the cerebral hemispheres the convolutions were shrunk so as to leave conspicuous intervals, which were occupied by the infiltration pia mater; the substance of the brain appeared to be healthy and firm; the trachea and larynx, the contents of the chest and of the abdomen, were all perfectly healthy, exhibiting no appearance to throw any light on the very sudden death of this patient, which, it was imagined, might have proceeded from an affection of the heart or some large blood-vessel.

CASES WHO HAVE DIED IN FIVE YEARS.

MALES.

No.	Age.	State.	Occupation.	Assigned Cause.	Duration on Admission.	Character of Mental Disorder.	Died after Admission.	Cause of Death.
1	19	S.	Fruiterer	- - - -	1 month	Elated insanity	19 days	- - Exhaustion after great cerebral excitement.
2	25	M.	Costermonger	- - - -	2 months	Elated insanity	11 months	Phthisis.
3	35	S.	Merchant's son	- - - -	10 months	Dementia	10 months	Apoplexy.
4	36	M.	Farmer	- - Vexation; adultery detected; hereditary.	4 months	- - Melancholy; propensity to suicide.	3 months	Diarrhœa.
5	39	M.	Grocer	- - Vexation; misfortune in business.	3 months	Mania	8 days	- - Exhaustion after great cerebral excitement.
6	40	S.	Mason	Drunkenness	3 weeks	Mania	5 months	Pulmonary disease.
7	40	M.	Attorney's clerk	Quarrelling	2 weeks	Elated insanity	4 months	Pulmonary disease.
8	43	M.	A porter	- - Anxiety about business.	14 days	Mania	22 days	General paralysis
9	44	M.	Hostler	- - Marriage; hereditary.	6 months	Acute dementia	1 month	Exhaustion.
10	45	M.	Tailor	- - - -	3 months	Mania	15 days	Exhaustion.
11	46	M.	Clergyman	- - Distressed circumstances.	3 months	- - Melancholy; propensity to suicide.	11 days	- - Exhaustion after celebral excitement and refusal of food.
12	60	M.	Shoemaker	Anxiety; hereditary	1 month	Mania	4 days	Exhaustion.

MORBID APPEARANCES.

Documents and Letters.

3. Remarkable turgidity of the blood-vessels, in the substance of the brain especially; the superior longitudinal sinus filled with a coagulum firmly adhering to its sides like a recent clot, at two or three points gradually changed into a dull reddish brown fluid of the consistence of pus; a large vein about the middle of each hemisphere greatly distended, and filled with a fine coagulum, presenting at some points a similar fluid; this vein terminated at each side in the cavernous sinus; other veins were filled with firm coagula; a considerable ecchymosis of the pia mater and slight infiltration of that coat. The lungs were in parts hepatized and contained an abscess.

5. Blood-vessels of the brain and membranes turgid; numerous bloody points in the cerebral substance, and the medullary matter presenting here and there a faint violet tint; slight serous infiltration of the pia mater in the cerebral hemispheres; about an ounce of clear fluid in each lateral ventricle. The lungs were diseased.

6. The blood-vessels of the brain and membranes extremely turgid; the cellular texture of the pia mater in a state of serous infiltration over the entire upper and lateral surfaces of the cerebral hemispheres; the lateral ventricles contained rather more than the normal quantity of fluid, and there was much fluid in the basis of the skull. Extensive hepatization with a large abscess in the lungs.

7. The arachnoid coat somewhat thickened and opaque, and the pia mater considerably infiltrated over the cerebral hemispheres; the lateral ventricles enlarged, and filled with transparent fluid; a considerable quantity of fluid in the basis of the skull; no deviation from the healthy state observed in the substance of the brain.

8. The blood-vessels of the brain and membranes turgid; numerous bloody points appeared in every situation; the arachnoid coat thickened and partially opaque, especially along the edges of the fissure between the cerebral hemispheres; the cellular substance of the pia mater in the hemispheres considerably infiltrated. The structure of the brain appeared natural.

The mucous membrane of the trachea and bronchii of a bright red, and covered with a thick yellow secretion; the lungs adhered to the sides in several places; contained an abscess and an enlarged bronchial gland, containing a substance like putty.

10. The blood-vessels of the brain and membranes were turgid, the arachnoid coat on the cerebral hemispheres was considerably thickened iand opaque; there was great infiltration of the pia mater, and an ncreased quantity of fluid in the ventricles.

3.—Remarks by Mrs. *Hunter*, the Matron.

To the President, Treasurer and Governors of Bethlehem Hospital, August 1852.

My Lords and Gentlemen,

Permit me to express the satisfaction I feel at the opportunity afforded me of laying before your Committee such observations as may, I trust, remove any unfavourable impression which certain statements in the Commissioners' Report are calculated to create.

Extract. Page 7.

"The power of classifying and employing the female patients lately transferred to her (the matron) by the treasurer, as already referred to, and which she now exercises quite independent of the medical officers of the institution."

As this statement is reiterated in different forms no fewer than seven times in the report, it is evidently one to which the Commissioners attach very great importance. It is therefore the more remarkable, that in this instance the Commissioners have entirely misapprehended the duties of the officers they reflect upon, as well as the rules of the hospital with which they were furnished in the first instance.

The duty of classification is erroneously assumed by them to have been taken from the resident medical officer and transferred to the matron.

The fact is, the apothecary never was invested with the classification, except "in the absence of the physicians," and subject to revision by them daily. The physicians (who are also erroneously described as "visiting physicians," a distinction which ought to be apparent to the professional members of the Commission) are responsible for the entire course of treatment, both moral and medical, of their respective patients, and direct and control the classification. If in their absence any deviation from the prescribed practice became necessary, it would, of course, devolve either upon the apothecary or the matron, as the only resident officers to make such alterations; but not only do the rules, but also the evidence of Dr. Monro and Sir Alexander Morrison show that such alterations are at all times subject to the supervision and correction of the physicians.

In Dr. Monro's evidence, the following questions and answers occur:

"980. *Q.* Have you any powers, and if any, what are they, over the resident medical officer, matron, or attendants?—*A.* I look upon myself as the superior officer, and I do occasionally give directions to each."

"1012. *Q.* Do you know who classifies and distributes the female patients?—*A.* The matron and Dr. Wood.

"1013. *Q.* Do you ever make suggestions thereon?—*A.* Yes; I often suggest when I think a patient is well enough to go into the upper gallery," &c.

 "963. *Q.* In

Documents and Letters.

"963. *Q.* In short, as a medical man, you are not restricted?—*A.* Not at all."

In Sir A. Morison's evidence, the following questions and answers occur:—

"1166. *Q.* Have you any power over the resident medical officer, matron, or attendants?—*A.* I presume they are entirely under the control of the physician when there, and are required to attend to his directions when absent, unless they see any reason to alter it."

To a question put to Sir A. Morison,

"1236. *A.* Whenever I saw a patient wrongly placed, I should alter it."

The foregoing evidence clearly demonstrates that the physicians were perfectly aware of their paramount authority in this respect, upon which they invariably acted, whenever they saw fit.

It would not be decorous in me to presume to defend the directions given to me by the treasurer, but it must be within the knowledge of the professional members of the Commission, that in authorising a matron, in the absence of the physicians, to take measures occasionally for the order of the female wards, and the employment and classification of the female patients, the treasurer was merely doing that which is the practice in every well-regulated asylum within their jurisdiction.

Without dwelling longer on this point, I submit but two observations, 1st, that this charge, if a matter of complaint, is not one for which I ought to be reflected on, as in discharging this difficult and important duty, I was acting in obedience to the authorities of the hospital; and 2dly, that it is somewhat inconsistent to blame me both for discharging additional duties, and for a general neglect of duty.

EXTRACT, page 8.

"Either from some misapprehension on her (the matron's) part, or from some alteration in the rules, of which we are not cognizant, she does not make any report on the subject of restraint, that report being now made by the nurses directly to the resident apothecary."

No female patient is ever placed under restraint, except by the immediate direction of a medical officer. Every patient being dangerous or annoying to others, and not to be soothed or controlled, is removed, as directed by the rules, into a bedroom, or, if necessary, into a padded room. This is done for temporary security, and the circumstance is immediately communicated to the medical officer, who visits the patient and gives such orders as he thinks proper. I consequently cannot report to the medical officer anything respecting restraint with which he is not already acquainted.

I am responsible for every case appearing to require restraint being immediately reported to the medical officer, and this has always been done.

EXTRACT

EXTRACT, page 8.

"Adverting to her (the matron's) duties to see that the linen of the patients is properly changed, washed, and returned, and that it is her duty to look to the personal comforts of the patients, it might be inferred, that the fact of as many as 15 female patients sleeping naked in the female ward must have become known to her; but this she assures us was not the case; a fact that can only be attributable to her imperfect and not very frequent visits to this part of the hospital, and to the fact of her never seeing those patients after their being placed in their beds at night."

The duties first mentioned, viz., "To see that the linen of the patients is properly changed, washed, and returned," devolve upon the nurses, according to the following

"*Duties of Attendants and Servants.*

"72. The attendants shall fetch from the laundry the clean linen and clothing of their respective patients.

"73. Every patient shall be provided with clean linen, and all dirty linen shall be taken to the laundry, and, as a general rule, all foul linen shall be taken to the laundry at the earliest convenient opportunity."

"88. The chief attendant in each gallery shall prepare, from time to time, lists of linen and other articles prior to their being sent to the wash, and on their return from the laundry such attendant shall compare them with the list, and if there be any deficiency immediate inquiry shall be made for the articles missing."

I am responsible for the discharge of these duties by the attendants, and can safely affirm that they have always been properly performed.

The extract continues—"It might be inferred that the fact of as many as 15 female patients sleeping naked in the female ward must have become known to her."

Those patients only who are dirty, and were also considered to be dangerous, slept without night dresses, but they always had a warm blanket to cover the straw on which they slept, and as many blankets over them as were requisite to secure ample warmth.

This, according the testimony of the head attendant, Cliffin, who had lived in the hospital previously to my becoming matron, had "always been the rule" (855.); and again, in 858, she says, "It was a rule when I went there, and I have had no fresh rule." This statement is corroborated by the testimony of three nurses who were in the hospital several years prior to my appointment.

The plea of long practice would, however, have availed nothing with me had I been aware of it; and so strong was my feeling against so objectionable a custom, that my knowledge of it and its discontinuance were almost simultaneous. As stated in my evidence, I was ignorant of the practice, which I deeply regret; but must candidly confess that, without some suspicion of its existence, I should have

Documents and Letters.

have hesitated to strip the bed clothing from the patients, many of whom might have resented the act as an indignity.

With respect to the inference that the practice mentioned must "have become known to me," I beg to state, that the opinion has been founded upon erroneous impressions, caused, I presume, by the following evidence:—

"859. *Q.* Would Mrs. Hunter know whether the shifts were used by the number supplied by her to the ward?—*A.* Yes.
"860. *Q.* She names the number?—*A.* Yes.
"861. *Q.* And takes care of the clothes?—*A.* Yes."

These answers are at variance with the fact. The clothing of all the patients, except such as are "incurable" or "criminal," is provided by their friends, and is kept in the wards under the charge of each head attendant, together with a considerable supply provided by the hospital for use on emergencies. There was at all times in the wards sufficient night dresses for the use of all the patients; I could not, therefore, "know whether the shifts were used from the number supplied;" neither was it possible for me to ascertain from the laundry lists that any of the patients slept without night dresses, as there were washed every week many more than one for each patient in the basement gallery.

The conclusions drawn in the last part of this extract, of my "imperfect and not very frequent visits to this part of the hospital," and of my "never seeing these patients after their being placed in their beds at night," are incorrect, and opposed to my general practice, which was, to visit the wards "from seven in the morning till ten at night." See my evidence (471). The very delicate, and at times dangerous, state of my health during the last two years, and especially during the winter months, has naturally led to my nightly visits being less frequent than formerly, but they have never been entirely discontinued or omitted, save from illness, or absence in the country for the benefit of my health.

EXTRACT, page 8.

"There is much reason to fear that practices have prevailed in some of the wards which indicate the existence of great harshness and violence on the part of some of the attendants, and are in themselves utterly unjustifiable. We allude more particularly to the practice alleged to have been resorted to of laying down the females, who were dirty, on the stone floor of the gallery naked, and washing their persons with cold water and a mop; and to the violent and offensive mode in which food appears to have been forced upon some of those who obstinately refused to take it voluntarily."

No human being could, by any amount of vigilance, prevent those abuses which will occasionally arise, not in lunatic establishments alone, but in every institution; it is consequently reasonable to admit that some harsh expression or unkindly action on the part of an attendant may have occurred unknown to any officer in the hospital.

As

As far as regards myself, I can only affirm that no complaint, however trivial, made to me at any time by a patient has been disregarded; and from the friendly and affectionate terms which have been maintained between the female patients and myself, I may fairly conclude that had any serious cause for complaint existed I should have been informed of it.

With respect to the alleged practice of mopping the patients, I appeal to this charge as an evidence of the unfairness and prejudice which pervades the whole report. Only one witness speaks of it, one who had been a patient and confined in the same department where this alleged practice prevailed. She does not pretend to say she was ever subjected to it. There is not one tittle of corroboration of this statement by any other witness; it is, on the contrary, distinctly denied by several; and yet, with this weight of evidence against an unsupported statement, the Commissioners eagerly adopt it, and rely upon it in their report.

Had the practice referred to existed it must have come to my knowledge, because I frequently visited the basement gallery during the operation of washing and bathing the patients, and I invariably found the attendants kind and considerate in the performance of their duty on these occasions, nor did any patient ever complain to me of having been washed in the manner alluded to.

That the process of bathing or washing a mischievous or violent patient is not always a very peaceable operation, will be duly acknowledged by the experienced, and admitted by the reasonable; it may therefore be expected that occasional resistance on the part of a patient, and perseverance on the part of an attendant may occasion a struggle, which it would be unjust to stigmatise with the name of cruelty.

There is in the galleries an abundant supply of warm water for the washing of all the patients, and it is invariably used in the basement gallery.

In the other galleries, the patients who are in good bodily health are at liberty to wash themselves during the summer months in cold water, if they wish to do so; but they can always be supplied with warm water if they desire it.

I am quite confident that the mopping of patients has not been a practice in the hospital, and I believe that it never occurred in a single instance.

With regard to the mode of administering food to patients "who obstinately refused to take it voluntarily," I may observe that I was frequently present during such occasions, having assisted at them myself, and that no instance of inhumanity on the part of an attendant ever came under my observation, nor did I ever receive a complaint upon the subject from any patient.

EXTRACTS from the Statement of Miss F. M.'s Evidence, in the case of her Sister, Miss A. M. (page 22):

"Ultimately, in consequence of her (Miss F. M.'s) sister's complaints of ill-treatment, and of her general appearance, Miss F. M. decided upon removing her, and in fact did remove her from the hospital."

The

Documents and Letters.

The ostensible cause of the patient's removal is thus stated in the evidence of the treasurer (116):

"She was brought into the institution, and shortly after a request was made that she should be permitted to sign a legal document, to which I objected. I would not consent on any consideration to allow her to sign any document, the object being to obtain money for her through such signature, and I would not consent to it; and her friends suggested that it would be better to remove her, and take apartments, and obtain her signature. I said I would have nothing whatever to do with it; if they removed her, they might do so, but I would not permit her to sign any paper while she was there.

"An application was shortly afterwards made for her removal, on the ground that change of air would be beneficial for her, and she was taken away. Certainly no complaint was made on the part of her friends of her treatment."

This statement is confirmed by the apothecary (339):

"*Q.* Did you hear anything about somebody wanting Miss M. to sign a deed? — *A.* Yes; her sister came to me, I think two or three times, on the subject. We had a long talk about how it was to be done. I told her I could not consent while she was there; there was great doubt of the legality of such a step; besides, I did not think she could sign anything in that state of mind."

EXTRACT, page 23.

"She (Miss A. M.) was placed in the first instance in the receiving ward, but removed in about a fortnight (on the plea of her being a dirty patient) to the basement ward. This was done by the sole direction of the matron, who it appears has the power of removing and classifying the female patients without the intervention of any of the medical officers."

Sir A. Morison says, in 1277: "It is a general order that dirty patients be placed in the basement."

Dr. Wood, the apothecary, says, in 329: "She (Miss A. M.) was always very dirty."

And Dr. Monro, in answer to questions respecting Miss A. M., says (1086): "I found her quite intractable."

"1088. *Q.* She was afterwards removed to the basement?—*A.* Yes.

"1089. *Q.* Do you know by whose order?—*A.* I cannot tell.

"1090. *Q.* Not by yours?—*A.* No, not by mine; but I saw the propriety of it, or I should have spoken out about it. I saw that she ought to be classified with those cases.

"1091. *Q.* Do you think the basement a fit place for a person in her state of health?—*A.* Yes, because I might say that one-third of the cases in the basement are just in that painful feeble condition moving about. I thought it a very suitable case for the basement when I saw her there."

I append

I append the following paragraph from the General Rules:

"5. Classification.—The patients are to be distributed into five classes, viz.:

"No. 1. Basement Ward.—The first Class. Patients who are in an excited or mischievous state, or who have no regard to cleanliness."

EXTRACT, page 22.

"The account given by Miss F. M. is corroborated by the patient's own evidence, taken on oath after she was perfectly recovered (both mentally and bodily)."

This assertion is founded upon Dr. Nesbitt's report of Miss A. M., which report is not confirmed by the state of the patient's mind in July 1851, when she gave evidence before the Commissioners, who candidly note,

Note by the Visiting Commissioners who took the Examination,

"As this witness is still in a nervous and excitable state she was not sworn in the first instance; ultimately, however, she expressed her willingness to swear to the truth of what she had stated, and she was sworn accordingly. She, however, declined having her evidence read over to her," &c.

It therefore appears that Miss A. M. gave her evidence at a time when she was far from well; her statements ought therefore to be received with hesitation, and I can only state that I never saw this patient subjected to any unkindness, and I never received a complaint of ill-treatment either from her, or from any of her relations or friends.

With respect to the polka jacket, which I am alleged to have said the patient "could not be allowed to wear as it was too smart," I have not the slightest recollection of such a circumstance having ever occurred, although I have sometimes advised the friends of dirty or mischievous patients to provide their relatives with warm and durable clothing in preference to articles more showy and more destructible. This I have done in consideration both of the comfort of the patients and the pecuniary circumstances of their friends, such articles being very liable to be destroyed; but no article of needful or desirable apparel has ever, with my sanction, been refused for the use of any patient.

EXTRACTS from the Statement of the Case of Miss H. H.

"This lady appears to have been admitted into Bethlem Hospital on the 4th of April last; to have been discharged on the 18th of the same month (after a residence therein of 14 days only), and to have died in three days after her discharge."

"At the time of her admission, it is stated by the medical practitioner, who had previously attended her, that her limbs were firm, and that although thin, she had the average amount of flesh and strength for an invalid; but she occasionally refused her food; had two or three times been subjected to mechanical restraint, and for two

Documents and Letters.

two or three days previously to her admission, had fallen into dirty habits. Her father also states, that on her admission her health was 'pretty good, and that she was gaining flesh.' 'On her discharge, her condition, according to her father's account, was exceedingly changed for the worse;' and according to the statement of his medical attendant, Mr. Taylor, 'her appearance was much altered, being very emaciated, her bones almost protruding through her skin, and on her body were various wounds and bruises.'" The statement subsequently continues,—

"After her death, in consequence of some complaints made by the father, her person was inspected on the following day by Mr. Lawrence and Sir Alexander Morison (two of the medical officers of Bethlem Hospital), and a *post mortem* examination was afterwards made by two surgeons, who, together with Dr. Wood, who came in before the examination was completed, signed a medical certificate, stating, 'that there was no evidence to show that she had sustained any injury which could in any way have hastened her death.'"

In consequence of some complaints made by the father of this patient, as to his daughter's treatment whilst in the hospital, an inquiry into the case was instituted before a committee of Governors.

The Governors have not, it is said, signified otherwise than they were satisfied with the facts that came out in the course of the investigation, &c.

Upon the combined evidence of Sir A. Morison, Dr. Wood, the apothecary, and myself, Miss H. H. is shown to have been admitted into the hospital in a very weak and emaciated state, and owing to her exceedingly dirty habits, she was placed at once in the ward appropriated by General Rules (page 92) to such patients.

