

Annual reports for the years 1949 and 1950 : Exminster Hospital, Digby Hospital, Wonford Hospital / Devon Mental Hospital Management Committee.

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Publication/Creation

[Exminster] : [Printed at the Hospital Printing Press], [1950?]

Persistent URL

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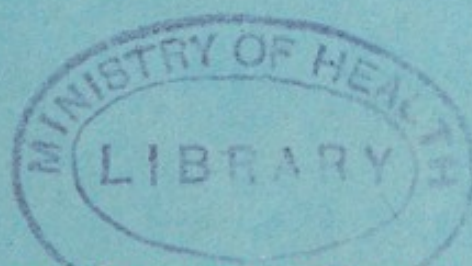
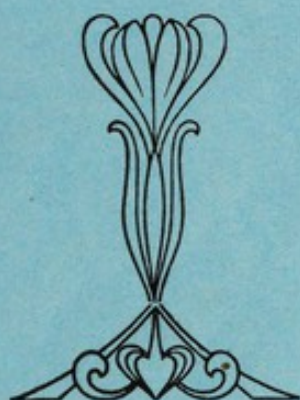
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DEVON MENTAL HOSPITAL
MANAGEMENT COMMITTEE

ANNUAL REPORTS

for the Years

1949 and 1950



EXMINSTER HOSPITAL
DIGBY HOSPITAL
WONFORD HOUSE HOSPITAL

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DEVON MENTAL HOSPITAL MANAGEMENT COMMITTEE

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DR. B. J. MULLIN, Wonford House Hospital, Exeter

MRS. J. M. PHILLIPS, Awliscombe House, Honiton

SIR ARTHUR C. REED, Cumbre, Exeter

DR. J. RUSSELL, The Hospital, Digby, Exeter

REVD. SUB-DEAN SHELMERDINE, The Rectory, Silverton

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Deputy Secretary : D. W. Miller, A.H.A., The Hospital, Digby, Exeter

Finance Officer : R. E. Wilman, A.C.A., F.H.A., 26, Queen Street,
Exeter

Deputy Finance Officer : C. H. Heath, A.I.M.T.A., A.H.A., 26, Queen
Street, Exeter

FOREWORD BY THE CHAIRMAN
of the
MANAGEMENT COMMITTEE

IT gives me great pleasure to write a short Foreword to the publication of the Annual Reports from the Medical Superintendents of the three Hospitals in this Group. The medical officers are becomingly modest concerning their share in the year's work, but the Management Committee will wish me to express our admiration of the efficiency and the humanity with which these Hospitals are administered.

The problems of administration are many and complex, but by dint of cheerful co-operation and sacrificial work these problems are faced, and when humanly possible, are overcome.

Our great anxiety at the moment is the problem of accommodation and the consequent danger of overcrowding. Many more senile patients than in former years are being admitted because there is no other hospital accommodation available.

A word of high praise is due to all members of the Staff—Medical Nursing and Administrative, for service ungrudgingly given, often under most difficult conditions.

The Reports of the Commissioners published herewith serve to confirm the Management Committee's own estimation of the very high standard of service which is traditional in these three Hospitals.

T. G. SHELMERDINE,

*Chairman of the Devon Mental
Hospital Management Committee.*

EXMINSTER HOSPITAL

Medical Staff

Medical Superintendent :

S. M. ALLAN, M.D., Ch.B. (Glas.) D.P.M. (Lond.)

Deputy Medical Superintendent :

J. W. FISHER, M.R.C.S. (Eng.) L.R.C.P. (Lond.), D.P.H., D.P.M.

T. J. K. BROWNLEES, M.R.C.S. (Eng.), L.R.C.P. (Lond.), D.P.M.

A. JACK, M.B., Ch.B. (Glas.)

J. R. ROCYN-JONES, L.M.S.S.A. (Lond.)

C. P. BURGESS, M.B., Ch.B. (Edin.)

G. STONEHILL, M.R.C.S. (Eng.) L.R.C.P. (Lond.)

Officers

Secretary : R. SEAL

Steward : W. CONNETT

Matron : MISS G. SYKES, S.R.N., R.M.P.A.

Chief Male Nurse : W. H. NEWNS, S.R.N., R.M.N.

Engineer : J. FAIRCLOUGH

Building Foreman : T. E. REDDAWAY

Farm Bailiff : J. BAKER

Pharmacist : B. C. T. SNOW, Ph.C., M.P.S.

Laboratory Technician : M. C. LANGLEY, A.I.M.L.T.

Church of England Chaplain : REV. W. PARRY, B.A.

Roman Catholic Priest : REV. P. J. TOBIN

Free Church Chaplain : REV. R. H. NORMAN

REPORT OF THE MEDICAL SUPERINTENDENT FOR THE YEARS 1949 AND 1950

EXMINSTER HOSPITAL,
NEAR EXETER

Mr. Chairman, Ladies and Gentlemen,

I have the honour to present the Medical Superintendent's Report for the years 1949 and 1950.