She was an object of pity and sympathy, both with officers and attendants; and until my absence, caused by indisposition during the last few days of her residence in the hospital, I watched the case with deep interest, and can, from personal observation, solemnly affirm that I never saw any sick person more kindly and humanely treated. Dr. Wood, also, throughout the whole of his evidence, perseveres in stating his impression that the patient "was treated with the utmost possible kindness."

I subjoin the *post mortem* certificates.

"Bridewell Hospital, 22 April 1851.
One o'clock, p. m.

"By desire of the treasurer of Bridewell and Bethlem Hospitals, I have just examined the body of H. H., late a patient in Bethlem Hospital. I found several superficial bruises on different parts of her body, and redness and tendency to excoriation about the *nates*, none of them at all connected with the cause of her death, which was occasioned by general paralysis. The causes I consider to be accidental, and in no way to be attributed to want of care and kindness.

(signed) "*Alexander Morison*, M. D."

"Dear Sir, "Whitehall-place, 22 April 1851.

"I HAVE inspected the body of the young woman lately discharged from Bethlem, now lying at H—— street, Walworth, and could see nothing leading to the conclusion, or even the suspicion, that she had met with ill-usage before death. There had been no open sore at the time of death; the buttocks were red, and slightly excoriated from having been wetted with urine, as generally happens in dirty patients, and the hips were in a nearly similar state, the bones having become very prominent in consequence of the patient's considerable emaciation, and the skin having consequently been fretted by the position of the body, and probably by the restlessness of the patient; there were four or five brownish and quite dry marks where the skin had been probably excoriated, principally on the legs; and there was a very faint bruise mark near one of these. The surrounding skin in all these situations was of its natural pale colour; such appearances, and probably to a greater extent, would almost inevitably be found on the body of a patient who had been in a violent state for two or three weeks before death.

"I remain, &c.

"J. E. Johnson, Esq." (signed) "*Wm. Lawrence.*"

"23 April 1851.

"EXAMINATION of the Body of *H. H.*

"BODY emaciated; some superficial abrasions on the surface of the lower extremities, probably owing to the scratching or the picking of the skin; slight ecchymosis under back part of scalp; a small chronic abscess in the integument of the right side of head, apparently connected with an old wound, the scar of which was obvious, but must have healed some months.

"On removing the calvarium, the arachnoid was found universally opaque; the pia mater loaded with serum; the ventricles considerably distended with fluid, capable of holding from two to three ounces each. Nothing further morbid observed in the brain, which was of average firmness. Some fluid remained in the case of the skull after the brain was removed; the lungs were healthy; some old adhesion existed in the left pleura; heart rather flabby; abdominal viscera healthy.

"We are of opinion that the death of the deceased was clearly referable to the disease observed within the skull, which had existed some months; and there was no evidence to show that she had sustained any injury which could in any way have hastened her death.

"*Wm. Wood*, M.D., Licentiate of the Royal College of Physicians.
"*Frederick Augustus Crisp*, M.R.C.S., and L.A.C.
"*Charles Taylor*, M.R.C.S., and L.A.C."

The above reports, involving the professional character of the parties whose names are appended, ought to remove all doubt upon

Documents and Letters.

so painful a subject, particularly as in no part of the evidence is the charge of "harsh and improper usage" substantiated; on the contrary, there is a large amount of evidence to prove that Miss H. H. received no common share of kindness and attention during the short period of her stay in Bethlem Hospital.

Case of Mrs. *Elinor W.*

"Page 31.—During the time this patient remained in the basement ward, her habits, disposition, and violent conduct were such, that great caution would have been necessary in receiving any statement from her. The few complaints which she made to me could not be verified by any other patient, notwithstanding the pains I took to investigate them. I may, therefore, be excused for expressing some doubt whether any importance can be attached to such conjectural evidence, especially when unsupported by a single witness."

The case of Miss M. E. W. requires no comment, the Commissioners having given the following (page 32):

"On examining this patient herself it must be observed that the answers given by her to our questions did not bear out the statements of her mother and Elinor W. Mary Elizabeth W.'s recollection and general intellect were, however, in so feeble and imperfect a state at the time of her appearance before us, that we did not think it proper to question her to the extent we should have done had she appeared more competent to give evidence on the subjects of our inquiry."

I must, however, allude to the alleged circumstance of my standing beside this patient in the committee-room, on the day of her discharge, to prevent her from making any complaints. It is a part of the matron's duties to accompany the female patients into the committee-room, on the day of their discharge, and remain beside them, certainly more with a view to facilitate complaints than to retard or prevent them; the latter being an object which I have never attempted to accomplish, having rather encouraged the patients to express their sentiments openly, and without reservation.

In the summing-up of the Commissioners' Report the following charge occurs—(page 34):

"8th. That the duties of the matron are very much neglected, and that she has very improperly vested in her the power of classifying the female patients, of employing them, and determining which wards they shall be placed, without the sanction of any of the medical officers."

The insufficient grounds upon which these assertions are made are fully borne out by my remarks and explanations in the foregoing report.

I have caused every direction of the medical officers to be scrupulously observed, and I have, during the period of my matronship in Bethlem Hospital, performed double the amount of duty assigned to me by the rules of the institution; but my arduous and responsible

responsible duties have been readily and cheerfully fulfilled, because circumstances rendered my services essential to the credit of the hospital, and the comfort of the female patients.

Perhaps I may be excused for stating here some of the alterations suggested and improvements introduced by me on the female side: alterations and improvements which were most readily acceded to by the Governors, and ordered to be carried into effect as soon as practicable :—

1st. Religious service daily in every gallery but the refractory.

2d. The removal of several restraint chairs.

3d. The removal of eight large iron gates from the galleries.

4th. The introduction of ordinary beds in the front basement ward instead of loose straw, which had been the previous practice; and the substitution of a wooden floor for stone pavement, thereby materially increasing the warmth and comfort of the ward.

5th. Building a new work-room and parlour for convalescent patients.

6th. Having an airing-ground laid out as a flower-garden for ditto.

7th. Introduction of a piano-forte for ditto.

8th. Introduction of bagatelle and pope-joan boards, and materials for drawing and painting for ditto.

9th. Introduction of a select library for ditto.

10th. Introduction of fancy works and straw plaiting.

11th. A large increase of general employment throughout the galleries.

The above facts will prove that I have, with the kind assistance of the Governors, been an active agent in carrying out their philanthropic views for the amelioration of the condition of the insane; and that I have studied to act, with a faithful and an upright heart, the part assigned me, even to the sacrifice of my health and domestic comfort.

In conclusion, I cannot refrain from mentioning that, although the Commissioners' Report does not contain the slightest charge of unkindness, harshness, or severity against myself personally; still the unexpected and undeserved accusation of neglect in any part of my duty, has, by further undermining my already injured health, accelerated my resignation of the office of matron to Bethlem Hospital.

I make no comment on the partial and prejudiced course adopted in the progress of this inquiry; the assumption of statements, the leading questions to witnesses, the evident disappointment of the Commissioners when they failed to extract the description of evidence they desired, or the brow-beating of the witnesses. You, gentlemen, who have read the evidence, will have noticed all this, and more, but I cannot believe that it is consistent with the ordinary practice of common justice for any person to be persecuted as I have been, and my reputation, which was my all, assailed by witnesses behind my back; or that I should be examined and harassed upon evidence taken in my absence, and which I was not even allowed to see and answer. No refutation, no honesty of purpose, no zeal or anxiety, can stand against such a revival of the inquisition; it is foreign to English habits of justice, and must be abhorrent to every honourable mind.

Documents and Letters.

It is to be regretted that the Commissioners, in their zeal for the insane, should have so totally disregarded the character and feelings of one who has devoted above 22 years of her life to the service of the mentally afflicted; and whose conscientious discharge of her duty, during that protracted period, might at least be expected to protect her from misrepresentation, even should it fail to procure for her commendation.

I am, &c.
(signed) *H. Henrietta Hunter.*

LETTER from Sir *Alexander Morison*, one of the Physicians of the Hospital, to the President, the Treasurer, and the Governors of Bethlem Hospital.

My Lords and Gentlemen,

ON the 1st of May instant I received the following notice from your clerk, that at a general quarterly court of Governors, held at the hospital of Bridewell, on Monday, the 26th day of April last, it was resolved: "That in order to give effect to the chief recommendation in the Report of the Commissioners in Lunacy to the Secretary of State for the Home Department, on Bethlem Hospital, it is expedient that a resident physician of eminence be appointed to Bethlem Hospital, who shall have paramount authority therein, subject always to the control of the Governors."

Having, therefore, in consequence of such resolution, full reason to believe that the said Report of the Commissioners in Lunacy contains statements, more especially as regards myself, which may have led the Governors to form an unfavourable opinion on the subject, I addressed a letter to the president, and to the treasurer of the hospital, on the 25th day of February last, as follows:

"I have seen a printed paper, purporting to be a Report from the Commissioners in Lunacy to the Home Secretary of State, and signed 'Shaftesbury.'

"In it I find assertions respecting my conduct, as one of your physicians, calculated to injure me in your estimation, and in that of the public.

"As these assertions are unfounded I beg respectfully to have a strict inquiry into the manner in which I have performed the duties of physician to your noble institution, during the 17 years I have had the honour to occupy the situation, in order to refute the misrepresentations respecting myself contained in the said report."

No notice having been taken of this letter, and serious injury having been done to my character (which has been much increased since an article entitled "Bethlem Hospital" appeared in the newspapers of 29th April), I sent to the president, and to the treasurer, a copy of the accompanying letter, addressed by me to the Commissioners in Lunacy, on the 23d day of March.

The consideration of these letters was inserted in the printed notices to form a part of the business of the General Court, summoned for the 26th of April; but it appears that they were passed over, which is to be

be regretted, as the Governors, before passing a resolution of such importance, and which is now brought before them this day to be confirmed, might have been pleased to have allowed time to consider the report of the Commissioners in Lunacy, and the evidence on which they have founded that report, which I am informed does not bear out the inferences which they have drawn. Or, if the report and evidence are not before the Governors, that they would order the strict inquiry earnestly requested by me in my letter to the president and to the treasurer, on the 25th of February.

In consequence of my letter of that date having been passed over at the meeting of the General Court, on the 26th of April, I addressed a few lines to the president, the treasurer, and the general committee of 3d May instant, begging their earnest consideration of the same.

On Saturday last, the 8th instant, a letter was addressed to the physicians of Bethlem Hospital, referring them to the Home Secretary of State for copies of the report and evidence of the Commissioners in Lunacy, "the chief recommendation in which it is proposed to give effect to by the resolution above quoted," at the same time expressing their desire to receive any statement the physicians may wish to submit to them, to which they will give their best consideration.

I therefore respectfully and earnestly request that I may, in conjunction with my colleague, Dr. Monro, have a reasonable time to consider the subject, and be allowed an opportunity of answering whatever evidence may have been given, and statements to our prejudice.

I have, &c.

26, Cavendish-square,
10 May 1852.

(signed) *Alex. Morison.*

Appendix (C.)

Correspondence between the Treasurer and the Commissioners in Lunacy.

Gentlemen, Bridewell Hospital, 14 April 1852.

I have seen your report to the Right Honourable Sir George Grey, Bart., &c., &c., on Bethlem Hospital, in which there are statements respecting myself of which I feel I have much reason to complain.

The following are of this class:

Extracts.

"1. On one occasion indeed, he (referring to myself) seems to have assigned to the matron, in our opinion, very injudiciously, the very important power of classifying, employing, and generally of managing and arranging the female patients, without reporting such alteration to the committee, or obtaining their sanction thereto.

"2. His (the apothecary's) powers and duties of classification, &c., conferred

Documents and Letters.

conferred on him by the rules, have, so far as they relate to the females, been recently transferred to the matron by the verbal direction of the treasurer.

"3. These are amongst the duties intrusted to her (the matron), in addition to the power of classifying and employing the female patients, lately transferred to her by the treasurer, as already referred to, and which she now exercises quite independently of the medical officers of the institution.

"4. They (the rules) vest, we think, most injudiciously, in the matron the duty of classifying and employing the female patients, and determining in what wards they shall from time to time be placed, according to her sole direction, and to the practical exclusion of all medical authority."

In connexion with this statement is the following, which is given as a foot note:

"By the printed rules, this duty belonged to the resident medical officer, from whom the treasurer, about a year ago, transferred it, by a mere verbal direction, to the matron."

"5. That the treasurer has, without due authority, taken from the resident medical officer, the duties of classifying the female patients, of regulating their employment, and determining in what wards they shall be placed, and has injudiciously invested the matron with this power."

No one, in my opinion, can read these statements without coming to the immediate conclusion, that an important duty, previously belonging entirely to the resident apothecary, has been recently transferred from him to the matron, who, prior to the date of the transfer, had no authority of the kind.

Such a conclusion, I submit, however, would be exceedingly erroneous.

In the rules of the hospital, a copy of which I placed in your hands, you will find (page 114, No. 12) that the apothecary is "to regulate, in the absence of the physicians, the classification, employment, amusement, and general management of the patients."

It is obvious, therefore, that these duties primarily and substantially belong to the physicians, and not to the apothecary; and the latter can have, therefore, no greater authority on this subject in the absence of the former than they themselves have by the rules, which is (page 110, No. 11) that they are "to recommend patients for employment, occupation, and amusement, either in the hospital garden, airing courts, or work-rooms."

The rule (page 114, No. 13) immediately following that which gives the apothecary power to regulate in the absence of the physicians, the classification, &c., provides that he shall "direct, in conjunction with the steward, that every male patient, and in conjunction with the matron, that every female patient, for whom employment would be beneficial, be supplied with suitable means of occupation."

This qualifies very materially the power given in the preceding rule to the apothecary, and I doubt not, was intended to have that effect.

By rule 7, page 123, the matron is required "to distribute the patients

patients in their sleeping apartments, so that each female attendant may have a proper number of those who are fit to work to assist her, and to employ such of the patients at their needle, or otherwise, as are capable."

By this rule an extensive power of classifying and employing patients is conferred on the matron.

You admit, in enumerating the duties of the apothecary, that he is to regulate, in the absence of the physicians, the classification, &c., but in the statements you have made respecting my interference in this matter, you have, I respectfully submit, neither sufficiently adverted to this limitation, nor to the further limitation, that the apothecary is to direct employment for the female patients in conjunction with the matron; nor to the fact, that the matron has always had, by the rules, an extensive power of classifying and employing female patients, irrespective of the apothecary.

The more I reflect on this subject, the more I am convinced that by the direction I gave, for the purpose of obtaining a larger amount of occupation for the female patients, and which had the desired effect, I did not extend in the least the powers of the matron, but only required her to do that which clearly was her duty; neither did I diminish much, if at all, from the very limited powers of the apothecary, who, I beg of you to observe, was required "to regulate in the absence of the physicians," and not to direct the classification, &c. This direction of mine, I feel it due to myself to remark, had no reference whatever to the physicians, whose duties remained unaltered, and in as much force as at any preceding period.

I trust I have stated sufficient to satisfy you that your frequently repeated assertion that the duties of classifying and employing the female patients, belonged by the printed rules to the apothecary, and had been recently transferred from him to the matron, by the mere verbal direction of the treasurer, should not have been made.

I therefore proceed to other inaccuracies contained in your report.

EXTRACT.

"The diet of the patients, together with much of the internal economy and comfort of the institution, appear to be under his influence (the treasurer's)."

Much of this statement is too general to admit of a reply. So far as it is specific it is incorrect. The provisions of the hospital are inspected weekly by the sub-committee; and the diet of the healthy patients is regulated by the diet table, which was prepared some time since, and considered by the sub-committee, the committee, and many of the officers of the hospital, after which it was approved and adopted by the General Court of Governors. The diet of the sick patients is entirely at the discretion of the medical officers.

EXTRACT.

"He (the steward) formerly had control over the male attendants, who are now, however, properly placed, by some verbal regulation of the treasurer, under the management of the resident medical officer."

Documents and Letters.

I beg to state that I never made any verbal regulation on this subject. The power of the steward to control male attendants was terminated by the introduction, a short time since, of new rules, having reference to the duties of all the subordinate officers.

These rules were carefully considered by the sub-committee, the committee, and the officers of the hospital, before they were adopted by the General Court. They confirm to the matron the control over the female attendants. A copy of them I placed in your hands.

EXTRACT.

"This practice (referring to the bedding of some of the patients), which has prevailed for years, has gone on without challenge from, and even, as is stated, without the knowledge of the treasurer, the physicians, the resident apothecary, &c."

I am mentioned here, I submit, very gratuitously. In my examination before you I was not asked a single question, and did not make a single statement respecting the bedding; indeed I had no opportunity of doing more than answering the questions you put to me. I cheerfully attended at your office, to render the best assistance in my power in the investigation of a charge made against the female attendants at Bethlem, of having treated some of the patients unkindly. I left your presence with the impression that the subjects of your inquiry were, to a considerable extent, charges against myself.

EXTRACT.

"A considerable number of additional regulations and usages, more or less important, and some of them materially modifying the previously existing practice, have also been introduced at various times, occasionally on the sole authority of the treasurer, and have acquired the force of rules and orders, although they have not been reduced to writing, and have never formally received the sanction of the governing body."

This is a very strong statement, but so general as to preclude any but a general reply. So far as it relates to myself, I beg to remark that, with the exception of my direction respecting the greater employment of female patients, I have no recollection of having ever given any order, or made any regulation not entirely in conformity with the words or spirit of the rules under which the hospital is conducted; and with regard to the exception just mentioned, which is the only exception I can admit, I feel that the course I pursued may with much greater propriety be considered as the interpretation and harmonizing of existing rules than as the introduction of a new one.

I confine myself in this communication to those statements in your report which refer to myself individually, and which I submit will be generally considered as imputing blame. I cannot remove from my mind the painful sense I entertain of the injustice you have done me in forwarding statements to my prejudice to one of Her Majesty's principal Secretaries of State, in a report founded on evidence taken, with the exception of my own examination, in my absence, the nature of the charge as against myself having never been communicated to me;

me; and no opportunity having been afforded me of seeing or cross-examining your informants, and afterwards of calling witnesses, or of being heard in my defence.

The copy of my evidence forwarded to the Secretary of State contains some errors. It would have afforded me great pleasure to have corrected them, if an opportunity of doing so had been granted to me, as appears to have been the case with another Governor of the hospital whom you examined.

When I consider the nature of many of the questions you put to me, and the severe manner in which they were put, I am led to the inference that prior to my examination you had received information which induced you to entertain an unfavourable opinion of the manner in which I had performed my duties.

I trust I am not taking too great a liberty in requesting to be informed if such were the case.

I have, &c.
(signed) *John Edward Johnson,*
Treasurer of Bridewell and
Bethlem Hospitals.

The Commissioners in Lunacy.

Office of Commissioners in Lunacy,
19, New-street, Spring-gardens, 12 May 1852.

Sir,

Your letter of the 14th ultimo has been under the consideration of the Board; I am now directed to state to you that the Commissioners must decline entering into any correspondence relative to the observations contained in their report to Secretary Sir George Grey, which it may be observed was accompanied by a copy of the shorthand writer's notes of the evidence taken before the Board.

I remain, &c.
(signed) *R. W. S. Lutwidge,*
Secretary.

J. E. Johnson, Bridewell Hospital.

Bridewell Hospital, 17 May 1852.

Gentlemen,

I have received from your secretary a letter acquainting me that you decline entering into any correspondence relative to the observations contained in your report to Sir George Grey on Bethlem Hospital, and informing me that such report was accompanied by a copy of the shorthand writer's notes of the evidence taken before you. You are aware that I have seen the evidence. I have therefore only now to remonstrate against the mode in which the evidence was taken, as being un-English in its character, and at variance with those constitutional principles which are recognised and respected in this country. Under such a system the fair fame and professional reputation of any man may be deeply injured. I reserve to myself the

Documents and Letters.

the right of publishing my letters to you and your reply, and it is my intention to forward a copy of them immediately to the Secretary of State for the Home Department.

I have, &c.
(signed) *John Edward Johnson*,
Treasurer of Bridewell and
The Commissioners in Lunacy. Bethlem Hospitals.

Sir,

I FEEL it right to place in your hands the accompanying copies of letters that have passed between the Commissioners in Lunacy and myself relative to their report to Sir George Grey on Bethlem Hospital.

I have, &c.
(signed) *John Edward Johnson*,
The Right Hon. Spencer H. Walpole, Treasurer of Bridewell
Secretary of State. and Bethlem Hospitals.

APPENDIX (D).

Miss *A. M.* stated:

30 July 1851.

"THAT she could not remember how long she was in the receiving ward. Remembered the basement, and her first impression was a feeling of cold; (she continued) I had always had insufficient bedding, and sometimes none at all, only the straw, and I had to get under the straw to try and get warm, and cover myself. Sometimes I had a sort of oil-skin or India-rubber cover. I had no night clothing whatever. I begged hard to be allowed to keep my flannel waistcoat, as I had always been used to it; but the nurse said it was against the rules, and took it away during the night. I slept quite naked. I always suffered from cold whilst in the basement, both night and day. In the morning the nurse used to open the door of the cell and call out, "M." get up. Sometimes I was very ill, and so stiff with cold that I could hardly rise, and I could not dress myself, and the nurse and another patient used to dress me, but always very roughly; I was covered with sores. I thought the bones would come through the skin. When I crept under the straw to try and get warm, I came upon the bottom of the bed, which I think was stone. I think that caused the sores on my hips.

"The bathing and washing were very coarse. I was taken to a sink and washed with a wet towel that had been used for a great many other patients, with cold water. The nurses were all very coarse and rude; they nicknamed the patients, and used to call me Black Sall.

"On

"On one occasion I would not eat, and I was thrown on the ground and the food forced down my throat by two nurses. If ever I complained the nurses told me to hold my tongue, for I was a pauper like the rest, and the treatment was good enough for me. I was too ill to complain to Dr. Wood and Mrs. Hunter, and I saw them very little; they used to come round, but they only looked at us generally; Dr. Wood hardly ever spoke to me; I hardly think he knew I was present sometimes; he never looked at my tongue, or felt my pulse, or examined me medically; he only took the report of the nurses."

Note by the Visiting Commissioners who took the Examination.

"As this witness is still in a nervous and excitable state, she was not sworn in the first instance; ultimately, however, she expressed her willingness to swear to the truth of what she had stated, and she was sworn accordingly; she, however, declined hearing her evidence read over to her. She expressed very great anxiety that her case should not be made public."

Mr. *F. M.* sworn.

30 July 1851.

"Miss A. M., my eldest sister, was a patient in Bethlem Hospital; she was admitted on the 6th of October 1850. At that time she was in weak bodily health, and for 10 days previously she had refused her food. I examined her person; she had a bruise on her arm from a fall, but no other marks or injuries. I took my sister to the hospital; it was on a Sunday. I did not see the ward into which she was placed, but I understood it was the ground-floor, not the basement. Two nurses took charge of her. I never saw the matron the whole time my sister was at Bethlem. I next saw my sister on the following Friday, the committee day; I met her on the landing of the staircase; she had a black eye, but she did not accuse any person of having caused it. I only had a few words with her. She had been before the committee, and I went before them afterwards; nothing particular occurred. I next saw her on the 4th November, when I learnt that my sister had been removed to the basement as her habits were dirty; she was brought to me in the visitors' room; she then complained to me of excessive cold, and when I asked her as to what sort of bed she had, she exclaimed, 'Oh! none at all; I sometimes have a covering, and sometimes I have none.' She said the cover was a kind of India-rubber cover, but that she had neither blankets nor sheets, and loose straw to lie on; she said also, that once when she was dirty in the middle of the night, two nurses came to her and took her out of her cell and gave her a cold shower bath, and that she then pushed her back into her cell without wiping or drying her at all: she also said, that she had on one occasion been obliged to get up and wash her own linen, which she had dirtied. She complained that the nurses were very rough

Documents and Letters.

rough and rude, and abused her, and said she was a dirty beast; and they called her 'Black Sall.' One of the nurses once said she would kick her out of bed if she did not get up, and used other very coarse language, which I do not like to repeat. After that I again saw my sister, on either the 3d or 4th of December; it was the regular visiting day, the first Tuesday in the month. Friends are only permitted to see patients on the regular visiting day. She then appeared to be in a most feeble and emaciated state, and she appeared altogether worse in every way; she complained of her bowels; she again complained of the cold in the cell, and the want of covering. After that I was at the hospital and saw one of the nurses. I cannot recollect her name, but I should know her again. When I told her my sister complained of cold, she (the nurse) said, 'Oh, she is such a dirty patient that we are obliged to pin her in her night shift.' I then said, 'Then she lies on the straw naked?' and the nurse said, 'Yes, she does.'

"It was in consequence of my sister's complaint of treatment, added to her personal appearance, and the fact of her being placed in the basement-floor, that decided me to remove her. I accordingly removed her on the 27th December, intending to take her to Southampton, but she was so ill that I took her to a lodging near Bethlem. I then examined her person. I found that her back was a complete mass of sore, with two large sores of about the size of a crown piece, one on each hip; they were deep sores, and she will carry the marks of them to the grave. I saw no bruises; she was very much emaciated, much more than at the time of her admission to Bethlem; and her legs were very much swollen; she had besides other physical diseases, and was very much disordered in her bowels. On the following day I took my sister down to Northampton. Previously she was examined by two medical men, who signed the certificates. My sister was admitted to the Northampton Asylum the same day. I then resided at Northampton, and saw my sister very frequently. In the course of a fortnight she was greatly improved in health, and her habits of cleanliness returned; her mind was also greatly improved.

"I am of opinion that my sister, during the whole period of her confinement in Bethlem, was capable of giving a true account of the treatment she received, because, in all matters which I had an opportunity of testing, I found her statements to be correct. I fully believe all she has told me.

"On second thoughts, I now remember that I did once see the matron. I had taken a warm polka jacket to the hospital for my sister's use, as she so frequently complained of cold; but the matron said that she could not be allowed to have it, as it was too smart.

(signed) "*F. M.*"

Appendix (E.)

Duties of the Resident Physician, Apothecary, and Matron.

There shall be a resident physician, who shall be a fellow or licentiate of the College of Physicians in London, Edinburgh, or Dublin, or a doctor of medicine of the University of Oxford, Cambridge, or Edinburgh, qualified to practise as a physician.

He shall devote the whole of his time to the duties of the office, and shall not have any connexion, directly or indirectly, with any other establishment for the reception of lunatics, nor shall he professionally attend any private patient.

He shall constantly reside within the hospital, and shall never be absent from it, on any account whatever, without previously giving charge of it to some other competent medical practitioner, to the satisfaction of the president or treasurer, so that the institution shall at no time be without efficient medical superintendence.

He shall never be absent from the hospital for a night without the written consent of the president or treasurer. An absence of a month in every year will be allowed him, provided that arrangements be made, satisfactory to the president or treasurer, for the efficient performance of his duties during such absence.

He shall be under the control of the president, the treasurer, the Committee, and the Bethlem Sub-committee, and shall himself have control over all other officers, attendants, and servants in everything pertaining to the maintenance, care, occupation, and amusement of the patients. He shall have authority to recommend the hiring and discharge of all attendants and servants, and may suspend any of them for misconduct, entering a report of such suspension, with the reason thereof, in a journal, for the information of the next Bethlem Sub-committee, and giving immediate notice thereof to the treasurer.

He shall be responsible for the management and condition of the hospital, and shall superintend the whole of the medical and moral treatment of the patients, and the general arrangements of the establishment, subject to the rules of the hospital and the directions of the Governors.

He shall classify the patients, and shall regulate and determine the diet of those who are sick and infirm, in such manner as he shall see fit, taking care that the particulars of such sick or extra diet be entered in a book to be kept for that purpose. He shall also from time to time examine the provisions furnished for the use of the patients, and report to the Bethlem Sub-committee whenever he shall consider the quality of any part of it to be unsatisfactory.

He shall carefully examine every patient on admission, and, if requisite, on discharge; and shall cause proper entries relative thereto to be made in the books kept for that purpose.

He shall make a daily visit to all parts of the hospital, passing in review the whole of the patients, attendants, and servants. This general

Documents and Letters.

general visit to be independent of any special visits which, from the severity of particular cases, or for the ensuring constant attention to their duties on the part of the attendants and others, he may judge it expedient to make.

He shall make occasional visits, at uncertain times, during the night, to the various wards and bed-rooms, and shall enter in the journal the state of the hospital at the time of such visits, for the information of the Bethlem Sub-committee at their next meeting. On making such visits to the department for female patients, he shall be accompanied by some female officer of the hospital.

He shall take care that every patient reported as requiring restraint or seclusion, be immediately visited by himself or another resident medical officer.

He shall take care that the rules of the hospital be faithfully observed, especially enforcing at all times on the attendants and servants the paramount importance of gentleness and kindness to the patients.

He shall act as physician, not only to the patients of Bethlem, and resident officers and servants, but also to all the inmates of the house of occupations, and shall take care that all medicines prescribed be duly dispensed and administered.

He shall investigate all complaints made to him by patients, attendants, or servants, and shall report to the president, treasurer, or Bethlem Sub-committee, at their next meeting, such as appear to require further notice.

He shall take care that all admissions, discharges, and deaths, be duly recorded; and that the prescription-books, medical journals, and case-books be regularly and effectively kept, and presented to the Bethlem Sub-committee every week; such cases as are completed being previously signed by himself in testimony of his approval. Each case shall contain the following particulars, to be amplified in cases which appear to require more extended details.

1. A statement of the name, age, sex, and previous occupation of the patient, and whether married or single.

2. An accurate description of the external appearance of the patient when first seen after admission; of the habit of body and temperament, of the appearance of the eyes, the expression of the countenance, and any peculiarity in the physical formation; the state of the vascular and respiratory organs and of the abdominal viscera, and their respective functions; of the state of the pulse, tongue, skin, &c.

3. A description of the phenomena of mental disorder which characterise the case; the manner and period of the attack; with a minute account of the symptoms, and the changes produced in the patient's temper or disposition; specifying whether the malady displays itself by any and what illusions, or by irrational conduct, or morbid or dangerous habits or propensities; whether it has occasioned any failure of memory or understanding; or is connected with epilepsy,

epilepsy, hemiplegia, or symptoms of general paralysis, such as tremulous movements of the tongue, defect of articulation, or weakness or unsteadiness of gait.

4. Every particular which can be obtained respecting the previous istory of the patient; what are believed to have been the predisposing and exciting causes of the attack; what have been his habits, whether active or temperate, sedentary or otherwise; whether he has experienced any former attacks, and, if so, at what periods; whether any of his relatives have been subject to insanity or any other cerebral disorder; and whether his present attack has been preceded by any premonitory symptoms, such as restlessness, unusual elevation or depression of spirits, or any remarkable deviation from his ordinary habits and conduct; and whether he has undergone any and what previous treatment, or has been subject to personal restraint.

5. A statement, from time to time, of the mental and bodily condition of the patient, and of any changes which may be observed in his bodily health, or in the form of his mental disease; also an accurate record of the medicines administered, and other remedies employed, with the results.

The several particulars herein given to be recorded to be set forth, not in any fixed or tabular form, but in a manner so clear and distinct that they may admit of being easily referred to and extracted whenever required.

He shall see that there be immediately entered in the prescription-book, an account of all medicines, wines, and spirits prescribed and dispensed.

He shall, on the death of a patient, report the event in writing to the next Bethlem Sub-committee, specifying the time during which such patient had been in the hospital, and the apparent cause of death.

He shall, in concurrence with the surgeon, direct *post mortem* examinations to be made, when practicable, in cases that appear likely to afford information as to the nature, causes, or effects of insanity.

He shall take care, when any violent or sudden death shall occur, that immediate notice thereof be sent to the treasurer, the surgeon, and to the friends of the patient; and in every case of suicide the attendant who had the care of the patient shall be suspended until the next meeting of the Bethlem Sub-committee.

He shall take care that the friends of patients dangerously ill be invited to visit them without delay, and to remain with them as far as may be practicable during the continuance of such illness.

He shall report to the Bethlem Sub-committee, at every meeting, the important circumstances that have occurred in the hospital since the preceding meeting, noticing the name of every patient fit to be discharged or likely to be benefited by being allowed to be absent on trial, the number of patients in the hospital, the number of such as

are

Documents and Letters.

are sick, with the nature of their complaints; the number, if any, of those who have been under personal restraint or in seclusion, with the cause, the nature and the duration thereof; the number who have attended Divine worship, and the number who have been in employment, with the nature of their occupations.

He shall take care that lists be prepared of all patients who are suicidal, or subject to any disease or habit requiring particular attention, such lists to be delivered to the attendants in each ward for their guidance, and to be corrected from time to time with every change of patients.

He shall point out to the chaplain such patients as he may consider capable of deriving benefit from religious instruction.

He shall allow every patient of a religious persuasion differing from that of the Established Church, at the special request of such patient, or of his or her friends, to be visited at reasonable times by a minister of his or her own persuasion, whenever in his (the physician's) opinion such visits will not be prejudicial.

He shall present patients on leaving the hospital, cured or on leave of absence, with such advice as he may consider best adapted to prevent the recurrence of their disease.

He shall attend all meetings of the Bethlem Sub-committee, to assist by his advice and to submit for consideration the various suggestions he may from time to time think it right to make, respecting the management, exercise, amusement, employment, classification, and diet of the patients.

He shall inspect all letters addressed to patients, and shall give such letters, or communicate the contents thereof, wholly or in part, to the patients addressed, at his discretion.

He shall also inspect all letters written by patients (except those addressed to Governors) and shall withhold such as appear to him to be objectionable. All letters so withheld shall be laid before the next Bethlem Sub-committee.

He shall see that the steward be made acquainted with every change that shall be made in the number of patients in any of the wards, in order that a corresponding change be made in the distribution of rations.

The proper care of the patients and the due administration of the hospital in accordance with the rules, shall be his first consideration, next to which he shall use his best exertions to render the establishment effective as a school for the study of insanity, and the dissemination of knowledge respecting its nature, causes, and proper treatment, to effect which:

He shall admit as pupils, medical students complying with the rules prepared for such cases; the Governors reserving to themselves the right of nominating from the metropolitan hospitals 10 pupils who shall attend gratuitously.

He

He shall make such regulations for their instruction, consistent with the comfort of the patients, and the educational proceedings in the other hospitals, as he may see fit.

The pupils shall have the privilege of attending all *post mortem* examinations made in the hospital.

He shall give, during each term, a course of lectures, to be illustrated by the cases under consideration at the time.

He shall, at the close of each term, examine the several pupils, and shall recommend to the Committee the most proficient of them for appointment as clinical clerk.

He shall prepare a prospectus for publication (when approved by the Committee), showing the commencement and termination of the two ensuing terms, and such other particulars as shall from time to time be determined on.

He shall be assisted in the peformance of his duties by a second resident medical officer, who shall in all respects be under his direction.

He shall present to the General Court of Governors, at their first meeting in every year, an annual report, showing the general condition of the patients, and the state and management of the hospital during the preceding year.

His salary shall be 700 *l.* per annum, exclusive of pupils' fees, with a residence in the hospital, furnished with planned and fitted furniture, and an annual allowance of coals not exceeding 20 tons, with a limited supply of gas.

The Apothecary.

1. There shall be an apothecary, who shall be a fellow or member of one of the Royal Colleges of Surgeons, and a licentiate of the Company of Apothecaries.

2. He shall devote the whole of his time to the service of the hospital, and shall not have any connexion, directly or indirectly, with any other establishment for the reception of lunatics, nor shall he professionally attend any private patient.

3. He shall be under the control of the resident physician, under whose immediate direction he shall perform all his duties.

4. He shall constantly reside in the hospital, and shall never be absent from it on any account whatever, without the consent of the resident physician. An absence of a month in every year will be allowed him, provided that arrangements be made satisfactory to the resident physician and the president or treasurer, for the efficient performance of his duties during his absence.

5. He

Documents and Letters.

5. He shall make up medicines, and dispense them to the patients and to the resident officers and servants of the hospital, and the house of occupations when required.

6. He shall, in the absence of the resident physician and of his approved substitute, have all the resident physician's authority and powers, and shall have charge of the whole establishment, and be responsible for its proper administration, subject to the rules of the hospital and the directions of the Governors; but it shall be his duty on such occasions to carry out, as far as may be practicable, the directions of the resident physician, or what may reasonably be expected to be his wishes in the event of no directions having been given.

7. His salary shall be 300 *l.* per annum (including the allowance from Government in respect of criminal lunatics, and exclusive of any part of the pupils' fees that may be allotted him) with a residence in the hospital, furnished only with planned and fitted furniture. He will also be allowed an annual supply of coals not exceeding 15 tons, and a limited supply of gas.

The Matron.

1. There shall be a matron who shall be under the control of the resident physician.

2. She shall not be under 30 nor above 42 years of age at the time of her appointment; and she shall be unmarried, or a widow not encumbered with a family.

3. She shall devote the whole of her time to the duties of her office, and shall have no connexion, directly or indirectly, with any other establishment.

4. She shall reside in the hospital, and shall never be absent from it for a night without first consulting the resident physician and obtaining the consent of the president or treasurer.

5. She shall be responsible for the prompt and accurate execution of all the directions of the resident physician, and under his guidance shall embrace every opportunity for the suitable employment, amusement, and instruction of the female patients.

6. She shall spend the chief part of her time with the female patients, and shall inspect them all, and the several apartments appropriated to their use, at least twice a day; her first inspection to be completed every morning by 10 o'clock.

7. She shall be responsible for the neat and cleanly appearance of the female patients, and shall take care that their apartments be kept clean and free from offensive smells; that a cheerful appearance be encouraged therein, and that every defect in the repair, warming, or ventilation thereof be immediately reported.

8. She

8. She shall take care that every case of sickness, and every casualty among the female patients requiring medical attention, be reported to the resident physician as soon as the same shall be perceived or shall occur.

9. She shall not remove any patient or attendant from one gallery to another without the authority of the resident physician.

10. She shall, in common with the resident physician, have control over the female attendants, and shall uniformly enforce on them the constant exercise of gentleness and kindness in the performance of their duties.

11. She shall be responsible for the proper making, repairing, washing, airing, and distribution of the linen of the hospital; she shall also be responsible for the proper clothing and bedding of the female patients.

12. She shall take stock of all the hospital clothing, bedding, &c., in the apartments for female patients, at least once in every quarter, and enter the same in a book to be kept for that purpose, and immediately communicate the result to the steward.

13. She shall take care that all the female attendants be faithful and diligent in the performance of their duties; that they observe the strictest propriety in their language, conduct, and demeanour, and that there be neither waste nor mismanagement in any part of the hospital under her charge.

14. She shall investigate all complaints made to her by female patients, and shall communicate the result of her inquiry to the resident physician.

15. She shall keep a journal, in which she shall notice every circumstance of importance occurring in her department, such journal to be submitted to the Bethlehem Sub-committee every time it meets.

16. She shall make occasional visits at uncertain times during the night to the different apartments under her charge, and shall report to the resident physician, and enter in her journal, the state in which they then appeared; such visits to be made at least twice a month.

17. She shall cause every female patient becoming dangerous or annoying to others, and not to be soothed or controlled by calmness or persuasion, to be quietly removed, and the circumstance to be immediately communicated to the resident physician, who alone shall have the power of imposing restraint or seclusion.

18. She shall be at liberty, as well as the resident physician, to inspect all letters written by female patients, unless addressed to Governors.

19. She shall take care that all clothing, and every other article brought to the hospital with female patients, be properly preserved,

Documents and Letters.

served, and duly returned on their discharge, or satisfactorily accounted for.

20. She shall insert in her journal any temporary absences from the hospital, stating the hours of her departure and return.

21. Her salary shall be 150 *l.* per annum, without rations, but with apartments partly furnished, 10 tons of coal per annum, and a limited supply of gas.

LETTER from Dr. *W. Wood* to the Right Honourable S. H. Walpole, M.P., &c. &c., enclosing OBSERVATIONS on the Management of BETHLEHEM HOSPITAL, with reference to the Report of the Commissioners in Lunacy.

Sir,

I BEG to submit to your consideration the accompanying Observations on the Management of Bethlehem Hospital, with reference to the Report of the Commissioners in Lunacy, and the evidence taken before them. At the same time, I have taken the liberty to enclose a copy of testimonials, which I trust will be considered, to some extent at least, an answer to charges made against me; and as in the course of my observations reference is made to my work on the Plea of Insanity, I have ventured to enclose a copy.

I have, &c.
(signed) *Wm. Wood*, M.D.

OBSERVATIONS on the Management of BETHLEHEM HOSPITAL, with reference to the Report of the Commissioners in Lunacy; by *William Wood*, M.D.