On the 1st January 1949, there were 1597 patients on the Register, 578 males and 1019 females.

The number of patients on the books on 1st January 1950, were 1588, 600 males and 988 females.

Classification of the above :—

	Male	Female	Total
1949			
Voluntary	86	116	202
Temporary	2	7	9
Certified	490	896	1386
	—	—	—
	578	1019	1597
1950			
Voluntary	99	136	235
Temporary	—	1	1
Certified	501	851	1352
	—	—	—
	600	988	1588

Admissions

Including statutory transfers, the admissions were as follows :—

	Male	Female	Total
1949			
Voluntary	123	125	248
Temporary	1	8	9
Certified	115	175	290
	—	—	—
	239	308	547
1950			
Voluntary	134	174	308
Temporary	6	16	22
Certified	94	174	268
	—	—	—
	234	364	598

Discharges

The number of patients discharged, transferred and died was as follows :—

1949	Male	Female	Total
Discharged	163	207	370
Transferred	5	50	55
Died	54	81	135
	<hr/>	<hr/>	<hr/>
	222	338	560

Classified thus :—

	Male	Female	Total
Voluntary	118	112	230
Temporary	—	8	8
Certified	50	137	187
	<hr/>	<hr/>	<hr/>
	168	257	425

1950	Male	Female	Total
Discharged	156	253	409
Transferred	2	7	9
Died	68	87	155
	<hr/>	<hr/>	<hr/>
	226	347	573

Classified thus :—

	Male	Female	Total
Voluntary	115	156	271
Temporary	—	4	4
Certified	43	100	143
	<hr/>	<hr/>	<hr/>
	158	260	418

Discharged Recovered

1949	Male	Female	Total
Voluntary	49	69	118
Temporary	—	4	4
Certified	33	76	109
	<hr/>	<hr/>	<hr/>
	82	149	231

The recovery rate therefore was 34.4% male, and 48.4% female, making a total of 42.3%.

1950	Male	Female	Total
Voluntary	61	107	168
Temporary	—	2	2
Certified	32	64	96
	<hr/>	<hr/>	<hr/>
	93	173	266

The recovery rate therefore was 39.7 % male, and 47.5 % female, making a total of 44.5 %.

Resident

1949

There were on the books at the end of the year a total of 1588 patients, as follows :—

	Male	Female	Total
Voluntary	99	136	235
Temporary	-	1	1
Certified	501	851	1352
	—	—	—
	600	988	1588

1950

There were on the books at the end of the year a total of 1618 patients, as follows :—

	Male	Female	Total
Voluntary	118	142	260
Temporary	3	7	10
Certified	493	855	1348
	—	—	—
	614	1004	1618

Note Re Residents

It is expected that in the near future, a small number of beds will be set aside for paying patients under Section 4.

Deaths

1949

There were 135 deaths (54 male and 81 female) ; this represents 8.55% of the average number in daily residence (9.09% male and 8.23% female).

1950

There were 155 deaths (68 male and 87 female) ; this represents 9.72% of the average number in daily residence (11.43% male and 8.71% female).

General Health

General health has been good, and there were no epidemics apart from the influenza epidemic at the end of 1950.

In these two years only 5 cases of dysentery occurred, which seems to confirm the efficacy of the treatment of all suspected carriers as reported in 1948.

Thirteen patients were notified as suffering from tuberculosis. This compares with 17 cases for the two years 1947 and 1948.

Treatment

Physical methods supplementing psychological treatment have been used throughout the period.

Electrical Convulsive Therapy has been of great value in the manic-depressive types and in the acute excitement of schizophrenia. In 1949, 145 male patients were so treated with 13 out-patients. In 1950 the figures were 172 and 9. The females treated in this way numbered 164 in 1949, and 171 in 1950.

An Insulin Therapy Unit was opened on the female side at the end of 1948. In the following year 37 were given this treatment, and 22 in 1950. This form of therapy is specially useful in early cases of schizophrenia and the results so far are encouraging. Of the total number of female patients treated in the two years, 35 were discharged as recovered.

A similar unit on the male side continued, and the numbers treated were 36 in 1949, and 30 in 1950. Of the total of 66, 43 were discharged—a very gratifying result when one considers the gravity of the disease.

A new form of treatment for chronic alcoholics was introduced in 1949. A drug called antabus is given each day and the patient encouraged to drink his favourite beverage. After an interval of time that varies in each case, the patient reaches a state when he refuses to drink at all. If the antabus is taken by the patient after discharge, it is quite certain that he will not be able to drink alcohol. The problem is to ensure that the treatment is continued, and this presents difficulties in many of these cases, as so often their habits in the past have alienated all their relatives and friends. Where home conditions are favourable and relatives can exercise control of the treatment, the results are very good. Eighteen male patients and 2 female patients have carried out the treatment, and in a number of cases they have been able to maintain themselves in employment after discharge.