Observations of Dr. Wood.

THE impression that has been made upon the public mind by the Report of the Commissioners in Lunacy to the Secretary of State, and by the evidence taken before them as to the management of Bethlehem Hospital, and the treatment of patients in that institution, renders it necessary, not only to examine very particularly the evidence upon which rest the charges of neglect and cruelty, but also the circumstances under which those entrusted with the care of the patients have had the opportunity to abuse their trust. In dealing with this question, I am particularly anxious to avoid, as far as is possible, all direct personal allusion, but regret that this will not be always practicable.

Any observations on the management of Bethlehem Hospital would be incomplete without some reference to its form of government, which really affords a good illustration of the evils resulting from imperfect organization, and from

Observations of Dr. Wood.

ill-defined and irresponsible power. It would be exceedingly difficult to determine who was chiefly responsible for the management of Bethlehem. Many would, without hesitation, say that the president; as the recognized head, was really responsible for the management of an institution over which he presided; but by common consent the presidency of a Royal Hospital is little more than a nominal office, the active duties of management devolving on the next in command, viz., the treasurer. Practically, however, Bethlehem Hospital forms an exception to the general rule, as regards the position of president in the large hospitals; the president of this hospital and his nephew not only having, but exercising, considerable influence in the councils of the institution; and this influence is unusually great, in consequence of the privilege enjoyed by the president of nominating two life governors annually, without any contribution to the funds of the charity. It is manifest that an accumulation of such nominations during a long series of years would give a preponderating influence to the president, and materially affect the power of the treasurer, who not now possessing the same amount of influence, and not having the same privilege of nominating Governors, is less independent of the president than in any other hospital. The power, then, which the present treasurer has exercised, has been rather that which the president did not assume, than what could have been independently exerted in opposition to his authority. In addition to the president and treasurer, 40 other Governors constitute a committee for conducting the affairs of the hospital. The meetings of this committee are held at Bridewell, and, with the exception of the treasurer, very few of its members ever attend the sub-committee, which meets every week at Bethlehem; still fewer visit the wards, and scarcely any are, from their own observation, acquainted with the details of the practical working of the institution. The president then (who does not visit the wards excepting on some very rare and special occasion), and the majority of the committee, have to legislate upon the affairs of the hospital with a very imperfect knowledge of what is really required; and in this way the treasurer obtains his influence, and is able to exert considerable authority in all matters relating to the management of Bethlehem, but has, in fact, little real power if opposed by the president. A power thus ill-defined, and depending so largely on the support of another, is not that which is best calculated to promote the interests of an institution

Observations of Dr. Wood.

tution in which it is exercised, even in the most judicious hands, and is very apt to be exceeded from the very fact of its being so indefinite. The consequence of all this has been, that the greatest possible uncertainty has prevailed as to what course would be adopted under the various circumstances which occasionally arose in the working of the establishment. The same uncertainty existed as to the powers of other officers, and this produced jealousy, contention and discord.

From what has been stated, it will readily be supposed that I have had no reason to commend the government and management of Bethlehem Hospital: nevertheless, I feel bound to express my conviction, that although much ground existed for complaint, the statements made of the ill-treatment to which patients have been lately subjected in that institution are either wholly untrue, or have been greatly exaggerated.

I cannot divest my mind of the impression, that the Commissioners in Lunacy, in examining witnesses who volunteered their evidence, put too many leading questions of an implicatory nature to persons who, it must be obvious, were not very scrupulous, and who had sought out the occasion to give expression to angry and revengeful feelings: nor, in reviewing the circumstances under which it appears that the inquiry originated, can I forbear to express my regret that this was in consequence of statements made by a member of my own profession, who was, moreover, my principal opponent when I was appointed to Bethlehem, and who, but for my election, would have occupied my post. In making these statements, it does not appear that any anxiety was manifested to put a favourable construction on the case, but rather the reverse.

I am not about to defend or extenuate the conduct of those who were depraved and wicked enough to be cruel; but I hope to be able to prove that, to the utmost of my power, the one object of my existence, while I was at Bethlehem, was to prevent anything approaching to harshness or unkindness. That I was able to prevent it altogether, I cannot pretend to say; indeed, I know that I was not; but still believe that as much was done in this direction as could, under the circumstances in which I was placed, have been accomplished by any one individual.

To explain my position at Bethlehem Hospital, it will be necessary to refer briefly to the circumstances under which I was appointed. My immediate predecessor had become

Observations of Dr. Wood.

disabled from ill-health; and as this had been creeping upon him for a considerable period, the duties which properly belonged to his office had fallen into other hands. Here, then, was my first difficulty, to assume that authority which others had been exercising, and at the same time to attempt to improve what was believed by some to be as nearly perfection as anything human could be. I was, however, told by individual members of the committee, that a great deal would be expected of me, as they felt that there was much that required amendment. With perhaps more zeal than discretion, I attempted to make some alterations, and in doing so, trusted to the support of the Governors against the jealousy and opposition which were speedily aroused against me. For a time I was encouraged to persevere, with the assurance that I should be supported; but as soon as formal complaints, supported by powerful influence, were made of my interfering with duties which were not in my province, the tide was turned, and I was reminded that, in the event of a determined struggle, I, as the junior officer, must be prepared for defeat and its consequences. Still I endeavoured to alter what I thought wrong, but always in the face of the most determined opposition. From this time I was subjected to systematic persecution, and made to feel that the task in which I was engaged was indeed a hopeless one. Oppressed with impossible labours, and overwhelmed with ceaseless anxiety, I was held responsible for the due performance of all the regulations of the Governors, but had no power to enforce my orders; nor could I rely, with any certainty, upon support, if I appealed to those under whose control I was placed by the rules of the hospital. It would be thought trivial were I to mention some of the occasions when I have been refused permission to have some trifle for the patients, and even forbidden to give them what I had promised as an indulgence at my own expense; but in my own justification I must show the manner in which my authority in the hospital was limited, and my wishes opposed. Not very long after my appointment, a nurse, of whose conduct I had had frequent reason to complain, committed herself so far, during the absence of the matron from the hospital, that I took the opportunity to obtain the treasurer's sanction to her discharge; this occasioned a good deal of subsequent angry feeling, and I had much more difficulty in getting rid of the next. I had frequently represented her unfitness for her duty; for independently of her naturally rough manner, her intemperate habits

habits produced such constant irritability and violence of conduct, that frequent complaints were made to me of her behaviour. Observations of Dr. Wood.

On one occasion, on going into the ward, I found this nurse with a quantity of hair in her hand, which she had the moment before pulled out of a patient's head; the excitement and rage were so great in both, that it was some time before I could pacify either; having done so, I immediately went to the then treasurer, stated what I had seen, and urged the necessity of discharging the nurse instantly; other representations were, however, made, at the same time, and all that I could obtain was an order to suspend her until the following Friday. After this, she continued at her post, but without any improvement in her conduct. I again went to the treasurer, and stated that I was apprehensive of some serious catastrophe if this nurse were allowed to remain, as some of the patients were so exasperated against her that I could not be responsible for anything that might happen in her department. Accordingly she was ordered to be discharged, but was subsequently allowed to resign; when I wrote to the treasurer a note, from which the following is an extract: "Of course I have nothing to do with any arrangement that you have allowed the nurse to make after you had ordered her to be discharged; but for my own part, I must beg respectfully to disclaim any responsibility for whatever happens during the month that this nurse intends to occupy her present situation."

Towards the close of the year 1846, a female patient made a complaint to me of the treatment she had received, which I thought it my duty to report to the treasurer, and I took the opportunity of doing so in the presence of Dr. Monro, the senior physician of the hospital. The treasurer afterwards wrote to me on the subject, and said, "I have very maturely considered your conversation on Friday last, as well as the decided opinion which Dr. Monro gave upon the subject. I therefore feel it my duty, as treasurer of the hospital, to require you to give me formally, in writing, the charges you have made." Accordingly, I sent a written statement of the complaint that had been made to me, without a word of comment from myself. I heard nothing more of the matter until about three weeks afterwards, when I received a document, signed by the president and treasurer, containing at great length their view of the "misunderstandings" existing between the matron and myself, and giving it as their opinion "*that if these officers will consider*

Observations of Dr. Wood.

sider that they are only responsible for the duties of their own departments, and will confine themselves to the conscientious and strict performance of them, without interfering with the province of each other, they will find full occupation," &c. And again: "The president and treasurer desire to remind the apothecary that he is but young both in years and in office; and that without meaning the slightest disparagement to his abilities, *longer experience in his professional and official duties would alone justify (if at all) that extent of authority which he appears to claim to exercise.*"

I immediately went to the president, and remonstrated against the injustice of being censured for doing that which the treasurer had expressly ordered me to do; and suggested that the question then was not what differences existed between the matron and myself, but whether the complaint which had been made to me by a patient, and the particulars of which I had been ordered to send to the treasurer, was well-founded or not. The president spoke of the difficulty to be encountered in dealing with the case, and desired me to consider the document which had been sent to me a private communication, and not to think anything more of it. I had then no appeal; and it was pretty evident that it would be at the risk of making my tenure of office impossible if I persisted in the same course of resolute opposition to influences which I could not successfully resist; in fact, the determined hostility, which was the necessary consequence of my interference, recoiled upon the patients and upon the institution; and I felt that I could better serve both by submitting to what I had in vain endeavoured to alter, and making the most of what little power I was allowed to exercise. As a Governor observed to me, it was as unwise as it was useless to keep up animosity, and make enemies, by attempting that which I had no power to accomplish; besides, according to the strict letter of the rules, my duty was only to carry out the directions of others, and there was no obligation upon me to put myself forward in the matter at all.

The hostile feeling against me, though for a while subdued, still existed, and at length, in the summer of 1847, found expression in a series of charges which one of the Governors was instigated to prefer against me. A special meeting of the general committee was held, to examine and report to the Court whether the duties of the apothecary to Bethlehem Hospital had been efficiently and properly performed. It is unnecessary to enter into the particulars of this

Observations of Dr. Wood.

this unworthy attempt to degrade and injure me; and it will be enough to say that, after a lengthened investigation, it was moved by Mr. Peter Laurie, and seconded, *that the charges were frivolous and vexatious, and had been satisfactorily refuted in every instance, and that, in the opinion of the committee, the duties had been efficiently and properly performed.* Out of consideration, however, to the feelings of the Governor who had allowed himself to be mixed up in the affair, it was thought better not to use any expressions which would have the effect of censuring him; and accordingly it was resolved, *that the charges had not in any instance been proved, but that the duties had been efficiently and properly discharged.*

The termination of this inquiry, gratifying so far as it relieved me from all anxiety as to the opinion of the Governors, was yet unsatisfactory, inasmuch as it left me in the same position as regarded any opportunities of usefulness, and gave me no more power to overcome the opposition which I had to encounter at every turn, and which, notwithstanding protestations of friendship, never ceased. On this, as on many previous occasions, it was admitted that I had too much to do; but no steps were taken to provide me with any assistance, although the want of it gave occasion to the frivolous charges which were brought against me at this investigation, and necessarily left me open to similar charges whenever a convenient opportunity presented itself to prefer them. It was this unfair position to which I referred in my evidence before the Commissioners, and of which I have always complained, that the labours devolving upon me were what no human being could accomplish, and that, in consequence of the imperfect manner in which some of them were necessarily performed, I was always exposed to complaints of neglect of duty, and to the attacks of the vindictive and malevolent; nor could I, without wilfully shutting my eyes, avoid provoking this vindictive spirit. While I had thus to struggle on under every disadvantage, it was with the knowledge that I had those about me intent on doing me all the injury in their power, and thwarting me on every possible occasion. I am surprised, that in the evidence which Mr. Laurie gave before the Commissioners, he should have qualified his opinion as to the enormous amount of duty devolving upon me, because from the time of my first appointment, he admitted the necessity of my having assistance, and led me to expect that it would be given. Indeed, I have letters from him now in my possession in which he

Observations of Dr. Wood.

he fully recognizes the difficulties of my position. He is represented to have said, that he thought I had rather too much to do; but qualified it by saying, that at Hanwell there are only two resident medical officers, who have each about the same number of patients that I had. But, in the first place, he is in error about the number of officers at Hanwell; the fact being, that there is a resident apothecary besides the two resident medical officers; and a very material difference between the two institutions is, that at Hanwell the great majority of inmates are old cases, requiring rather care than treatment; whereas at Bethlehem, none but recent cases are admitted; and in addition to the duties in the hospital, I had the medical charge of the House of Occupations, in which, besides officers and servants, there were upwards of 200 juvenile delinquents between 12 and 20 years of age, and therefore peculiarly liable to a variety of ailments and accidents.

On the appointment of a new treasurer, in the spring of 1848, I renewed my efforts to bring about various changes, and not without some degree of success, although on the female side of the hospital any interference on my part was strictly prohibited, and my power still further limited. From the report of the treasurer's evidence before the Commissioners, it appears that he laboured under an erroneous impression as to the employment of the female patients. At the time of his appointment I had nothing to do with such employment, and had long ceased to interfere in the matter, in consequence of the resistance offered to the part I had formerly taken. The order which he gave was with reference to the classification, not the employment, of the female patients; if, therefore, he observed any increased employment, it was not in consequence of the duty being transferred by him to the matron, for it was already in her hands absolutely. There had been in the time of the former treasurer a good deal of discussion on this subject, and an attempt was made to work the existing rule, that the duty should be performed conjointly; but this was found to be not only extremely inconvenient, but impracticable, and I therefore gave it up entirely.

Although I ventured from time to time to direct attention to some of the more important defects and objectionable practices in connexion with the general management of the hospital, there was too frequently an unwillingness to listen to my representations; and on one occasion, when I made a communication on the extremely unsatisfactory condition of the washing-places and closets, the manner in which it

was

Observations of Dr. Wood.

was received betrayed positive annoyance, as if it were thought that I had no business to interfere in the matter; and I well remember saying, "Am I to shut my eyes because others have not seen this?" The necessity of the alteration proposed, was, however, considered so great, that orders were given to proceed with it immediately, without waiting for the sanction of the committee, which, considering the expense to be incurred, would, under ordinary circumstances, have been first obtained. I knew nothing of the plan adopted until considerable progress had been made with the works, and then it was necessary to undo much that had been done for the sake of introducing an obvious omission which I suggested should be supplied.

The diet, which I had always thought to be very indifferent, had often been the subject of discussion, and I availed myself of an opportunity to bring the question prominently before the Governors by means of a letter from a patient, who addressed the committee in a very rambling strain about various matters; but, amongst other things, stated what was a fact, that with oatmeal gruel they were only allowed two ounces of bread for breakfast. This was supposed to be only one of the list of unfounded statements, but on my calling special attention to this part of the letter, and stating that it was true, it was immediately determined to take the question of diet into consideration; but from that moment I heard not a word as to the nature and extent of the proposed alterations until the new diet table, which I believe was arranged without consulting any one of the medical officers, was read at the sub-committee, and its adoption moved; but as it was read over, I ventured to object to two salt-meat dinners a week, and succeeded in getting one of these changed for roast fresh meat.

Another subject which attracted my attention soon after my appointment, was the bedding of the patients, which appeared to me most objectionable throughout the house; and I therefore took an opportunity of raising the question by calling the treasurer's attention to the linen of a patient, which presented such marks as could not be mistaken, and fully bore out the truth of the complaints that were continually made to me. Having furnished practical proof that some improvement was necessary in this department, I urged the expediency of appointing a permanent mattress-maker with a view to substitute horse-hair mattresses for canvas bags of flock. This was acceded to, and a gradual renovation of the bedding has been going on ever since.

Finding

Observations of Dr. Wood.

Finding mechanical restraint in use to some extent when I went to the hospital, I presumed that it could not be dispensed with, and for some time acted on this presumption; but my own observation and the knowledge of what was done elsewhere, led me to the conclusion, that it was possible to do without it. I succeeded in gradually diminishing it, and at last discontinuing its use altogether; and to be sure that it was never resorted to without my knowledge, induced the treasurer to give an order that all instruments of restraint, of whatever kind, should be removed from the galleries. Although this change necessarily involved increased labour and vigilance on the part of the attendants, I was unable to obtain any increase of their number, and the inevitable consequence was a greater risk of accident and violence. I should here observe, that the observations made by Mr. Laurie on this subject, in his evidence before the Commissioners, must have referred to some period prior to my connexion with the hospital, as I never heard of the threatened exposure of which he speaks.

The windows throughout the hospital were universally admitted to require alteration. Some years ago new iron guards for the end windows of the galleries were made without my knowledge. As soon as I saw them I pointed out their defects, and endeavoured to prevent their being fixed; it was, however, determined that as they were made they should be put up, and this was accordingly done; but they had not been very long in their places when a patient availed himself of the opportunity which the size of the openings afforded to get through and escape from the hospital. Although I repeatedly called attention to the danger of allowing these to remain, I was unable to obtain their removal. The windows on the basement floor of the hospital had been hitherto heavily barred with massive iron spikes, presenting altogether a very prison-like appearance. A model of a new window which it was proposed to adopt was produced at the sub committee. I called attention to the various objections which occurred to me, but these were all overruled; and, as a last appeal, when I found that my own plan would not be listened to, suggested that some hints might be obtained from other asylums where the subject of windows had occupied attention. All further remonstrance was silenced by the very authoritative assurance, "They will be ordered this afternoon." Accordingly one was, I presume, ordered that afternoon, for in due time it was fixed; but its defects were now apparent. Another model, and, one after another,

Observations of Dr. Wood.

another, various modifications of it were made and fixed, until I think five different models were put up. None of these were approved, and they were all ultimately removed as unsuitable, not, however, before a patient had escaped through the one which was first put up. I was now asked for my ideas upon the subject; the sketch I gave was approved, and a model of it ordered and made. This gave general satisfaction, and it was resolved that it should be adopted. I in vain remonstrated against certain alterations which it was determined should be made in my plan; nor was I allowed to have a voice in carrying out my own invention, and the consequence was, that my measurements, with which I had taken great pains, were altogether disregarded, and all the openings made so much larger than what I had put down as safe, that when about 120 had been fixed, it was found that a small person could get through any of them; and this actually occurred in the case of one of the female patients.

I mention these facts only to show how limited was my power to accomplish anything I wished, or to prevent anything I thought objectionable. With the incessant harass of the multifarious duties which devolved upon me, with all the practical responsibility of a resident physician, but without the power, having also to perform the routine duty of a clerk and the drudgery of a dispenser, I could not possibly devote all the time that was required for an efficient supervision of the attendants. It is therefore quite possible that even on the male side of the hospital there may have been occasionally inexcusable harshness practised; but no human being can be answerable for the individual acts of a number of persons in the position of servants, who, whatever their discipline, are necessarily, during the greater portion of their time, removed from the check of a superintending eye; besides, my authority even here was of the most limited kind, for on the male as well as on the female side my orders have been met by a positive refusal to obey me. On one occasion I directed a man to sit up with a patient, who, I thought, ought not to be left during the night, and the last thing before going to bed I went into the ward to see that he was at his post; I found him smoking and drinking, and upon my desiring him to desist, he refused in the most insolent manner, nor would he leave the ward when I ordered him to do so, until I threatened to have him removed by force, and was actually driven to give the order to the other men to take him away. Although, strictly, I had no authority to demand

Observations of Dr. Wood.

demand his keys, I ventured to do so, but he flatly refused to give them up. The following morning I obtained permission to suspend the man, and the day after this he was ordered to be discharged, but not until I had been confronted with him, and my statement, no part of which he could deny, had been taken down in writing in his presence. I had no power at all to deal with this case, and the steps that were taken tended to show all the other servants of the hospital how limited was my authority. I had, in fact, no security that the view I entertained of the necessity for any particular punishment would be adopted, and it has occurred that I have in vain endeavoured to get rid of those I considered utterly unworthy of confidence. In substantiating a charge of misconduct, which I had no power to punish, I was, in fact, only creating a vindictive feeling on the part of the offender, who gloried in his triumph, and watched his opportunity for revenge, as will be seen by the evidence given before the Commissioners. It must be borne in mind that the control of the male attendants, such as it was, only came into the hands of the medical officers a little more than three months before the visit of the Commissioners. I suggested that they ought to be placed under the control of the medical officer, as I was then designated, because I knew that in practice the whole duty would devolve upon me. It was, however, ordered otherwise; and to show that I really had no power, the very first regulation which I made in conformity with the rule, and also with the practice at Hanwell, was without my knowledge countermanded by my inferior in office, whose act was sanctioned and confirmed, notwithstanding the earnest remonstrance which I made as soon as I knew that my written notice had been removed and another substituted for it. Before dismissing this part of my subject, I feel bound to express my acknowledgments to some few of the Governors of Bethlehem, who occasionally attended the sub-committee, for their uniform kindness, courtesy, and consideration, and only regret that there should have been any whose behaviour, especially of late years, afforded a very striking contrast, and whose estimate of the comparative position of Governor and medical officer induced the adoption of a manner the very reverse of courteous. Indeed, an instance of the very ungracious course adopted by individuals in authority at Bethlehem Hospital has occurred since I resigned my appointment in that institution. Before leaving I had been unable to complete the case-books, in consequence of the additional demands on my time in connexion

connexion with my new engagements. Unwilling that my successors should be deprived of information with regard to some of the more recent cases which I alone could furnish at considerable personal inconvenience and sacrifice of time I went to the hospital occasionally, to record my observations on some of the cases during their earlier stages, made during the latter part of my residence. I continued to do so at intervals, until I received the following letter, written, be it observed, not only without the concurrence, but even without the knowledge of the present medical officers.

Observations of Dr. Wood.

"Bridewell Hospital,
"Dear Sir, 13 November 1852.

"I AM directed to inform you, that as all the case-books in Bethlehem Hospital have now been placed in the hands of the resident physician and the apothecary, it is thought best that you should make no further entries therein. At the same time the Governors will feel obliged to you for copies of any memoranda you may possess respecting patients, which in your opinion it is desirable should be inserted in the case-books to complete particular cases.

"I have, &c.
"Dr. Wood." (signed) "*B. Welton.*"

Of course memoranda are of little value, comparatively, to anybody but the individual who made them; no other person could make the same use of them, or know what was necessary to render them complete; and there seems no other reason than caprice why these public records should be left in an unfinished state, and why there should be such a gratuitous exercise of arbitrary authority in utter disregard of the feelings of an old officer, and without any reference to the opinions and wishes of those gentlemen who have now the medical charge of the hospital. I have thought it necessary to refer to this matter for the purpose of putting on record the fact, that I was anxious to complete the cases of all the patients admitted during my residence in Bethlehem, but that, without the knowledge of the present medical officers, I was forbidden to do so.

I will now proceed to consider the Report of the Commissioners, and the evidence given before them, merely premising that I only propose to deal with the more important points. The errors in the short-hand writer's notes are too numerous to notice, and many of the sentences are so obscure in their meaning that it would be impossible to explain what was the idea intended to be conveyed. The majority

Observations of Dr. Wood.

majority of these errors are so obvious that it is unnecessary to refer to them; and I could not do so without greatly extending these observations, which must necessarily be of much greater length than I could have wished. As an example of these errors, I may mention that I am represented to have said that, possibly, I might have allowed a lad from the House of Occupations to have fed patients with the stomach pump. I need hardly say that such a thing was never permitted under any circumstances whatever, and I could not have so stated it. This is distinctly shown in another part of the evidence (Q. 2570. to 2576).*

The first observation in the Report which has special reference to myself, is contained in page 7, where the manner of keeping the case-books, registers, and other records of the hospital is alluded to. As regards the case-books, it can scarcely be necessary for me to observe that, considering the number of patients in the hospital, and the fact of every one admitted being a recent case, there would have been abundant occupation for at least one person without any other duty, if observations were collected with such care and exactness, and if the cases were kept so minutely as to record every variation in the mental and bodily condition of every individual, with an account of all medicines administered, and their effects, as well as a description of all marks, bruises, or other injuries which are produced. To perform this duty in a general hospital, several persons are employed, besides the provision which is made for dispensing the medicines; and though this part of the service is much greater in a general hospital than in an hospital for insane persons, there is the same field for observation as regards variations in the condition of patients in both, and therefore the same necessity for providing a sufficient staff. That one person can possibly do this in such an hospital as Bethlehem, is manifestly impracticable; and such is the view adopted by the Commissioners, who in their Report say, "When to the medical and moral treatment of the patients are added the multifarious duties comprised under the terms 'general management and superintendence,' duties which have been found by experience to be, in general, most conveniently attached to the office of the resident medical officer, *it will readily be conceded that in an hospital of the size and character of Bethlehem, those labours are far too onerous to be adequately*

* The references by number in these observations are to the Minutes of Evidence, as printed by the Committee of Governors.

Observations of Dr. Wood.

quately performed by a single individual;" and again, "*The proper discharge of such duties would, we conceive, furnish ample employment for at least two resident medical officers.*" It is not surprising, then, that in summing up their Report, one of the conclusions at which the Commissioners arrived was, that my duties were "not fully performed." I do not hesitate to admit it. Indeed the Commissioners themselves, in the quotations just referred to, show that it was impossible. I believe that there is no case-book in any hospital which would enable the medical officers to disprove statements made after the lapse of many months as to the bodily condition of individual patients who were said to have been the subjects of particular bruises, abrasions, and other marks. I have had some experience in this matter, and at University College gained a gold medal for keeping medical cases; I know, therefore, what can be done, and how to do it; but I know also the immense time that must be occupied in this duty if it is done well. I do not pretend to say that the cases are kept so fully as I could have wished, even for my own satisfaction and information, but I believe they are at least equal to the average of cases in similar institutions. I have represented to the Governors the impossibility of doing more at the case-books from want of time, and their approval of what has been done has been regularly recorded by the signature of the chairman of the sub-committee every week to those cases which have been discharged; and as the great majority of all the patients admitted on the curable establishment are discharged in the course of the year, and the whole of them, with perhaps one or two very rare exceptions, in the course of 15 months from their admission, all the cases in their turn come before the sub-committee, and are approved. It is said that "the case-book contains, with scarcely any exceptions, merely a brief summary of the condition of the patient at the respective periods of admission and discharge." Although this may be considered to have been the rule, the exceptions were much more numerous than was supposed. For instance, on looking through the case-books of 1850, the year preceding the visit of the Commissioners, I found about 160 exceptions out of a total of 344 admissions; but it must be remarked, that the manner in which the cases have been kept, has not only been permitted, but distinctly sanctioned by the Governors, who, no doubt, felt that it was utterly impossible for me to keep all the cases as required by the rules. I do not hesitate to admit that the cases have been

Observations of Dr. Wood.

only partially kept; but I think I have shown that they are not so imperfect as the Commissioners suppose. The only records required by the rules which have not been kept, are of my visits to the wards. For about nine months after my appointment, I kept a book in which I recorded as correctly as I could all my visits; but as this book was never seen, keeping it appeared to me to involve a sacrifice of time which I thought would be better employed, and instead of it, I took upon myself to introduce what was not required by the rules, and what had never been kept previously, viz., a prescription-book, in which the prescriptions might be written and preserved. This book has been regularly kept since 1846, and I think it cannot be questioned that it was much more necessary than a record of visits which was never seen, which it was difficult, on account of frequent interruptions, to keep correctly, and which, after all, could be no satisfactory evidence of the time passed in the wards. The uncertainty spoken of as to who was responsible for the sufficiency of the bedding and clothing, appears to have arisen from my having said that I took it upon myself to speak of it if I found a patient not sufficiently clothed; but the new rule does not contemplate any responsibility on my part in this matter; it is as follows: "The male attendants shall be under the control of the medical officers, except so far as relates to their custody of furniture, bedding, and male patients' clothing, respecting which they shall be under the directions of the steward; and the female attendants shall, with the like exception, be under the control of the matron."

The Commissioners have concluded, that the fact of female patients being put to bed without body-linen, had never come to my knowledge; but it will be seen, by reference to the evidence, that the questions and answers upon this subject were misunderstood, and that at my second examination the question was not pressed to ascertain how far I had ever been cognizant of such a proceeding. I did not volunteer any statement which might have appeared like an attempt to exonerate myself at the expense of others, and therefore contented myself with direct answers to the questions put to me; but I stated that some of these cases had come to my knowledge, and that I had at once, on my own authority, desired the nurse to provide them with proper clothing. The fact of such a proceeding being ever resorted to, became known to me by means of the complaints of some of those patients who were subjected

to

Observations of Dr. Wood.

to it; and on inquiry of the nurse, I was told that it was done in some cases as a precautionary measure where patients were intent upon committing suicide, especially by strangulation, linen being considered a more dangerous material than blankets, and more likely to be torn up for the purpose of furnishing the means; and again, in other cases, because it was thought that patients who were wet and dirty were better, and indeed more comfortable, between woollen blankets than with anything linen about them. These reasons were, to my mind, very unsatisfactory, and I thought the better course would be to make a report to the treasurer on the subject, and leave him to deal with it as he thought best. Accordingly, I made a special visit to his house, and at the same time that I informed him of the fact, explained why I did not mention it to the matron; he undertook to correct this without involving me in any contention or unpleasant feeling. I concluded that he had done so, and felt that my responsibility in the matter was at an end. Subsequently individual patients complained to me that they were subjected to this treatment, and some special reason was urged as an excuse for it; but in these cases I took upon myself to desire the nurse to furnish proper night clothing. I think I may say positively that no patient whose state of health required that I should see her in bed was ever put to bed without a proper night dress. I certainly never saw a patient under these circumstances without body-linen, although it has occasionally happened that I have waited outside a room until the nurse could put something on a patient, who, on opening the door, was found to be naked. There have been continually patients in that part of the basement devoted to dirty patients who have kept their beds for weeks on account of bodily illness: these I have seen at all hours, but never without proper clothing, although their habits were very dirty. I had no reason, therefore, to suspect that all the others in the same gallery would be treated so differently; a large proportion of them were not in a condition mentally to complain of it, and those who were would not, as a rule, mention such a matter to me. There have, however, been exceptions, and these I have taken upon myself to deal with. I have always felt the necessity of being scrupulously particular in all my proceedings on the female side of the hospital, and was specially careful to guard against the possibility of any insinuation, even of indiscretion, and never went into a bed-room in which I knew there was a female patient without being

Observations of Dr. Wood.

invariably preceded by a nurse, to be sure that the patient was fit for me to see; and I had no opportunity, therefore, of ascertaining, by my own observation, in what condition, as regards clothing, the patients were usually put to bed. An instance occurs in this part of the evidence of the kind of errors which pervade the short-hand writer's notes. At Q. 2936 a part of my former evidence is quoted, which, as it is represented, has no meaning whatever. For example, "Is there a good deal of loose straw interposed between their bodies and the straw? You say, 'No'?"; and then I am made to confirm this answer to the unmeaning question by saying "Precisely." What actually passed at my first examination is thus represented in another part of the evidence (Q. 245, 246.): "Is there a good deal of loose straw? Yes; in the lower department for the dirty patients.—Are you aware that any of the female patients in the basement sleep entirely naked upon loose straw, without anything interposed between their bodies and the straw? No."

From the confused manner in which this part of the evidence has been reported, the impression has got abroad that the female patients were put to bed naked upon loose straw; the fact being that they were put to bed between blankets, but the bedding under the blankets consisted of loose straw. I need hardly say that I do not mention this for the purpose of defending or excusing the manner in which females have been put to bed, but it is right that the case should be stated correctly; and it should be observed that nothing of this kind was ever heard of on the male side of the hospital, where there was no difficulty in my seeing the manner in which the patients were put to bed.

As regards my night visits to the wards, it was never contemplated by the rules that I should go into the different bed-rooms of the females, and the frequency of my visits to the galleries at night could never have been known to the patients, who were all locked up in separate rooms. My visits to the galleries were not so frequent on the female as on the male side, where I could and did go at all hours without the company of an attendant; and the declaration of the watchman will show to what extent I observed this practice.

The report proceeds to comment upon the cases of particular patients, and first on that of Miss A. M.

It is stated that I was informed that there were marks on her body; that she had a bodily complaint requiring great care and attention, and swollen legs; but that I did not particularly

Observations of Dr. Wood.

ticularly inspect her bodily condition, or examine the sores on her person; nor did I see her in bed, or know that she was put to bed naked upon loose straw; that during her residence in the hospital she got into bad health, and suffered under some bodily complaint, and was treated medically, &c.; but that no record is to be found in the case-book beyond the general fact of her being placed upon sick diet.

The following particulars were furnished by the friends of this patient at the time of her admission:

A. M., aged 56, unmarried, had led a solitary life, was hereditarily predisposed to insanity, her father having been insane. It was stated that her disposition was naturally irritable and suspicious, that her memory was impaired, that she had refused food for 10 days before her admission, and had attempted to commit suicide. There is no dispute as to the state of her health on admission; this was admitted on all hands to be bad. The medical gentleman who signed her certificate to go into the hospital, says, "She was in a very impaired state of bodily health, and appeared to me to be suffering from a description of low fever; she was in anything but a state of health." The following entry was made in the hospital case-book a few days after her admission: "Very much depressed, silent, and inert; it is with difficulty that any answer can be obtained from her, and sometimes all attempts to make her speak are unavailing; she is not disposed to exert herself in any way, and will not take the trouble to observe ordinary personal cleanliness. At first there was great difficulty in persuading her to take food, for she said her throat was grown up, but she was soon convinced that this was not the case; at least the second day after admission she ate a tolerable meal of tea and bread and butter without much trouble: sometimes noisy at night." One of the prominent symptoms of her malady then, viz., the refusal of food, was successfully dealt with at starting; and this, as far as it goes, is surely evidence that she was not neglected, but that, on the contrary, her case received the kind of attention which was required. Her dirty habits increased, her feet swelled, and she evidently lost ground as regarded her general health. Sick diet, bottled stout, quinine, and mineral acid were successively ordered, and the nurse, who was a person of considerable experience, was directed what to do for the infirmity under which she laboured. These means were so far successful that there was no recurrence of those particular

Observations of Dr. Wood.

symptoms. It was difficult, on account of her obstinate silence, to obtain any information as to her thoughts and feelings, and this perversity characterised her throughout the period of her residence in the hospital. Her condition is thus described when she was discharged, at the request of her friends: "She is not so determinedly silent, but does not always answer when spoken to, and is still inert and very dirty." Her general health got worse, but she was always dressed, and sat up with the other patients, and never kept her bed during the day. The medical gentleman who gave the certificate was a stranger to her, and thought she would not bear the proposed journey to Northampton. Her friends, however, who were better acquainted with her peculiar constitution, saw no reason for anxiety on this point. She was therefore removed the following day; and subjoined is the statement of her case, sent to the Commissioners in Lunacy, on 11th May 1851, by Dr. Nesbitt, the medical superintendent of the Northampton Asylum: "Her state upon admission was most deplorable, with an attenuated frame; her system was so enfeebled that she was unable to sit up;" and then, besides an infirmity which he describes, it is said, that "her lower extremities were livid and œdematous, and their motion paralysed. On her hips and *nates* were a great many abrasions of the surface, varying in size from a millet seed to a split pea," &c. Dr. Nesbitt is then asked by the Commissioners, in a note dated 13th May 1851, "To what cause were the abrasions and sores, to which you refer, attributable?" After giving an answer to the effect that he had "no longer any hesitation in stating that such appearances were referable to neglect," he volunteers a statement that "as the patient is remarkable for truthfulness, and is more desirous of burying in oblivion that part of her life spent in Bethlehem, I cannot arrive at any other conclusion than that the abrasions were referable to the straw which, in both its wet and dry state, would produce an irritation of the surface exactly calculated to lead to a solution of continuity in a bed-ridden patient, and in connexion with her want of clean linen." In commenting upon what appears to be the meaning of this sentence, the first thing that attracts attention is the statement that the patient was "more desirous" (than what does not appear) "of burying in oblivion that part of her life spent in Bethlehem." It is somewhat remarkable that, although she was taken to Northampton in December, at which time it is presumed her

her condition was made known to the Commissioners, it was not until May that any inquiry was instituted. With the anxiety which she is said to have felt to bury in oblivion that part of her life spent in Bethlehem, it is not very clear at whose instigation the inquiry was set on foot: it can hardly be supposed that it was her own wish. The observations about "solution of continuity in a bed-ridden patient" scarcely apply, inasmuch as this patient was not bed-ridden; in fact, she never kept her bed a single day while in Bethlehem. According to Dr. Nesbitt's account, in May, A. M.'s "mental state was that of rationality, propriety, and decorum, and her bodily health was completely re-established." This statement is somewhat inconsistent with the observation of the Commissioners on her examination before them, 30th July 1851, when she is reported as being "still in a nervous and excitable state;" and accordingly was not sworn; and even at a subsequent period, when she expressed her willingness to swear to the truth of what she had stated, and was sworn accordingly, "she declined having her evidence read over to her." But Dr. Nesbitt says, that "she was always a quiet patient, grateful for attention;" and again, that she was "remarkable for truthfulness, and more desirous of burying in oblivion that part of her life spent in Bethlehem," &c.; in fact, as might be gathered from his encomiums, a particularly amiable person; therefore thus making the case appear still more gross as regards her alleged ill-treatment in Bethlehem.

Observations of Dr. Wood.

By referring to the evidence of the medical attendant (Q. 1984) it will be seen what was the opinion of the patient's own mother and relatives of her disposition and temper; he says, "From a conversation I had with the family, it appears that A. M. is a very irritable and very uncomfortable person to live with." Again, "She is of a peculiar disposition, which renders her not an eligible person to reside with;" and that this was not an incorrect statement may be gathered from the fact, that in the printed form sent with her when she was admitted into Bethlehem, she is described as being naturally "irritable and suspicious." But it is not only that Dr. Nesbitt's statements are, in some particulars, inconsistent with the statements of the Commissioners, and of the friends of the patient, but he actually gives, at different periods, two different accounts of the same facts; for instance, when he wrote to the Commissioners on 11th May, in stating the condition of the patient when admitted, he says, "On the hips and *nates* were a great

Observations of Dr. Wood.

great many abrasions of the surface, varying in size from a millet seed to a split pea;" but on 24th July, when he was examined before the Commissioners, he says, "There were three or four sores of a large description, about the size of half-a-crown, and upon her hips, her back, and her heel there was a number of small abrasions, not perhaps larger than a split pea in different parts," &c. Although the exact meaning of this sentence is not very clear, it is evident that Dr. Nesbitt's recollection of the size of the sores and abrasions was rather confused; what were represented by him on 11th May to have existed in the previous December, and to have varied in size from a millet seed to a split pea, had in his imagination actually increased by 24th July to split peas and half-crowns. I cannot suppose that Dr. Nesbitt would intentionally exaggerate a statement which he must have known was so well calculated to injure the character and reputation of one who had been his successful competitor; but I do think, on such an occasion, he should have been rigidly exact in his description of a case which had passed from my charge to his. It may be said that at most it was an error of memory, and that his recollection of what he had seen the previous December might very possibly be different in July to what it was nearly three months previously, but it must be remembered that these statements were made on oath, and doubtless with a full knowledge that they were to be used in substantiating a charge against Bethlehem.