Occupational Therapy is being carried on, and although we are hampered on the female side through the lack of trained personnel, the work is being slowly extended. On the male side the numbers engaged on all forms of employment reaches 50%. Special occupations include the making of baskets, rugs, coir mats, paper bags, envelopes, and wood working of all kinds. Picture mounting and framing was introduced in 1950, and hundreds of modern pictures now adorn the walls. The bookbinding department has done fine work and has been used as special therapy in selected cases.

In March 1950, the Mass-Radiography Unit visited the Hospital, and every patient who was not actually confined to bed was examined. Forty-seven members of the staff also volunteered for this examination.

In 1950, 6 of the staff were found not to react to tuberculin, and they were vaccinated with B.C.G.

Clinics

The Exeter Clinic now held at the Eye Infirmary, Magdalen Road, Exeter, has continued its usefulness.

In November 1950, a new clinic was opened in Bideford Hospital.

Entertainments

Entertainments include cinema, concerts, pantomime, plays, and many forms of indoor and outdoor recreation. In the summer bus trips and picnics help greatly to interest and benefit the patients.

Nursing Staff

Recruitment of female nursing staff is still difficult, and the strain on those working is very great. It was thought that the inauguration of the Preliminary Training School would bring increased numbers of students, but so far it has not done so. The Preliminary Training School was begun in 1950, and serves as the Central School for St. Lawrence's Hospital, Bodmin ; Royal Western Counties Institution, Starcross ; Digby Hospital ; Wonford House Hospital ; and our own Hospital. The teaching is excellent, and our tutoring staff have to be congratulated on their excellent results.

The male staff are nearly up to full strength. At present 3 male nurses are doing general training at the Royal Devon and Exeter Hospital. Each year, it is hoped to release nurses for such training.

Two female nurses and 20 male nurses were certificated during these two years. L. J. Harwood, A. C. Josey, and L. T. Preece gained distinction.

I wish to thank the whole nursing staff for their unselfish work in very trying circumstances.

Laboratory Report

			1949	1950
Bacteriological	...	...	885	1026
Biochemical	...	...	988	1095
Harmatological	...	...	1157	1177
Histological	...	...	10	11

Clerk of Works' Department

In the two years 6 wards have been completely redecorated, and much repair work done. The Recreation Hall, Centre House and Centre Kitchen have been decorated. A great deal of external painting has been completed. Stainless steel sinks have been fitted in both kitchens, and a complete re-arrangement of the equipment has been carried out. Much work has been done in fitting up the Preliminary Training School, and in converting Spurfield to a male hostel. New wood block floors have been laid in wards 2 and 25. Altogether the staff have done much fine work, and have made the Hospital much more pleasant to live in.

Engineer's Department

New underground armoured cables have been laid in many parts of the Hospital. Steam ovens and electric fish fryers have been installed in the kitchens. New steam mains have been laid to the higher female wards. Much rewiring has been carried out in the Recreation Hall and dressing rooms. New water mains have been constructed and connected up to the Exeter water supply, and a large water tank installed in the Centre House. A great deal of necessary repair work has had to be done, and the Hospital installations are now much more efficient. The staff have to be congratulated on their good work.

General

Mr. F. Alford, who was Clerk of Works' for 5 years, retired in 1949. He had given very good service to the Hospital in various capacities for 30 years. Miss Webber, Assistant Matron, retired after 25 years of excellent work.

Charge Nurse Blanchard and Charge Nurse Rockett also retired after many years in charge of wards. I wish to thank all of them, and hope they live long to benefit from their labours.

I wish to thank the Management Committee and the House Committee for their encouragement and eagerness to help, and for their support in every difficulty.

I also thank my medical colleagues, all the officers and staff generally, for their loyalty and help.

I have the honour to be,
Mr. Chairman, Ladies and Gentlemen,
Your obedient Servant,

S. M. ALLAN,

Medical Superintendent.

REPORTS OF THE COMMISSIONERS OF THE BOARD OF CONTROL

EXMINSTER HOSPITAL,
NEAR EXETER,
18th February, 1949

Since the end of the war this Hospital, in common with many others, has been going through a difficult period. It has been overcrowded, understaffed, and in serious arrears of structural and decorative repairs. During our visit, which began yesterday, we have noticed welcome signs that the position has begun to improve. The Hospital is certainly in a better state than it was a year ago.

In the first place, thanks to the increasing use of part-time nurses the female staff is more adequate although still below strength. Overcrowding of the female wards remains, but Digby's Hospital is once again dealing with its own female admissions and there is a prospect that the 58 Digby patients, all women, who have been housed here for so long will be returning to their own Hospital in the not too distant future. Even then the female wards will remain crowded because of the unsafe condition of the structure of a block of two female wards. An Admission Hospital and Convalescent Villas will be the solution of many of the Hospital's problems. Although the building of such units may be impossible for a long time, we understand the immediate acquisition of a house or houses within a radius of some miles of Exminster is being considered, and that such houses would be used as Convalescent Villas. Some relief to overcrowding at an early date would then occur. The Block which is unsafe may possibly be reconstructed and converted to use as the General Stores.