In the natural course of events an impression loses something of its clearness, distinctness and intensity, in proportion to the interval that has elapsed since it was made upon the mind; but in this case the impression made in December seems to have been more vivid on 24th July than it had been on 11th May; and accordingly marks, which in May were described as being of the size of split peas, were, in the following July, sworn to have been of the size of half-crowns; unless, indeed, it is to be understood that in July a new set of sores were described which had not been discovered in May. It is not probable that such a statement on oath would have been hazarded from memory, and yet it is incomprehensible how such discrepancy could have occurred in quoting, at different periods, what had been recorded, in writing, at the time it was observed. Dr. Nesbitt goes on to speak of this patient's lower limbs being paralysed, and of her being so enfeebled that she was unable to sit up. In reply to this I can only say, that there was no paralysis

of

Observations of Dr. Wood.

of motion when she left Bethlehem; that she sat up perfectly well to the last; and, as it appears, travelled about 70 miles, in the sitting posture, I presume from her home to the Northampton Asylum, the day after she left the hospital. That such a journey to a person in her weak state of health, at her age, and with her infirmities, should have had the effect of temporarily increasing those infirmities, is not surprising; and while I am willing to give Dr. Nesbitt every credit for his judicious treatment of the case, I cannot help thinking that he took a more unfavourable view of the condition of the patient on her arrival at Northampton than the circumstances warranted. With comfortable and well-lighted rooms, which are provided for private patients (on which footing A. M. was now placed) at the Northampton Asylum, but which do not exist at Bethlehem; with little more than half the number of patients that are in Bethlehem, and very few of these recent cases; with a very efficient assistant medical officer to share his labours; with full authority over every person in the asylum; and withal in an institution situated in the most healthy locality in the kingdom,—I can readily understand that a weakly patient would have a better chance, under Dr. Nesbitt's care, than at Bethlehem, where there is no infirmary; where many of the bed-rooms are so dark that not only is it impossible to see the condition of the surface, but in some cases even the person of the patient, and especially at the time of year when A. M. was there; where there are a large number of recent cases requiring individual care and attention, and where I alone, without any kind of assistance and very limited authority, was expected to do everything for them all. To return to the Report of the Commissioners, it is stated that I did not particularly inspect A. M.'s bodily condition, or examine the sores on her person. The existence of these, or indeed of any marks on her body, was never reported to me; and I cannot, in the Minutes of Evidence, find anything from which it can be inferred that such report was made to me, unless, indeed, from the statement of the matron, by which it appears that she took it for granted they would have been reported if they had existed. As regards sores, however, it does not appear from Dr. Nesbitt's first statement that he found any, but that the marks consisted of abrasions, varying in size from a millet seed to a split pea. The reason of my never having seen her in bed was, that she was not so ill as to render it necessary for her to keep her bed; and it was not, as a rule, usual for me to see females

Observations of Dr. Wood.

females in bed, unless they were confined to their beds by illness. This will account also for my not knowing how she was put to bed. As regards the infirmity already alluded to, Dr. Nesbitt must have known that this must have existed long before she became a patient in Bethlehem Hospital, probably for many years; and that in a person of her age, and in her weak state, a long and fatiguing journey was just what was calculated to aggravate it for a time. There was never occasion for an examination to be made, inasmuch as the directions which I gave to the nurse answered the purpose, and had the effect of relieving her so far, that she had no return of the symptoms while she remained in the hospital. Without pretending to any excessive modesty, I certainly should think it unnecessary and indelicate to make an examination under such circumstances, and should invariably try the effect of the usual simple means before adopting such an alternative. All that could be done in such a case, was to palliate the symptoms as they presented themselves, and endeavour to prevent their recurrence by improving the general health. All this was done, and duly recorded in the books used for the purpose.

As regards the medical treatment, though not in the case-book, it appears in the prescription-book, and the sick diet and bottled stout in the sick-diet book. I was quite aware that her legs were œdematous, but this was only one of the symptoms of a generally feeble condition, and did not exist to any considerable degree. The case in the case-book is no doubt imperfect, and would of course have been much more complete, if the various entries from the prescription and sick-diet books had been transferred to it, and if a more particular description had been given of the patient's condition and symptoms; but when it is borne in mind, that without any assistance I had to perform the duties of a resident physician, an apothecary, and a clinical clerk, and that altogether there were about 700 persons on the premises, including the House of Occupations, who had a claim upon my services, it will scarcely be considered that I could fairly be held responsible for the imperfect manner in which some of these duties were performed. The case-book containing this case was as usual produced to the sub-committee, and signed by the chairman, as having been approved. Although it is stated that I hardly ever spoke to this patient, and never examined her medically, it was I who ordered the sick diet, the bottled stout, and the quinine, &c.; and the evidence of the medical gentleman who saw

Observations of Dr. Wood.

saw her when she left, proves how extremely difficult it was to engage her in anything like conversation; indeed all my efforts to extort a word from her were frequently unavailing, and she constantly took no notice whatever when I spoke to her.

The sister of A. M. was examined by the Commissioners, 30th July 1851, and stated, that when she visited the patient, 4th November 1850, she complained of the treatment she received; that when asked what sort of bed she had, she exclaimed, "Oh! none at all; I sometimes have a covering, and sometimes I have none;" that once when she was dirty in the middle of the night, two nurses came to her, took her out of the cell, and gave her a cold shower-bath, and that they then pushed her back into her cell without wiping or drying her at all; that she had on one occasion been obliged to get up and wash her own linen; she complained that the nurses were very rough and rude, called her names, and threatened to kick her. It is incredible that a person could hear such a statement from her own sister, and not take any steps to ascertain its truth, although she saw me repeatedly, and consulted me as to the possibility of her sister signing some legal documents; but she never once mentioned a word about her having complained of ill-treatment. It appears that on 3d or 4th December, the sister again saw the patient, whom she found "altogether worse in every way;" that she afterwards saw the nurse, to whom she said, "Then she lies on straw naked?" and the nurse said, "Yes, she does." Still not a word was said to me on the subject, though the sister saw me several times. The sister goes on to say, that when she got the patient home, she found her back a complete mass of sores; but independently of this account of her condition not being consistent with Dr. Nesbitt's first account on 11th May, or even with his second account on 24th July, there was nothing to explain the existence of this "mass of sores," because her back was not subjected to the pressure of the continued recumbent posture; on the contrary, she always sat up with the other patients during the day; and it does not appear, nor indeed is it insinuated, that any direct personal violence was offered which could have produced them: if, then, they really existed, they must have been the result of some constitutional cause, and quite independent of any particular kind of treatment. A. M. says, she was too ill to complain to me, but it seems she was able, and it is stated did complain to her sister; there does not, therefore, appear to be any good reason why I should not have been informed on the

Observations of Dr. Wood.

the subject, if not by the patient, at any rate by her sister. But from Dr. Monro's evidence (Q. 1074) it will be seen what effect was produced upon the mind of the patient's sister by the statements said to have been made to her by A. M., while in the hospital. Dr. Monro quotes the following note:—"Miss F. M. begs her respectful compliments to Dr. Monro, and regrets that she has been so long in receiving her brother's answer, who is fully sensible with herself of the kindness and wisdom of the step which Dr. Monro gave her in advising them to pause before removing A. M. from Bethlehem Hospital; and in her present state they consider she is far better to remain there."

With reference to the case generally, I think I have shown that the medical treatment of the patient was not neglected, although, no doubt, more individual personal attention might have been advantageously given, if there had been a sufficient staff of medical officers to share the work. There is, however, evidence that the usual medical and dietetic means were resorted to for the purpose of improving her general health. That these were not aided by strict attention to personal comforts is much to be lamented; but I need hardly say, that the personal comforts of the female patients, including clothing and bedding, were most distinctly in the province of another; there was more than enough anxiety and responsibility connected with my own duties for any one person to endure, and I have already shown that there was no good purpose to be answered by interfering in a department where I had no power or control.

The next case to which the Commissioners refer is that of H. H., a female patient, who was admitted 4th April, and remained in the hospital 14 days. The first point upon which statements differ is the condition in which she was received into Bethlehem Hospital; her friends saying that her health was pretty good, and that she was gaining flesh; the medical attendant, that she had been ill for some time, that she was naturally thin, and was of course thinner when she went into the hospital, but was not greatly emaciated; she had the average amount of flesh and strength for an invalid; all who saw her at the hospital concurred in saying that she was emaciated, and the Commissioners are in error in supposing that the case-book does not set forth the fact (Q. 373.). On the fifth day of her residence in the hospital the following entry occurs in the case-book: "On visiting the ward this morning, the nurse informed me that she (H. H.) could not be induced to take any food, but was in other

other respects much the same. I took her into the dining-room, apart from the other patients, and after a good deal of coaxing and persuasion, succeeded in getting her to take some beef-tea and bread; at the same time, suspecting that her *emaciation* might be owing to pulmonary disease, I examined her chest carefully, but could not discover anything particularly wrong."

Observations of Dr. Wood.

It was very easy to be misled in such a case as to the real strength of the patient by the apparent power, and an ordinary observer would be very apt to conclude, on seeing the amount of resistance which is sometimes offered in these cases of imperfect general paralysis, that there was at least the average amount of strength. Medical men who have had no special experience in insanity are as apt to be deceived under these circumstances as non-professional observers; for such cases are comparatively rare, though the wards of an institution like Bethlehem Hospital will generally furnish an example.

The truth is, that the case of H. H. was hopeless from the commencement, and there was considerable hesitation about admitting her on account of her very precarious condition; this, however, was not so much owing to the weakness of any bodily illness, as to the indications of disease within the head, which had already seriously affected the vital powers, and which threatened speedily to result in a general break-up of the constitution, and in some modification of that peculiar form of paralysis occurring only in insane persons. When the father of the patient visited the hospital eight days after her admission, I was able to say that she was a little better, inasmuch as she had taken her food better the last two days; that is, since the occasion referred to in the extract above; but there was no improvement in her mental condition. She continued to take a tolerable quantity of food from the nurses without any further interference on my part, but on 15th April the following entry occurs in the case-book:—"On getting her up this morning, she was unusually shaky, and three or four hours afterwards, while in the sitting-room with the nurse, and standing near the window, she suddenly fell down in a fit, was a good deal convulsed, but soon recovered to about the same condition she was in before the fit occurred." This was just what might have been expected in a person in her condition, and was really what commonly occurs in the progress of such a case. As regards medical treatment, I am convinced that no power on earth could have averted a fatal issue, which most assuredly occurred

Ooservations of Dr. Wood.

occurred as the natural result of the condition in which she was brought to the hospital.

The first thing in the evidence of the father of H. H. which appears to attribute neglect to me, is the statement that a letter was delivered at the hospital at six o'clock in the morning, but that the answer was not received until half-past two in the afternoon. There must surely be some mistake in this, for it appears that it was only on Thursday night that Mr. H. heard something from one of the attendants, which induced him to write a letter to me as soon as he reached his office the next morning. It is presumed this could scarcely have been in time for him to have delivered the letter at Bethlehem by six o'clock on the following morning (Friday). To the best of my recollection this letter was delivered to me about 10 o'clock in the morning. I consulted with Sir A. Morison about it as soon as he came, and then, that there might be no delay, despatched a messenger with it to Mr. H.'s house. The father and mother of the patient came to the hospital in the course of the afternoon, when I explained to them the hopelessness of her condition, was present when she was delivered to them, and saw her leave the hospital. At that time, I am sure that neither of the poor girl's parents felt that they had any reason to complain of my inattention either to the patient or themselves; indeed, I have a distinct recollection of their warm expressions of gratitude to me personally for the interest I had taken in the case; nor at the subsequent interviews which we had was there the slightest reason to believe that any other feeling existed. What Mr. H. states to have been my answer when he asked me how often he might call to inquire after his daughter, viz., "You can call when you like, and we will let you know how she is," is the sort of answer I invariably gave to everybody who asked me a similar question. Why anybody in the hospital should have fixed a time at the expiration of eight or nine days after the admission of a patient for the first inquiry of friends, I cannot imagine. There is no doubt the patient got worse while in the hospital, and the only question is, whether this was owing to the natural progress of her disease, or whether it was the consequence of the treatment to which she was subjected. The entry in the case-book on 15th April, which has been already quoted, is conclusive as to her suffering from a very serious form of disease, which was quite independent of any kind of treatment; and the emaciation which all agree existed when she left the hospital, must be referred to some other cause than want

Observations of Dr. Wood.

want of food, for there is no reason to believe, nor indeed is it suggested, that this was withheld. No doubt the diseased condition of the brain was the reason of the imperfect manner in which the various functions of the body were performed, and accounted for the fact that what she did take failed to nourish her. The opinion of so distinguished a physiologist and surgeon as Mr. Lawrence, that he could see nothing leading to the conclusion, or even the suspicion, that she had met with ill-usage before death, will surely justify my statement to the Commissioners, that as far as my knowledge and observation went she was treated with the utmost kindness. It is of course impossible for me to answer for the behaviour of attendants when I am not present; but although I had not the slightest confidence in one of those who had charge of H. H., and did not consider that she had sufficient intelligence to discharge the duties of a nurse properly, all which I had repeatedly represented, I had no reason to suspect that she had treated this patient cruelly or harshly; and I am bound to say, that the appearances of the body after death did not justify any such suspicion.

This is the sort of case which is peculiarly distressing and anxious, not only on account of its hopelessness, but of the great difficulty of guarding against accident and injury. The extreme perversity, obstinacy and restlessness, with the occasional manifestation of a degree of strength out of all proportion to the real power, with more or less of the helplessness depending upon general paralysis, and now and then the sudden loss of all power to support the body, expose those who have the care of such cases to charges of neglect, if not of cruelty. Such a patient, unless subjected to mechanical restraint, could only be properly taken care of by having the exclusive services of an attendant; for, in reality, the condition is that of a child, whose natural helplessness is increased by a disease which obscures and perverts every intellectual manifestation, besides producing the most irrational perversity of action. I do not hesitate to say, that it was impossible for such a patient to have had all the attention which she required in a ward where there were four nurses to attend to nearly 50 recent cases of the worst kind, many of which would have required a nurse exclusively to themselves to do them justice. It may be said, that such cases are easily and properly managed in the county asylums, and that, so far from there being any more difficulty with them in Bethlehem, there ought to be, considering its ample resources, if anything, less. But, in the first place, it would not be fair to draw a comparison between

Observations of Dr. Wood.

tween institutions whose constitution and objects differ so widely. Cases which are of every-day occurrence in Bethlehem are rarely seen in the county asylums; in fact, the great majority of patients in all the county asylums have lived over the most dangerous and anxious period of their malady, and are, as a rule, chronic cases; whereas all the patients brought to Bethlehem are in the early, and therefore in the worst and most dangerous stage of their disease, and consequently present difficulties which rarely occur in cases of long standing. If a patient lives through the first year, or, in other words, through the acute stage of the malady, the probabilities are that he will live out the average duration of human life; this I have proved to be the case by statistical tables which have been published in my work on the "Plea of Insanity," &c.* It is only the incurable wards of Bethlehem, then, that can fairly be compared with the general wards of a county asylum, and in them such a case as that of H. H. never occurred during the whole time I was there. To show that the difference between the curable and incurable wards is real, I may mention, that in apportioning the duty amongst the attendants, whose number was limited on the male side of the house, I placed five in the basement, leaving only one in the incurable ward, with just as much assistance as the night watchman was able to render him during the day, the number of patients in these two wards being very nearly the same. The case of H., a male patient who was made the subject of complaint to the Commissioners, was of the same character as that of H. H., and presented the same difficulties in many respects. I appointed one of the probationary attendants specially to look after him, but he neglected him and allowed him to fall about; and this is the very man who, not being recommended for appointment in consequence of his general neglect of duty, and of this case in particular, went to the Commissioners to complain that this patient had been cruelly treated; but I shall refer to this again.

The statement of Elinor W. does not appear to contain any charge of ill-treatment towards herself, beyond that of a nurse having once struck her over the knuckles because she climbed up the window. Her principal complaint appears to be against the nurse Ellen; and I am not much surprised at this, for I had a very indifferent opinion of this nurse, and several times expressed my belief that she was totally unfit

* Remarks on the Plea of Insanity, &c., by *William Wood*, M. D., Longman & Co., 1852, 2d Edition.

unfit for her situation. The reason given for retaining her was the great difficulty of getting any nurses to undertake the duty in that part of the hospital. I had no power in the matter, and could only express my opinion. The description given by this witness of the manner in which two female patients were fed, is not only improbable, but the account of it contradictory. She first speaks of having seen "the nurses kneel upon her" several times; then that "the nurses put their knee on each arm, and they stood like over her;" and in answer to the question, "How was she fed for dinner?" she says, "From a plate, in the same way; if she did not take it sitting up, they would lay her down, and feed her in the same way." It would be supposed from these answers, that the nurses generally, or at any rate more than one of them, were concerned in this mode of administering food; but when the witness is asked, after saying that Ellen was the only nurse who did it, "Did you never see another nurse present when Ellen did this?" she answers, "No; I never saw one present;" and yet throughout she speaks of them in the plural number. It is upon the statement of this witness that the alleged mopping of dirty patients rests; and again it is Ellen alone who is accused of using a mop for this purpose, although it is stated that another nurse held the patient while the mop was used.

Observations of Dr. Wood.

It would scarcely be considered a part of any man's duty to assist at the washing of female patients; nor if, in the course of my visits to the wards, I had come to a room in which I knew that females were washing themselves, or being washed, would it be thought delicate or decent for me to intrude myself on their privacy. If I had so far forgotten what was due to the modesty of females of any class, I should have felt that I had acted with very great indiscretion, and merited severe censure; and yet there was no other way in which I could obtain information as to the manner of conducting the process of washing. It was not probable that the nurses, if they so grossly committed themselves, would volunteer evidence of their own unfitness for their duty: and if the patients themselves made no complaint, it would be impossible for any medical officer to know what was going on in this respect: surely it is a matter for a female to see to; no man could properly be held responsible for it.

In estimating the value of the evidence given by this witness, the disposition she manifested must not be alto-

Observations of Dr. Wood.

gether overlooked; the inconsistency of some of her statements, and the foul expressions which she repeated before the Commissioners, are not without their significance; and the report of her own friends of the style of her conversation before her admission, that "she makes use of very foul language," is a tolerably correct index to the natural tone of her mind; whilst the disposition to be spiteful, without any sort of provocation, which is recorded in the minutes of her case, may be taken as some indication of the temper in which she detailed to the Commissioners charges against various individuals connected with Bethlehem Hospital. The following extract from the case-book will show the general character of her symptoms while in the hospital: "When first admitted she was very much depressed and restless, but still tolerably orderly; two days after her admission, however, she became excited, talked about people coming to kill her, and was spiteful towards those about her, every now and then striking a patient who had given her no sort of provocation, and occasionally jumping up suddenly, and rushing at the door to get out.—*April.* She has become so violent and mischievous, that she is removed to the basement, and now tears her clothes, and is altogether very troublesome, pays no attention to personal cleanliness, but is dirty, and noisy at night." The subsequent reports only speak of her gradual improvement. The statements of Mrs. Elizabeth W. are not borne out by her daughter, nor does it appear that any impression was left on the mind of the latter, that she was cruelly treated while in Bethlehem Hospital; on the contrary, in answer to the following question from the Commissioners, "Were you not comfortable there when you first went?" she said, "Yes, pretty comfortable." The account given by the mother of her daughter's finger, which she said was not discoloured, although she supposed it had been injured by one of the nurses, seems to corroborate the impression I had of it; viz., that she had a whitlow. An injury from a blow would, in all probability, have left some discoloration. It appears from her own statement, that Mrs. E. W. was made acquainted with the manner in which her daughter was put to bed, but made no complaint of it to anybody; she certainly never did to me, and there was no reason why she should not have done so, for, according to her own showing, when she did point out anything to me, I immediately inquired into it. When the mother saw the patient, she cried bitterly, and said, "I cannot help it; I cry all night;" and this

Observations of Dr. Wood.

this is made to appear as if it were caused by her cruel treatment. This tendency was in reality, however, one of the features of her malady, as will be seen by the following entry in the book, made soon after admission: "Very wild, excited, noisy, and violent; her conversation is generally incoherent, and she is very mischievous, not only destroying her own clothes, and those of the other patients, but breaking and tearing anything that comes in her way. *She is subject to paroxysms of an hysterical nature, and is now and then depressed for a few minutes, and cries out without any obvious reason.* This, however, never lasts long, and almost always occurs when anybody goes into the room, especially if they speak to or take any notice of her; at other times she is generally more elated than otherwise, but is occasionally tolerably quiet, and can then, when in the mood, give a rational answer to a question. She is, however, very uncertain, and her condition is continually varying. She pays no regard to personal cleanliness, and is extremely filthy. Her appetite is voracious, but still she does not appear to be in strong health, and has a frequent tendency to diarrhœa." She continued for a long time very wild and mischievous, but gradually became more composed; still, however, wild and flighty; all this at length passed off, and she became quiet, orderly, and rational; but although she remained in the hospital some time after, she never complained to me of any ill-treatment. Her mother says that when she was admitted her health was delicate, but that when she left "she was much better," and "more like herself," besides being "recovered from her mental disease, and as sensible as ever she was."

In answer to the statements about the patient H., I must refer for some of the facts to the Declaration, No. 5, which is appended, made by the senior attendant of the gallery in which he was placed.