The Wards themselves, improved some time ago by the installation of fluorescent lighting, are now being systematically repainted and redecorated. The number already completed is perhaps small in proportion to the whole Hospital, but a valuable start has been made. Modernisation of the wards will have to wait except that here and there in sick dormitories, fixed wash basins with hot and cold water will be put in before redecoration begins. The supply of hot water to Ward Wash Rooms so much needed will, we hope, come fairly quickly. The most serious defect of the larger female wards—lack of sanitary accommodation—cannot be dealt with, we gather, until conditions are easier. We would, however, mention that one ward, Female 22 has only 4 water closets for 83 patients.

Much new furniture has been acquired or is on order. The new armchairs and small tables have improved the comfort of many dayrooms, and wooden chairs are beginning to replace the backless benches round the dinner tables.

At the present time, the question of the service and delivery of meals to the wards is under review. The scheme being considered envisages electrically heated food trolleys conveyed to the higher floors by lifts. A new electric cable is being laid to the kitchen, which will make possible the increased use of electricity in the Kitchen Department. Redecoration of the whole kitchen will follow. In the past year much new equipment has been acquired and a draw-plate oven is on order.

Dinner yesterday consisted of fried fish, peas and potatoes with a semolina pudding to follow.

In the Laundry two new washers—one for the Foul Wash House—have been installed, and in the latter Department a new wringer has also been put in.

During our tour of the wards we found the patients generally quiet and well behaved ; only one request for a Private interview was made. We have mentioned the state of disrepair many of the wards are still in, earlier in this entry, but apart from that the wards are comfortable and homely. Many had floral decorations and a number of periodicals were to be seen in the dayrooms. Now that daily papers are more plentiful, perhaps the numbers taken in some of the wards could be doubled. We were told, for instance, that Female 25 with 100 patients only received 2 newspapers each day.

The dress of patients in Mental Hospitals throughout the Country is below the standard we would like to see, for reasons which are obvious. Exminster is no exception and efforts should be made here to prevent the present standard from deteriorating. Not all patients of the active type have a change of footwear and this must deter some from going out of doors in wet weather. We gathered that stocks are sufficient to remedy this position and we hope appropriate action will be taken.

As this Hospital has in the past been so well known as a pioneer in occupation therapy, we welcome the resumption on the female side of this form of treatment. About 5 weeks ago an occupation therapy class was started in part of the disused block and to-day we saw some 30 women occupied in knitting, embroidery and raffia work. A trained occupation therapist is needed. On the male side handicrafts persisted right through the war and afterwards, and the occupation department is to-day in a flourishing condition and valuable work is being done.

The number of patients in residence to-day is 1614 ; 592 men and 1022 women. Of these patients 217 are voluntary and 8 are temporary in status.

Seventy-four patients (15 males and 59 females) here are patients under Section 4 of the National Health Act 1946.

During 1948 there were 471 direct admissions and of these 118 were voluntary and 23 were temporary patients. In the same period 332 patients left or were discharged and of these 200 were regarded as recoveries.

The Nursing Staff consists of 104 male and 45 female whole-time and 71 female part-time nurses. Ten male and 5 female full-time and 6 female part-time nurses are always on duty each night. Forty-four men and 33 women (7 part-time) are certificated or registered as mental nurses. In the female wards are 3 male orderlies and 1 woman ward maid. Dr. Allan has applied to the Ministry of Labour for 10 to 12 German women to act as ward maids, but so far there has been no result. The application was made in October or November last, and he is not sure if he can continue to hope that any will be sent.

In 1948 there were 132 deaths, 51 male and 81 female, giving a mortality rate of 8.3%. No inquests have been held since the last visit. During this period 23 fractures or other casualties have been recorded. Three of the fractures being associated with convulsive treatment. No intestinal infections were notified in 1948, and there are no cases at present. We were told that dysentery was endemic in this Hospital until 1947. It was decided at that time to treat all known and possible carriers with a course of sulphonamides every two months. Since then no new cases have occurred. We consider this to be a most interesting observation, and if, after a further period this apparent protective action can be taken as true, is one of great medical importance.

Notifications of deaths from tuberculosis in 1948 numbered 7 and 5, corresponding figures for 1947 were 10 and 11. At present there are 10 male and 7 female cases; of these 5 male and 1 female are regarded as active. These patients are segregated in the Sanatorium which also accommodates typhoid carriers and old dysentery cases. This Sanatorium is ideally situated, but it is in great need of renovation and redecoration. There is a proposal that all cases of tuberculosis from the Southern part of the Region should be admitted here, and for this reason the necessary work has been postponed until the building has been inspected by experts in the treatment of tuberculosis.