This patient was admitted while I was at Buxton on account of my health, and was the subject of general paralysis in a modified form; his condition was undoubtedly very deplorable indeed; it was just the sort of case which, with a little perversion of facts, might be made use of to bring discredit upon any one having the charge of him. Some of the statements alleged by the brother to have been made to him by the patient it is impossible to disprove; but the brother says he was removed because they were dissatisfied with the treatment. The truth is that the removal was determined upon, as I was informed by the brother of the

Observations of Dr. Wood.

patient, on account of the wish of his mother that he should die at home, and had no reference whatever to any treatment; indeed my distinct impression is, that this question was discussed before he saw the patient, for I have a clear recollection that I then told him myself of the accident that had occurred by which his face was bruised. After he saw him, and knew exactly what was his condition, he expressed himself perfectly satisfied that the accident was unavoidable, and that all that could have been done had been done; nor from his manner and conversation could I gather that there was on his part any feeling whatever of dissatisfaction, or suspicion of improper treatment; this feeling most assuredly arose from representations made to him subsequently. The tone and manner assumed by the younger brother, who came to me for a certificate some days after the removal of the patient, was the first intimation I had of anybody being dissatisfied, and even then I heard not a word about the stocking. I could only repeat to him what I had before told his brother, and certainly his manner would have precluded me from entrusting him with any kind of commission. From all I saw of the patient, and of his state of mind, I am sure that at best he could only have given a very confused and rambling account of anything that had happened; and this I think will be made apparent from some of the statements attributed to him, which are evidently incorrect. One of the complaints that he is alleged to have made was that he had not sufficient food; "that they locked him up, and did not give him sufficient food to eat;" again, that "he would have eaten if he could have got it." The fact is, that from the first he refused his food, and at last so determinedly that it became necessary to employ the stomach-pump daily for several days. For four days from 28th October he was fed with the stomach-pump twice a day, but the excitement occasioned by his determined resistance, and the consequent exhaustion thereby induced, was so great that I feared to continue it so frequently, and for the next three days it was employed only once a day. On 4th November he took the whole of the breakfast that was offered to him, consisting of two eggs, some bread and butter, and about a pint of tea; at dinner-time he took all the dinner that was given to him, but did not help himself to any; and on the day he left the hospital, viz. November 5th, took the same breakfast as yesterday. There was not therefore at this time any difficulty in swallowing. In going round with the pupils of the hospital, I had repeatedly called their special attention

Observations of Dr. Wood.

attention to this case as one of the most difficult to manage of any that came under notice; and I referred to it as a good illustration of the class in which the propriety of employing the stomach-pump becomes a grave question, requiring serious consideration; the danger, on the one hand, being that of hastening the patient's end by means of the exhaustion consequent upon his violent efforts to oppose, and on the other, of his absolutely sinking from starvation. The delusion stated by his friends to have existed when he was admitted, was that some attempt had been made to injure him; in fact, "that the doctor who had attended him had given him a pill which drove him mad." The same kind of impression, no doubt, continued throughout, though he never spoke of it; nor indeed was he ever heard to speak a rational word while in the hospital; my impression is that I never heard the sound of his voice, all my endeavours to make him speak to me being unsuccessful. It was asserted that he refused his food, because his throat had been squeezed, and he could not swallow. The attendant who had charge of this patient when he was first admitted, told me that he remembers frequently to have observed him with his hands to his throat, and at that time he refused his food; but then he had never been with the attendant, who is stated to have squeezed his throat with a stocking. The disposition to the same habit is spoken of by the witness who makes the charge about the stocking (*vide* Question 3101), as follows: "On one occasion I caught hold of his coat to fetch him in or out of the yard, and he put his hand up to his throat;" and again, (Q. 3169 and 3170,) "You stated that he had a habit of putting his hands against his neck?" A. "Yes."—Q. "And might he not have made the mark with his hands?" A. "When he first came he had his hands up against his head." It is evident, then, that he had this habit when admitted, and this was very probably connected with some idea or sensation which he never expressed, but which he afterwards attributed to being squeezed, in the same manner that he accused the doctor of giving him a pill to drive him mad; besides it is quite possible that this explanation was suggested to him, if not directly by the attendant who complained of the stocking being used, at least indirectly, through the representations which this man made to the brother; and if H. could speak at all, he would be very likely to assent to the truth of any statement the object of which was to show that he had been ill-used. The following extract from the evidence given by a friend of the

Observations of Dr. Wood.

patient shows that the idea of the throat being discoloured was suggested to him by the questions:

"Did you see his throat at the time?—I saw it.

"What appearance did it present?—*There was nothing external.*

"Did the throat look somewhat different?—*It was dis-*
"*coloured.*

"Did he say how it occurred?—He said they twisted his throat; but of course it was incoherent, a part of it."

The attendant Thomas, who is the person accused of nearly strangling this patient with a stocking, and whom the patient is represented to have described as the man that used to squeeze his neck, and as being "rather a tall man with very dark whiskers, and a yellow tooth in front," is in fact a small short man, with very little whisker, and that not dark. Indeed, the description does not in any respect answer to the person of Thomas, but it does to that of an attendant in another gallery, whom the brother of the patient may probably have seen, and sketched in filling up his narrative. This discrepancy is calculated to raise the suspicion that the whole story has been made up with very little, if indeed any, foundation at all; and this suspicion is strengthened by what I have since heard, that the attendant who accused Thomas had an old quarrel with him before he came to the hospital, which he spoke of as soon as he found Thomas there; and the angry feeling was such that I cannot believe he would have waited so long to make a report against him if any real ground of complaint had actually existed. The manner of washing this patient has evidently been misunderstood; the patient is represented to have said, that "they poured water over him for ten minutes or a quarter of an hour;" but his brother says, "they put him under the water." There is no reason to doubt that he was taken to the bath-room and put in the bath, which the man who makes the complaint of his treatment states was the practice in the cases of such patients; and he makes no charge of this particular patient having been washed improperly, though he asserts that the shower bath was invariably used for the dirty patients generally, instead of the ordinary washing bath. There is no reason whatever why this should have been, because it was just as much trouble to turn on the water in the one case as in the other, and certainly much more trouble to put an obstinate patient in the shower bath than in the open washing bath. It is necessary here to state, that the witness who made these charges as to the treatment of the patient H.

was

Observations of Dr. Wood.

was engaged on two months' trial just before I left the hospital on account of illness. When I returned, I received a very indifferent account of him; I told him so, and at the same time said, that I was unwilling to condemn him on the representations of others, but that I should now judge for myself; that I should prolong his period of probation to give him an opportunity of redeeming the past; but that I should watch him very closely, and if not perfectly satisfied with his proceedings should not recommend him for appointment. I was by no means satisfied with him, and at last told him that I did not feel justified in recommending him: he then began to consider how best to revenge himself, and talked openly of his intention. The idea of going to the Commissioners seems to have been suggested to him by one of those unfortunate lads who by his course of life had qualified himself for reception into the House of Occupations, a school of reform, and in fact a receptacle for juvenile offenders; he, in common with others of the same class, had been employed about the hospital in various subordinate capacities, not only without my concurrence, but to my extreme annoyance; and from his own statement it appears that the reasons I had given for his not being employed there, were repeated to him, as similar communications supposed at the time to be made in confidence were repeated to other subordinates in the hospital. With such a system in constant operation, and such unscrupulous instruments always willing to be employed, it is not surprising that out of the mass of difficult, dangerous, and anxious cases constantly occurring in an institution where defects undoubtedly existed, tales of horror and atrocity were readily fabricated; and to show how unscrupulous was this reformed(!) offender in the statements he made on oath to the Commissioners, it will be sufficient to refer to the charge he brought against me of having mixed him up a lotion, and put a label upon it which was intended for a draught prepared at the same time. A mistake of this kind was made by a gentleman who had been doing my duty in my absence, and the witness knew perfectly well that it was not I who made the mistake; for this gentleman on more than one occasion subsequently spoke to him on the subject, and expressed his regret for having made it.* Notwithstanding

* A copy of a letter from the gentleman who made the mistake is appended, page 427. As he is in practice I have not thought it right to make the original letter, with his name, a part of this communication, but it is sent in confidence.

Observations of Dr. Wood.

withstanding this, he kept the bottle for more than a year, evidently with the intention of making some use of it the first opportunity, and, in fact, produced it to the Commissioners, and deliberately swore that it was I who made the mistake. I do not think it necessary to offer any detailed answer to the rest of the evidence of this individual, who, perhaps, after all, is rather an object of pity than anger, considering the unfortunate circumstances under which he was reared, the kind of training that he had received, and the notions of morality which he had imbibed from those by whom he was guided, and with whom he was associated. Before leaving the Commissioners this witness introduced his friend, David Kidd, to their notice, and said, "he knew he would like to come;" he did come accordingly, and the consequence was just such a display as might have been expected from such a man. I would treat lightly the failings of any old servant, and make every allowance for the imbecility of a garrulous and weak-minded old man, even when this had in a great measure resulted from the habits in which he had indulged; but in this case, besides the obsequious manner which was absolutely painful to encounter, there was so much in his general conduct to occasion dissatisfaction, that I forbear to comment upon it. It will suffice to say that I have repeatedly represented his unfitness for his office, and particularly on the occasion to which he himself refers, when he grossly ill-treated a patient, and I reported him to the treasurer. Complaints have been made to me more than once of his violent conduct, which I have had every reason to believe well founded, and accordingly reported them; but besides this, he neglected his duties in many respects, a considerable part of his time being spent away from his patients, gossiping about the hospital, upon one plausible excuse or another; for, to use his own words, "in passing backwards and forwards through the different wards one gets a little knowledge;" a phrase peculiarly characteristic of an imbecile gossip, and illustrating more forcibly than anything I can say the habits of the individual. But according to his own showing, it was not only in the wards that he got "a little knowledge," for a friend of his not engaged in the wards is represented to have told him that I did not wish to have a patient examined who had died suddenly. This, like other of his statements, is without foundation; this was a duty that did not devolve upon me, and was performed as a matter of course. I had no power to prevent such an examination if I had wished to do so, which I did not; but I did not take the

Observations of Dr. Wood.

the same view as others did of the necessity for an inquest, and this, no doubt, is what was told him, but his mind and memory were not sufficiently clear to enable him to repeat correctly what he had heard. I should mention that I took the opinion of the registrar as to the necessity of an inquest in this case, and was guided entirely by his opinion that it was not necessary. It would be unfair to Sir A. Morison to allow him to remain under the imputation which this witness has cast upon him, of commenting to such a person upon the manner in which I performed my duties, instead of calling my attention himself to anything that had been accidentally omitted. It is hardly necessary to say that Sir A. Morison disclaims altogether such an ungenerous and unworthy act. The declarations of the attendants which are appended include one from the senior attendant of the department to which this witness belongs, and who is, in fact, the oldest officer of the hospital, and is universally respected: these will furnish the best answer I can give to the general statements of this gossiping witness.

I have not thought it necessary to comment upon the evidence of the fourth male witness, and leave his statements to be taken for just what they are worth. I will only remark that this individual was engaged on the usual two months' probationary trial, but was discharged at the expiration of three weeks for ill-using a patient. There are many instances in which these four witnesses who had been employed at Bethlehem contradict one another and themselves, but the whole tone of their evidence betrays the animus with which it was given, and I therefore pass it over without further notice.

In the foregoing observations I have felt that it was a duty I owed to myself to explain the anomalous position which I occupied at Bethlehem Hospital, to show how limited was my authority, and how impossible the duties which devolved upon me; and although there were many things I could have wished to have seen different, I cannot but concur in the sentiments of an able American writer, "That all our hospitals are liable to an indefinite amount of real abuse on the part of those who, in one capacity or another, are employed in the care of the patients. When we consider the moral and intellectual calibre of the class of persons whom we employ as attendants, in connexion with the traits of character which we require in them, it is not surprising that improper practices should sometimes occur. They must manifest patience under the most trying emergencies, control

Observations of Dr. Wood.

trol of temper under the strongest provocations, and a steady perseverance in the performance of duty, disagreeable and repulsive as it oftentimes is. They must be kind and considerate, ever ready to sacrifice their own comfort to the welfare of their charge, cleanly in all their ways, and unsaving of any pains necessary to render their charge so also. In all respects their deportment and demeanour must be precisely such as refined and cultivated persons have indicated as most appropriate to the management of the insane. In short, they are expected to possess a combination of virtues which in the ordinary walks of life would render their possessor one of the shining ornaments of the race. They have been prepared for this delicate and responsible duty by no special course of self-discipline, and we know well enough are seldom distinguished by the beauty or abundance of their moral endowments. They are, in fact, plain, every-day men and women, with the common infirmities of the race, losing their temper under extraordinary irritations, and sometimes guilty of downright abuse of their trust. This is the truth; and there would be as little wisdom in denying it as in expecting that persons on becoming attendants upon the insane are transformed by some mysterious process from ordinary men and women into angels. Relinquishing all idea of obtaining perfection out of imperfection, it is incumbent on us to circumscribe the abuses of attendants within the narrowest limits; and this can only be done by a suitable organization of the service. Without thorough organization, and the strictest discipline under it, I am well assured that no amount of vigilance will quite secure the object in view. The truth is, and it could not possibly be otherwise, that, to a very great extent, the attendant does what seemeth good to himself, and if any of it happens to be wrong, his chief may find it out, if he can, in spite of the dust he can easily throw in his eyes."

If these observations are true as regards asylums generally, they are peculiarly so in reference to Bethlehem Hospital, where there are, probably, more recent cases admitted than in any other institution in the world, and therefore a greater amount of labour and anxiety devolving upon those who have the responsibility and care of the patients; and it must not be forgotten that although the duty required of the attendants necessarily involves a greater trial of temper than any persons are, under ordinary circumstances, exposed to, the rules of the hospital do not permit of any inducement being offered to those who undertake the office beyond the common

Observations of Dr. Wood.

common wages of ordinary servants; and the consequence has been, it repeatedly happened that candidates, in every way eligible, declined on account of the insufficient remuneration offered. I have been told by men who have applied to me for appointments that they could get more in ordinary service, where they had no anxiety or unpleasant duty; and to show how difficult it was to obtain a superior class of attendants for the pay that was allowed, I may mention that the last attendant who was appointed before that duty came into my hands was a bricklayer's labourer. For a long time I withheld my consent to his appointment, but I was assured that he was the best man who could be found to undertake the duty, and from necessity I was obliged to yield my objection. As the writer already quoted says, "Shocking abuses are not practised before spectators, but at times and occasions when no eye can see nor tongue proclaim the fact." How necessary, then, that there should be a person constantly amongst the attendants to ensure vigilance and prevent violence or harshness. Other duties make it impossible for any medical officer to do this; it must be somebody between the superintendent and the attendants, who lives amongst the latter, but has authority over them. The discipline of a regiment could not be maintained without the services of subordinate officers; neither could a large number of servants, whether in a private establishment or in a public institution, be properly controlled without the intervention of some authority between them and the master or superintendent; and yet such has been the position of affairs at Bethlehem. With very imperfect organization, divided authority, and little co-operation, but with the demon of discord constantly brooding over the place, it is not surprising that Bethlehem Hospital has failed to realise the expectations of those who felt that, with the sanction of Royalty, possessed of ample revenues, and commanding the services of the most eminent men of the day, it ought to have become a model institution.

Wm. Wood, M.D.,
Licentiate of the Royal College of Physicians,
formerly Medical Officer of Bethlehem Hospital.

My dear Sir, 29 November 1852.

I AM very sorry that your name should have been brought in question at all concerning Marson's business. It only more clearly shows the animus that has been exhibited towards

Observations of Dr. Wood.

towards you. It was I that made the mistake. I know that you were not even in the hospital at the time. I need not tell you how harassing were the duties at Bethlehem. To have the medical charge of nearly 700 people, to dispense for the sick, and keep all the books, were more than I could do without the possibility of occasionally making a mistake. Marson knows well that I made the mistake, for I have often expressed my regret for the same.

I remain, &c.

Dr. Wood. (signed) ——— ———, M. B. Lond.

APPENDIX.

The accompanying Declarations by the attendants in Bethlehem Hospital are appended to meet the general charges of the four individuals referred to in the foregoing Observations. As soon as I was made aware of them, I applied to the Commissioners and requested that they would extend their examination to some of the more respectable servants of the hospital; but as they had made their Report, and the matter was no longer in their hands, they did not think it right to re-open the inquiry. Those who volunteered evidence were accordingly examined by my legal adviser, and their statements reduced to writing in the form of Declarations. I was not present when any of them were examined, but left them to tell their own story in their own way.

Declaration of Mr. *Thomas Hooper*.

Declaration of T. Hooper.

I, *Thomas Hooper*, of Bethlehem Hospital, in the county of Surrey, do solemnly and sincerely declare that I have been 37 years at Bethlehem Hospital aforesaid, and have been an attendant in the criminal wing of the said hospital ever since the year 1817, having been previously at the Lodge 14 months, and nearly five months on the basement floor. I have thus been in those parts of the hospital requiring most attention, and have never been an attendant in the convalescent gallery; and I say that there has been considerable difference in the treatment of the patients in the said hospital since Dr. Wood's appointment as resident medical officer there, as compared with what it was previously; that a slight improvement had been made prior to Dr. Wood's coming to the hospital, but since his appointment a very decided improvement has taken place; that all kinds of restraint have been done away with by Dr. Wood, and the treatment of the patients has been kinder, and with the highest degree of humanity. Indeed some of the keepers have remarked that Dr. Wood was almost too kind and humane, and too patient in listening to the complaints of patients; he would not allow a patient on any account to be struck or ill-used by an attendant, not even in self-defence; and I verily believe that if Dr. Wood knew that the oldest attendant in the hospital struck a patient he would have had

him

Declaration of T. Hooper.

him discharged. And I say that, as far as my judgment goes, Dr. Wood's medical treatment is not bad or negligent, but very good, attentive and kind, and it was never, to my knowledge, the complaint in the hospital that Dr. Wood neglected to give medicine to patients when ordered or necessary; on the contrary, I have always had medicine when I required it for patients. And I say that I never knew Dr. Wood omit to come round the wing for several days together, unless when he was ill or in the country, and when he has been in the country he has always left some one to officiate for him. And I say that Dr. Wood always came round the wing daily, and frequently twice a day; the first time was generally about nine or ten o'clock in the morning, or earlier, and the second time was with the physicians, besides occasional visits. And I say that when Dr. Wood has gone round in the morning he has made a point of going up stairs through the galleries; but in the after part of the day, although he would mostly go round, he would sometimes inquire if anything required attention, and if not he would occasionally not go all round. And I say that when Dr. Wood went round he was always very patient in listening to any complaints, or what the patients had to say, and was already to allow them wine, stout, fish, and other comforts, if required or deemed necessary. And I say that whenever Dr. Wood was called upon, as he would sometimes be, suddenly to attend a patient, he always came immediately if in the house; that I never knew him neglect to do so; that he has always paid the utmost attention to dying persons, and would send to their friends to come and sit up with them. And I say that before Dr. Wood's appointment, a patient named Shelley used to be fed with the stomach-pump, and with a strait-waistcoat on occasionally for three months together; but shortly after his appointment Dr. Wood soothed Shelley and induced him to take his food, and neither the stomach-pump nor the strait-waistcoat has since been used to him; indeed I have not seen a strait-waistcoat for a long time; and I have never seen a stocking used as a means of coercion or restraint to a patient. And I make this solemn declaration, conscientiously believing the same to be true, and by virtue of the provisions of an Act of Parliament made and passed in the 5th and 6th years of the reign of his late Majesty King William the Fourth, intituled, "An Act to repeal an Act of the present Session of Parliament, intituled, An Act for the more effectual Abolition of Oaths and Affirmations taken and made in various departments of the State, and to substitute Declarations in lieu thereof, and for the more entire suppression of voluntary and extra-judicial Oaths and Affidavits, and to make other provisions for the Abolition of unnecessary Oaths."

(signed) *Thomas Hooper.*

Declared and made by the said Thomas Hooper, at Southwark Police Court, in the county of Surrey, this 28th day of September 1852, before me,

G. A. à Beckett.

DECLARATION

Declaration of H. Baker.