The Hospital should be congratulated in having been able to start a female insulin unit despite the shortage of nursing staff. When we visited, 5 men and 3 women were having this treatment. The sick wards, we found to be satisfactory, and here and throughout the Hospital we considered the nursing to be efficient and kindly.

Dr. Allan agrees with us in thinking that there is room here for the services of a Chiropodist.

The early engagement of a Social Worker is considered probable,

an appointment much needed not only for internal work but in connection with the development of Out-patient Clinics. At present the only Clinic is one held once a week at Exeter, but it appears likely that others will be started at suitable centres in the near future. This is a desirable step, but it is one which will take up a considerable amount of the medical officers time. We understand that the establishment of medical officers is to be increased in order to deal with the growing amount of work, but Dr. Allan told us that he has so far found it impossible to get further medical officers of suitable experience. We think that one important reason for this is the absence of accommodation for married men. We were told that the building of new houses for medical officers is included in the current estimates, and we should like to stress the importance of this provision.

We were glad to hear that Clinical Conferences are held twice a week. At these, all new cases are discussed soon after admission, as well as other cases of medical and psychiatric interest. An attempt is also being made to review cases about a year after admission.

Our visit has been an interesting one, and we congratulate Dr. Allan on the progress which has been made during 1948.

(Signed) I. COFFIN DUNCAN,
E. N. BUTLER,
Commissioners of the Board of Control.

18th January, 1950

We have to-day and yesterday paid the Annual visit of our Board to this Mental Hospital and in the course of our inspection of the Wards and Departments, we believe we have seen all the patients in residence and we have afforded all patients, who wished to do so, an opportunity of talking to us. There were no complaints of any kind and we are satisfied that all who are undergoing treatment here are given understanding care and skilled and kindly medical and nursing attention.

The structure of the Hospital is old and many parts are entirely obsolete. This fact is recognised and plans are under consideration for the rebuilding of some of the most out of date wards. Two of these wards, which are in a dangerous structural state, have been closed, as far as accommodating patients is concerned, for a considerable period. When reconstructed, the Stores will occupy the ground floor of the new building and over the stores new womens' wards will be built. Much delay is probable in beginning this first part of the rebuilding scheme and meantime the over-

crowding of the female wards is deplorable and has recently been made more acute by the transfer of the Private Patients from the Villa in the Village to the main wards of the Hospital. This change has been necessitated by the plan for using the Villa in question as the Preliminary Training School for Nurses.

Efforts have continued during the past year to redecorate and refurnish as many wards as possible. In some wards re-flooring has been necessary. In the refurnishing scheme dining-room chairs are gradually replacing backless benches and small tables are taking the place of those of the refractory type. Easy-chairs are appearing in the wards in large numbers. As the wards are being redecorated the old fashioned pictures are not being re-hung, but charming reproductions of modern paintings are replacing them. These are mounted and framed artistically in the male occupation therapy department. A special tribute is due to those responsible for providing the wards with flowers and potplants. Each ward has at least 3 daily newspapers and in some wards 5 are supplied. Patients are able to change their Library Books very freely at the Central Library and we observed a good number of books in each ward.

Generally speaking the patients' appearance is neat, but on the female side the standard of dress is not high and few women seemed to be wearing their own clothing. On the male side we were glad to note that the old fashioned Derby tweeds are disappearing and are being replaced by suits of more varied design as well as by grey flannel trousers and tweed coats. It is, of course, true that clothing of this kind is not suitable for every day use by patients who are working out, particularly on the land. We enquired into the method of cleaning the male suits, and Dr. Allan informed us that the method of washing them in the Laundry was at present being re-organised and better results were expected. The Laundry, incidentally, is badly in need of steam-presses.

Occupations on the male side are extremely well organised and the occupational therapy department continues to do excellent work. Difficulty is often experienced in getting sufficient workers on the land and in the utility departments. The picture is quite different on the female side and we were sorry to learn that efforts to obtain the services of an occupational therapist had failed. One was appointed but did not take up the position.

Patients entertainments are well organised and there is seldom a night when the Entertainment Hall is not in use. Cinema performances take place twice a week, dances and concerts are frequent. Next month, a Pantomime got up by the Staff, is to be given for the entertainment of the patients.

The kitchen is being re-organised. The necessary structural alterations will follow the installation of the modern equipment

which has been purchased or is on order. An electric fish fryer, a vegetable slicing machine and 2 hot-plates have been put in since the last visit. The installation of a lift to take insulated food trolleys to the upper floors has been decided upon, but no active steps have yet been taken. Until the lift and the trolleys are in being, the problem of securing that all the patients have their food served hot will not be solved. In the Ward Kitchens there are hardly any facilities for warming plates.