Declaration of Mr. *Henry Baker.*

I, *Henry Baker*, of Church-street, Lambeth, in the county of Surrey, licensed victualler, do solemnly and sincerely declare that I was an attendant at Bethlehem Hospital for eight years or thereabouts prior to Christmas 1848, when I left, and that I was such attendant for several years both prior and subsequently to Dr. Wood's appointment as resident medical officer there, and that whilst there I was principal attendant in the criminal wing in the said hospital, having the charge of all the criminal patients, and that I had the master key of the criminal wing, so that no one could pass in without my knowledge, and thus I had the best means of knowing what occurred in that wing. And I say that I observed a great difference between the treatment of the patients before Dr. Wood came to the hospital and afterwards. After his appointment there was not so much restraint used as there had been previously; he did away nearly with all restraint, and under his management the treatment of the patients was altogether much kinder and more humane. And I say that Dr. Wood gave orders that no patient should be struck or ill-used, and when complaints were made to him by patients Dr. Wood used to inquire into the facts and reprimand the attendant or soothe the patient as he thought right; and if a patient were locked up in his room by an attendant, Dr. Wood would generally release him. And I say that I never knew Dr. Wood to omit coming round the wing for several days together unless he were ill or absent in the country, but on the contrary he always came round daily, and generally twice a day; and when I say that Dr. Wood came round the wing, I mean that he went all over it from bottom to top, and inquired into or observed the state of all the patients; and, if required, from any accident or change in a patient, he came at all times immediately on being sent for, and was always very kind and attentive to the patients; so much so that the attendants sometimes thought he was too kind and lenient for the good of the attendants, as the patients sometimes took advantage of his kindness on their behalf. And I say it was not the universal complaint through the house that Dr. Wood neglected to supply the medicine, as I never heard any such complaint, and never knew him to neglect to give medicine. And I say I never knew Dr. Wood to delay for hours coming to a patient when he was dying, but on the contrary, when I have gone to tell him of a patient being ill he has frequently returned with me to attend upon him; and if a patient were dangerously ill Dr. Wood would come to him nearly every two hours, and as late as 12 o'clock at night; and on one occasion Dr. Wood stopped with a patient, who afterwards recovered, nearly all the night. And I say that I never knew an instance of a man being got ready for the stomach-pump and Dr. Wood not to come to him for hours; and that I have never seen a stocking used in the said hospital as a means of coercing or restraining a patient. And I say that on one occasion Dr. Wood went about 10 or 11 o'clock at night to visit a patient in No. 2 gallery in the criminal wing, and found David Kidd, the attendant in that gallery, in bed, tipsy, instead of attending to his patients; and Dr. Wood gave me the keys of the gallery, which I kept till the morning, and Kidd has never liked Dr. Wood

Declaration of H. Baker.

Wood since. And I make this solemn declaration, conscientiously believing the same to be true, and by virtue of the provisions of an Act of Parliament made and passed in the 5th and 6th years of the reign of his late Majesty King William the 4th, intituled "An Act to repeal an Act of the present Session of Parliament, intituled, An Act for the more effectual Abolition of Oaths and Affirmations taken and made in various departments of the State, and to substitute Declarations in lieu thereof, and for the more entire suppression of voluntary and extra-judicial Oaths and Affidavits, and to make other provisions for the Abolition of unnecessary Oaths."

(signed) *Henry Baker.*

Declared and made by the said Henry Baker at Southwark Police Court, in the county of Surrey, this 28th day of September 1852, before me,
G. A. a'Beckett.

DECLARATION of Mr. *John Bampton.*

Declaration of J. Bampton.

I, *John Bampton*, principal warder in the House of Correction, Wandsworth Common, in the county of Middlesex, do solemnly and sincerely declare that I was senior attendant in No. 2 gallery, being the receiving gallery at Bethlehem Hospital for upwards of nine years prior to the month of June 1851, and that during the last six years of that time Dr. Wood was the resident medical officer at Bethlehem. And I say that Dr. Wood's treatment of patients, so far as it has come under my observation, has been most kind and humane in every respect; and that he was in the habit of going round the wards twice a day, that is, both morning and afternoon; and that I never knew him omit to go round the wards for three or four days together, unless he were ill or in the country; and that on going his rounds he was always very attentive to the inmates and patients, in listening to those who complained of being ill, and in conversing with others, and examining the books they were reading, and their mode of amusement, and was in all respects solicitous for their health and comfort, and attentive in supplying the patients with medicine when it appeared to be necessary. And ever since he has been at Bethlehem, Dr. Wood has endeavoured to make the place comfortable, both for the patients and the officers of the establishment. And I say that since Dr. Wood's appointment as resident medical officer at Bethlehem the treatment of patients has been milder and more humane than it was previously; and that he has on many occasions stated to the keepers that he would not have the patients struck or ill-used on any account, and would not even have them threatened with violence; and that if he found that any of the keepers struck or ill-used the patients, he would bring their conduct before the treasurer and have them dismissed. And I make this solemn declaration, conscientiously believing the same to be true, and by virtue of the provisions of an Act made and passed in the 5th and 6th years of the reign of his late Majesty King William the Fourth, intituled, "An Act to repeal an Act of the present Session of Parliament, intituled, An

Declaration of J. Bampton.

An Act for the more effectual Abolition of Oaths and Affirmations taken and made in various departments of the State, and to substitute Declarations in lieu thereof, and for the more entire suppression of voluntary and extra-judicial Oaths and Affidavits, and to make other provisions for the Abolition of unnecessary Oaths."

(signed) *John Bampton.*

Declared and made by the said John Bampton, at Wandsworth, in the county of Surrey, this 11th day of October 1852, before me,

Thomas Puckle,
Magistrate for Surrey.

DECLARATION of Mr. *Edmund Smeeth.*

Declaration of E. Smeeth.

I, *Edmund Smeeth*, of Bethlehem Hospital, in the county of Surrey, do solemnly and sincerely declare that I have been an attendant at Bethlehem Hospital aforesaid for nearly nine years last past; that I was first an attendant in No. 1, being the dirty or refractory gallery, for four years and upwards, and have been an attendant in No. 2, being the reception gallery, ever since; and that I have been senior attendant in the last-mentioned gallery for the last 15 months, or thereabouts. And I say that the treatment of patients in the said hospital has been been very much improved since Dr. Wood's appointment to be resident medical officer there, as compared with what it was previously; that the patients are more kindly treated than they were, and that all restraint has been done away with throughout the hospital, so far as I have had an opportunity of observing. And I say that Dr. Wood has not been indolent, or careless, or negligent of patients; but, on the contrary, has been very attentive and kind to them; and that I have never experienced any difficulty as to anything that was wanted for patients, either as to feeding them, or drawing off their water, or anything else that was required; that we had only to mention to Dr. Wood that a patient would not take his food, and if he could not induce him to do so, he would direct when the patient should be ready, and he would come at the time named, and attend to him, and he was as tender with a patient as a mother with a child: and that I have been present on several occasions when Dr. Wood has drawn off the water of James Chapman. And I say that I never knew Dr. Wood to omit coming round the wards for several days together; that he came round daily, and mostly several times every day, unless when he was ill or in the country; that his habit was to come round twice a day, besides occasional visits; and that if a patient were ill, Dr. Wood generally went to see him the last thing before going to bed, and I have known him to be in the ward at almost all hours of the day and night. And I say that I never had any difficulty in getting medicine when Dr. Wood was at the hospital, and I never knew him to refuse to supply it, and never knew any patient to be wanting medicine for two or three days without being able to get it. And I say that Dr. Wood was not dilatory in his attendance, and that I never knew an instance

of

Declaration of E. Smeeth.

of neglect on his part, and do not believe that a patient was ever kept in the restraint room waiting, for two hours and a half, or any such time, for Dr. Wood to come and feed him, unless it may have arisen from the fault of the attendant, in not letting Dr. Wood know. And I make this solemn declaration, conscientiously believing the same to be true, and by virtue of the provisions of an Act of Parliament made and passed in the 5th and 6th years of the reign of his late Majesty King William the Fourth, intituled, "An Act to repeal an Act of the present Session of Parliament, intituled, An Act for the more effectual Abolition of Oaths and Affirmations taken and made in various departments of the State, and to substitute Declarations in lieu thereof, and for the more entire suppression of voluntary and extra-judicial Oaths and Affidavits, and to make other provisions for the Abolition of unnecessary Oaths."

(signed) *Edmund Smeeth.*

Declared and made by the said Edmund Smeeth, at Southwark Police Court, in the county of Surrey, this 29th day of September 1852, before me,

G. A. à Beckett.

DECLARATION of Mr. *Henry Vinnicombe.*

Declaration of H. Vinnicombe.

I, *Henry Vinnicombe*, of Bethlehem Hospital, in the county of Surrey, do solemnly and sincerely declare that I am now, and have been for nearly five years last past, resident in Bethlehem Hospital, and have been all that time a keeper in the said hospital, and during upwards of 12 months last past I have been senior keeper in No. 1 gallery in the said hospital. And I say that, in my opinion and belief, I have had as great opportunities as any attendant in the said hospital of observing Dr. Wood's treatment of the patients therein; and that I have always noticed that Dr. Wood has been remarkably kind and humane to patients, and very attentive to them in every respect. And I say that I have never witnessed any change in any patient but I have informed Dr. Wood of it; and he has always paid every attention to the case immediately, and has, so far as I could judge, administered medicines when they appeared necessary, and that I never knew an instance of inattention on his part. And I say that the said Dr. Wood has often been in my ward as late as 10, 11, 12, and 1 o'clock at night; and if a patient were taken ill in the night, Dr. Wood has always, on being called, got up immediately, and attended to the case. And I say that I recollect Henry Hawes coming to the said hospital; and that when he came he was, as I believe, placed in No. 2 gallery, but was very bad, and refused his diet, and was also dirty in his habits, for which reason he was brought down into No. 1 gallery, of which I had the charge. And I say that the said Henry Hawes was very obstinate and stubborn, and

Declaration of H. Vinnicombe.

that it took two or three persons to manage him, and get his clothes on and off without hurting him. And I say that the said Henry Hawes seemed to resist whatever was wished, and that he refused his diet, and that Dr. Wood was obliged to feed him with the stomach-pump for a short time, till at last he became so reduced that it became necessary to remove him from the hospital, as there was no prospect of his recovering. And I say that on one occasion the attendant had gone into the said Henry Hawes' bedroom, to bring him into the ward to dress, and that there was at the time another patient in the ward, dressed, standing behind the door; and as the attendant was bringing the said Henry Hawes from the bedroom the patient who was behind the door slammed it to, and the door caught the said Henry Hawes on one side of his head, and knocked the other side of his head against the brickwork, which caused a discolouration or blackness on both sides against his eyes. And I say that on another occasion the said Henry Hawes was in the airing ground, when he took up a sort of flint stone with a keen edge to it, and, drawing it across his nose, caused the cut across his nose with it by his own hand. And I say that on another occasion, as Dr. Wood would not allow the said Henry Hawes to be left alone, there was an attendant put in charge of him, to do nothing else but look after him; but on one occasion the attendant who had charge of him went away and left him sitting on the coal-box, and the said Henry Hawes, whilst so left, fell, and cut his head, I believe, against the corner of a brick wall. And I say that the said Dr. Wood censured the attendant for his neglect. And I say that the said Henry Hawes was a patient that we took every pains with to induce him to eat, and to avoid the necessity of resorting to the stomach-pump. And I say I never saw a stocking used round the throat or neck of the said Henry Hawes, or of any other patient, as a means of coercion or otherwise, and never heard of such a thing; and that had I heard or suspected that such a practice was resorted to I should have considered it my duty to have inquired into the circumstance, and to have reported it to Dr. Wood; but I say that I had no reason to suspect anything of the sort. And I further say that I stripped the said Henry Hawes, just before he left the hospital, and examined his person, and excepting the bruises already mentioned on his temples, there was no bruise on any part of his body, and no mark on his throat; and I accompanied the patient to his home, when his mother and the brother who took him away from the hospital expressed their gratitude to me for the attention that had been paid to him at the hospital, and asked me to call and see how he went on; and no member of the family expressed the least dissatisfaction, but the contrary; and they were quite aware of the injuries he had sustained, and were satisfied that they were accidental. And I make this solemn declaration, conscientiously believing the same to be true, and by virtue of the provisions of an Act made and passed in the 5th and 6th years of the reign of his late Majesty King William the Fourth, intituled, "An Act to repeal an Act of the present Session of Parliament, intituled, An Act for the more effectual Abolition of Oaths and Affirmations taken and made in various departments of the State, and to substitute Declarations in lieu thereof, and for the more entire suppression of

of voluntary and extra-judicial Oaths and Affidavits, and to make other provisions for the Abolition of unnecessary Oaths." Declaration of H. Vinnicombe.

(signed) *Henry Vinnicombe.*

Declared and made by the said Henry Vinnicombe, at Southwark Police Court, in the county of Surrey, this 28th day of September 1852, before me,

G. A. à Beckett.

DECLARATION of Mr. *George Bailey.*

I, *George Bailey*, of Bethlehem Hospital, in the county of Surrey, do solemnly and sincerely declare that I have been an attendant upon patients in the said hospital for nearly five years last past; that I was an attendant in the No. 1 gallery, or basement ward, for about three years and a half, and I have since been and still am an attendant in No. 2 gallery. And I say that I was senior assistant in the said basement ward for about two years, and whilst such attendant, I had no difficulty in obtaining medicine for a patient, as Dr. Wood always paid immediate attention to my applications for medicines. I always found Dr. Wood very kind and humane to patients, and very attentive to them in all respects; he was also kind and attentive to the attendants, but he was very strict, and would never allow them to ill-use the patients. He has often told the attendants that if they struck, or in any way ill-used a patient, they should leave the hospital, and those were the instructions which I received from him when I first went to the hospital. And I say, that I had charge of the basement ward, in which James Chapman was placed at the time spoken of by William Marson, in his evidence before the Commissioners; and I say, that Dr. Wood never to my knowledge refused to draw off his water, and it is not true that he could not do it. If ever I told Dr. Wood that Chapman could not pass his water, he always attended to him, and I have frequently seen him draw his water off, and have known him to do so as late as ten o'clock at night. And I say that if a patient was to be fed with the stomach-pump, I generally used to assist; but I never knew an instance of a patient being kept fastened in a chair for an hour waiting for Dr. Wood to come and feed him. If the stomach-pump was to be used, Dr. Wood would direct at what time the patient should be got ready, and on our letting him know that everything was prepared, he would generally return with whoever went for him and feed the patient, unless, as sometimes may have happened, he was engaged in some other ward, in which case the attendants ought and were supposed to release the patient until Dr. Wood came, as Dr. Wood would be very much displeased if the patient were kept confined an unnecessary time. And I say that I was an attendant at the said hospital at the time that James Shaw was a patient there, and I have known Shaw, shortly after being fed with the stomach-pump, to come and ask for something to eat, and to eat it voraciously. And I say that Dr. Wood went round the galle- Declaration of G. Bailey.

Declaration of G. Bailey.

ries always once, and generally twice a day; and I never knew him to omit going round the ward, in which I was, for two or three days together, unless he were ill, or absent from the hospital. And I make this solemn declaration, conscientiously believing the same to to be true, and by virtue of the provisions of an Act made and passed in the 5th and 6th years of the reign of his late Majesty King William the Fourth, intituled, "An Act to repeal an Act of the present Session of Parliament, intituled, An Act for the more effectual Abolition of Oaths and Affirmations taken and made in various departments of the State, and to substitute Declarations in lieu thereof, and for the more entire suppression of voluntary and extra-judicial Oaths and Affidavits, and to make other provisions for the Abolition of unnecessary Oaths."

(signed) *George Bailey.*

Declared and made by the said George Bailey, at Police Court, Southwark, in the county of Surrey, this 9th day of November 1852, before me, a magistrate for the Metropolis, sitting at Southwark Police Court,

G. A. à Beckett.

DECLARATION of Mr. *Francis Dening*.

Declaration of F. Dening.

I, *Francis Dening*, of Bethlehem Hospital, in the county of Surrey, do solemnly and sincerely declare, that I have been an officer at Bethlehem Hospital aforesaid ever since the month of May 1850; that my first engagement was as an attendant in the back basement, which continued till March 1851, when I took the situation of night watchman, which I still hold. And I say that it is my duty to watch from eight o'clock at night till two o'clock in the morning, when I am relieved; and that I also assist in the galleries in the day-time. And I say that since I have been such watchman Dr. Wood has always been very attentive to the galleries at night; if ever a patient was ill, he made it a rule to go and see him late at night; I have known him go and see patients at all times during my watch, and as late as one or two o'clock in the morning. And I say that when I commence my duties at night I am told by the senior attendants which of the patients require particular attention, and I act accordingly, and if a patient appeared worse I used to inform Dr. Wood, and he would immediately go and see him; and he always made it a practice before going to bed to inquire of me the state of the galleries, and how the patients were going on; he was very particular in that respect, and in attending to those who seemed to require attention; and I have frequently met Dr Wood late at night, with a lamp in his hand, going into the galleries to see if anything was required. And I say that he was very particular in visiting any patient that was ill, and seeing that he had plenty of clothes on to make him warm and comfortable. Sometimes a patient would be out of bed, with his bedding scattered all over the room, when Dr. Wood would not allow me to leave him until

Declaration of F. Dening.

until I had made his bed up for him, and seen him comfortable. And I say that Dr. Wood's treatment of patients, so far as I have had an opportunity of observing it, was very kind and attentive; that he was always ready to listen and attend to their complaints, and would never allow any patient to be treated harshly, or even with the appearance of unkindness. And I make this solemn declaration, conscientiously believing the same to be true, and by virtue of the provisions of an Act made and passed in the 5th and 6th years of the reign of His late Majesty King William the Fourth, intituled, "An Act to repeal an Act of the present Session of Parliament, intituled, An Act for the more effectual Abolition of Oaths and Affirmations taken and made in various departments of the State, and to substitute Declarations in lieu thereof, and for the more entire suppression of voluntary and extra-judicial Oaths and Affidavits, and to make other provisions for the Abolition of unnecessary Oaths."

(signed) *Francis Dening.*

Declared and made by the said Francis Dening, at the Southwark Police Court, in the county of Surrey, this 20th day of October 1852, before me,

G. A. à Beckett.

RETURN:

BETHLEHEM HOSPITAL.

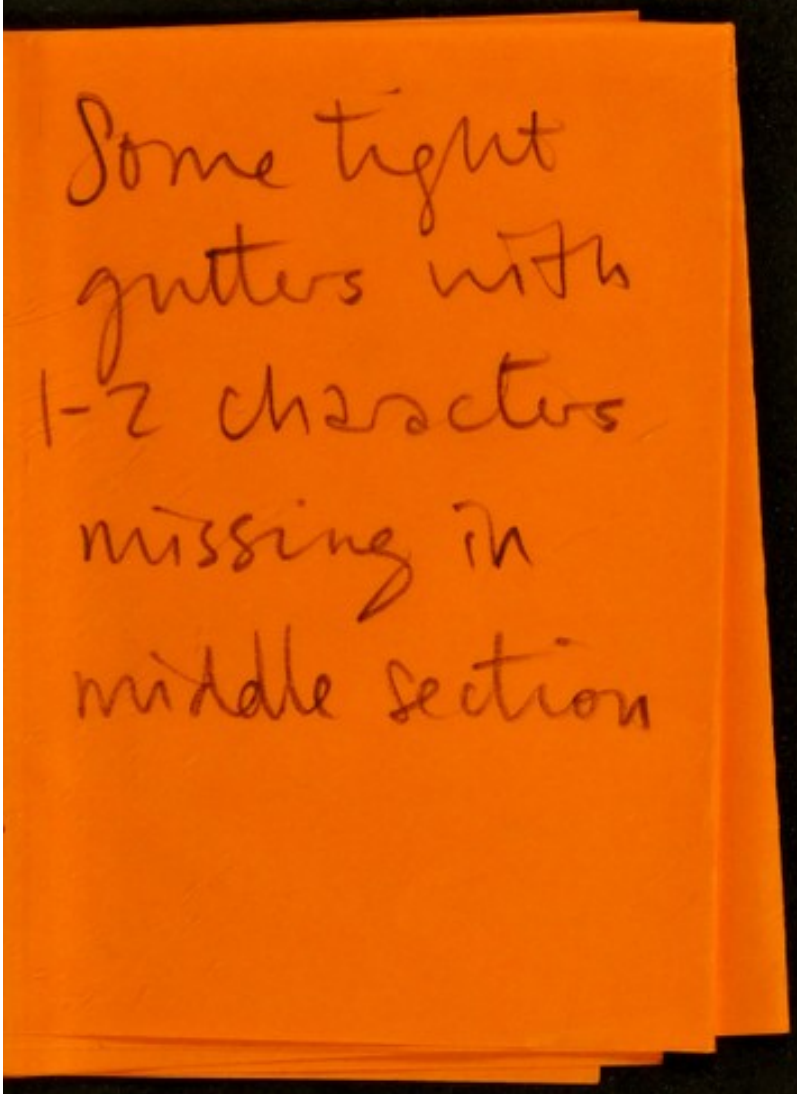
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