Dinner yesterday consisted of roast mutton, potatoes, cabbage and a milk pudding. It was a substantial meal. The breakfast always consists of porridge and some other dish in addition to bread and butter and tea. Those patients who sit up, and those in wards where there is a night staff, always have a supper meal. Tea is served between 5.45 p.m. and 6.0 p.m.

The patients in residence to-day number 1583 - 597 men and 986 women and there are in addition 5 patients out on trial giving a total on the Statutory Books of 1588. Fifty-four of the patients (13m, 41w) pay some part of the cost of maintenance.

During 1949 there were 547 direct admissions (239m, 308w), of these 248 were Voluntary and 9 were Temporary. Departures and discharges during the same period numbered 370, and 190 of these were regarded as recoveries.

A serious shortage of female nurses continues here as at so many other Hospitals. The Nursing Staff consists of 121 male and 42 female whole-time nurses, and also 69 female part-time nurses. Eleven male and 11 female nurses are always on duty each night. Forty-seven of the male and 36 of the female nurses (10 of them being part-time) are certificated or registered as mental nurses. Twenty men but only 1 woman, and 1 woman part-time nurse have passed the preliminary examination.

In 1949, 135 patients died (54 men and 81 women), giving a mortality rate of 8.6%. There were six deaths from tuberculosis and one was due to insulin shock treatment. Since the last visit 13 fractures have occurred ; 2 instances of scalding. In each of these a patient is recorded as having knocked over some coffee during a fit.

We found the infirmary wards to be satisfactory and well equipped, but the lack of a clinical room for the female one is a disadvantage. Recently a hand basin with running hot and cold water has been fitted in the male Admission Ward dormitory, and a water closet for night use and sluice are being provided.

The storage of poisonous drugs in the wards has been reorganised and some new poison cupboards are to be made shortly ; new forms for keeping clinical records have been brought into use. The system

appeared to us to be very good and those records which we examined were well and systematically kept.

Plans for the future of the Sanatorium were mentioned in the last entry, but it has not yet been possible to take any action. There are 21 men and 30 women there. Eleven men are suffering from tuberculosis and 8 of the women. Of these 4 male and 2 female cases are active. The County Tuberculosis Officer advises on the treatment here and the results obtained are in general, good. Two men and 8 women are regarded as possible sources of dysentery and there are 4 typhoid carriers. The experiment of treating all patients in the Hospital who are dysentery suspects with a monthly course of sulpha-guanidine is being continued. Since this was started in 1947, there has been only one case of active dysentery whereas previously epidemics were frequent

We visited the X-Ray Department, the Operating Theatre and the Pathological Laboratory and we were well satisfied with these Departments. The recognised forms of modern treatment are available in this Hospital and the standard of general medicine and psychiatry are satisfactory in our view.

The Dental Surgeon has recently resigned but we were told that the Hospital is not likely to be left for long without a dental service. We were glad to hear that since our last visit a Social Worker had been appointed.

Clinical meetings continue to be held regularly in the Hospital, and an Out-patient Clinic once a week in Exeter. We understand that a psychiatric Out-patient Service for Devon is to be developed with Clinics at Barnstaple or Bideford, and Okehampton and Axminster, and we hope that this step will be taken without undue delay.

Our thanks are due to Dr. Allan and his Medical and other staffs for their helpful assistance to us in the course of our enquiries. We would also like to record our pleasure at meeting the Deputy Chairman, Sir John Daw and other Members of the Hospital Management Committee.

(Signed) I. COFFIN DUNCAN,
E. N. BUTLER,

Commissioners of the Board of Control.

DIGBY HOSPITAL

Medical Staff

Medical Superintendent :

J. RUSSELL, M.B., Ch.B., D.P.M.

Deputy Medical Superintendent :

J. SCOTT, M.B., B.Ch., B.A.O. (N.U.I.), D.P.M., L.M., (Coombe)

Officers

Matron : Miss F. N. HENRY, S.R.N., R.M.N., R.M.P.A., M.R.C.N.

Chief Male Nurse : C. S. POYNTON, S.R.N., R.M.N.

Clerk, Steward and Deputy Secretary : D. W. MILLER, A.H.A.

Chief Engineer and Clerk of Works : D. V. CUMMINS

Church of England Chaplain : REV. G. E. DEANE

Free Church Chaplain : REV. E. C. HOPE

REPORT OF THE MEDICAL SUPERINTENDENT FOR THE PERIOD 5th JULY 1948, TO 31st DECEMBER, 1950

THE HOSPITAL, DIGBY,
EXETER

To The Devon Mental Hospital Management Committee.

Mr. Chairman, Ladies and Gentlemen,

This Report, which I think can rightly be termed a Progress Report on Digby Hospital, covers the period from the appointed day, 5th July 1948, to 31st December 1950.

It will be recalled that by July 1948, the male wing of the Hospital had reopened with very sketchy equipment, and no redecoration at all. There were no patients in the female wing, and no works had been carried out for the reception of patients there. Plans had been made but there seemed little possibility of carrying them out. I think it is greatly to the credit of the officers concerned, and the support of the Management Committee and the Regional Board, that within six months of the appointed day, the women's wards were dealing with all Exeter admissions, and within a year all 138 female Exeter patients at Exminster, Plymouth and Bodmin Hospitals had been returned. In these days, when all the Hospitals are burdened with difficulties consequent upon the war years and the changing times, it would be superfluous to list the physical difficulties which have been overcome at Digby to make possible the presentation of the following statistics relative to the reception and treatment of patients during the years 1949 and 1950.

Direct Admissions (Mental Treatment Acts, etc.)

	1949			1950		
	M.	F.	Total	M.	F.	Total
Certified	15	26	41	13	13	26
Voluntary	34	50	84	31	52	83
Temporary	—	—	—	2	—	2
	—	—	—	—	—	—
	49	76	125	46	65	111
Emergency						
Section 20	5	10	15	8	23	31

The percentage of Voluntary patients is 67% in 1949 and 75% in 1950. This is particularly gratifying. The Hospital's Out-patients' Clinic in Exeter is not reopened, and the Voluntary patients have, for the most part, presented themselves at the Hospital for examina-

tion and admission, and are not included in any Out-patient Return.

It should also be noted that female admissions are greatly in excess of males, and at December 1950, of the 348 patients resident, there were 181 women and 167 males. Additional accommodation for female patients will be required within the next two or three years, though some rearrangement of existing accommodation may afford a temporary respite from new building.

All forms of modern treatment are available, and the closer liaison with Exminster and Wonford House Hospitals, and with the Diagnostic and Consultative Departments of the Royal Devon and Exeter Hospital—now possible under the National Health Service—arrangements are greatly to the advantage of our patients.

Discharges

	Recovered					
	1949			1950		
	M.	F.	Total	M.	F.	Total
Certified	5	9	14	2	7	9
Voluntary	19	22	41	20	24	44
Temporary	1	1	2	2	—	2
	—	—	—	—	—	—
	25	32	67	24	31	55

	Relieved					
	M.	F.	Total	M.	F.	Total
Certified	2	1	3	1	3	4
Voluntary	11	7	18	13	12	25
	—	—	—	—	—	—
	13	8	21	14	15	29

	Not Improved					
	M.	F.	Total	M.	F.	Total
Certified	1	1	2	3	—	3
Voluntary	2	8	10	1	5	6
	—	—	—	—	—	—
	3	9	12	4	5	9

No comment is necessary on general health and deaths, 12 in 1949 and 20 in 1950 have been mainly in the older age groups.

Recreation, Occupation and Parole have been used to promote the social readjustment of patients and have proved a boon to many. More patients than formerly now attend concerts and other entertainments in the City. Criticism has been offered of the lack of a female occupation centre and instructor, but one has only to look round the women's wards to note the feminine touch in cushions, table-runners and carpets to observe the great contribution made by the female patients themselves in the reinstatement and furnishing of their wards. When the floor of the basement is relaid an occupation centre will be provided for all patients.

Nursing Staff

The male staff is almost up to establishment.

The Matron has recruited a very enthusiastic band of married women as part-time workers of whom nearly one-third have nursing qualifications, and with the provision of suitable transport the part-time scheme has worked very well ; in fact the night staff is wholly part-time. However, even the best scheme has its weaknesses and there have been recurring crises at week-ends and school holidays, when a greatly increased strain has been thrown on the Matron and the small regular staff of Sisters and Students. With the Hospital evacuated from 1942 to 1949 there was no recruitment to our staff, and this is reflected in the fact that we have no Staff Nurses, and there are vacancies for Deputy Sisters and Night Officers. While much has been done and is being done to make the nurses' quarters more attractive, the lack of a detached Nurses' Home is a great handicap in recruiting Students.

Mr. Samuel Pratt passed the Final Examination of the Royal Medico - Psychological Association, and the following Students passed the Preliminary Examination of the General Nursing Council : Student Nurses Rose Shute, Cyril Gibbons, Robert Leach, William Wilcocks, Tadeus Krajewski and Stanley Newcombe.

We have failed to find a suitable candidate for the post of Psychiatric Social Worker, but I would take this opportunity of recording the cordial relations obtaining with the Mental Health Departments of the City of Exeter and the County of Devon. The Duly Authorised Officers have been indefatigable in obtaining social histories, and in co-operating in investigating home and work conditions prior to the discharge of patients. The help of the Disablement Resettlement Officer of the Ministry of Labour is also appreciated.

The Fabric of the Building

Although this matter is not strictly germane to a medical report, mention must be made as so many problems are the relic of military occupation. An extensive scheme of painting has been carried out by contractors, but there remain the Main Kitchen and the so-called Laundry Block for redecoration. Most of the detailed work of reinstatement has fallen to our joiners, plumbers and engineers, and in this work opportunity has been taken wherever possible, of making some improvements, however small, to better nursing and treatment facilities. In these days of shortages the Clerk of Works has worked wonders with salvaged materials. That so much has been done in so short a time is due to his efforts. All the locks of the building, exclusive of those on the female side, have yet to be replaced. The many types of lock, and the unreliability of damaged locks, causes much inconvenience in getting about the building.

Visits

Statutory visits were made by the Commissioners of the Board of Control and the Ministry of Pensions. Their Reports are appended.

General

The formation of a Sports Club has done much to foster the social life of the Hospital and this contribution, in the absence of a Nurses' Hostel, has a value which cannot be over-estimated in providing recreation for resident nurses. It is the ambition of the club to have its own detached club house within the Hospital grounds, and I would commend this project to the Management Committee when considering the distribution of amenity funds. The staff of this Hospital is not big enough to raise all the funds necessary, and is deserving of your encouragement.

Mrs. D. E. Miller has voluntarily taken over the supervision of the patients' library and the rebinding of books, which is of great assistance.

I have to thank my Deputy, Dr. Scott, for so ably conducting the affairs of the Hospital during my illness from January to February, 1950. I am singularly fortunate in the help I have received from the heads of all departments in these two difficult years, and my thanks are due to my colleagues, professional and lay, for their assistance.

I would thank you Mr. Chairman, Ladies and Gentlemen, for your continued help and support.

I have the honour to be,

Your obedient Servant,

JOHN RUSSELL,

Medical Superintendent.

REPORTS OF THE COMMISSIONERS OF THE BOARD OF CONTROL

THE HOSPITAL, DIGBY,
EXETER

25th October, 1948

For five years this Hospital was on "War Service" and its patients were scattered over the other Hospitals in the area. It was only on 10th November 1947, that the first of the evacuees began to return. For a long time before that Dr. Russell and members of his male staff were working hard to put the male wards into a condition which would enable them to house patients. Now all the patients are back in the Hospital.

During my visit to-day, I have been able to see how complex the problems connected with reopening Digby have been, and what a vast amount of work remains to be done before the restoration of the wards and utility departments is complete.

The male patients returned before their wards could be re-decorated but it is hoped that before any female patients come back the female side will have had all traces of war-time damage removed, and that each ward will be repaired and repainted before being reopened. Meantime, the male patients of the working type are doing a vast amount of most useful preparatory work.

I believe I have seen all the patients in residence to-day. They number 165 males, and include 10 voluntary patients and one on a temporary basis. One hundred and forty-four patients returned from evacuation during 1947, and in addition there were 5 direct admissions (2 voluntary, 3 certified). Two patients left, one of whom was regarded as a recovery.

The present staff of male nurses totals 34, of whom 3 are always on duty each night; 22 of them are certificated or registered as mental nurses. I was glad to hear that the Matron, who is unfortunately at present on the sick list, has resumed her position. She will have a very difficult task in recruiting a staff of female nurses which is so essential a preliminary to reopening the female wards, and I wish her every success.

Although the male wards could not be redecorated before occupation, an immense amount of other work had to be done. The whole system of locks has had to be reorganised, the electric rewiring of the Hospital undertaken, and the restoration of much of the plumbing system begun. It is inevitable that the male wards should present a bleak appearance with battered paint and wood-work which has had to be repaired before being enamelled. The furnishing is poor, as much of the original furniture seems to have

been destroyed or has disappeared. All these drawbacks are matters of which Dr. Russell is most conscious.

Although the Entertainment Hall is still out of commission, the patients who sit up late are able to visit a large games room in the evenings which is furnished with billiards and ping-pong tables.

The male clothing is much below even post-war standards. A steam trouser press is needed in the tailor's shop to deal with suits which have had to be laundered. I was glad to hear of the possibility of a dry-cleaning unit being acquired for the joint use of Exminster and Digby.

In my tour of the wards I saw dinner being served. It consisted of rissoles, potatoes, cabbage and semolina pudding. I discussed with Dr. Russell points in connection with serving food to bedridden patients and he agreed with me that the present methods were open to improvement. He is anxious that the small kitchens of the sick wards should be relieved of the burden of serving general diets. If this were done more adequate attention could be given to the niceties of serving food to feeble patients hardly able to feed themselves.

The male occupation centre has been reopened. I was glad to visit it this morning, and to see that the pre-war standards of craftsmanship were being maintained. When the female wards are again filled, I hope occupation therapy will be organised for the patients in them. I remember that handicrafts were never so good on the female side as on the male at this Hospital.

Since the Hospital reopened there have been 5 deaths. They were all from natural causes, but in one case an inquest was held and full particulars were furnished to my Board at the time.

The general health of patients has been good. One patient on admission was found to be suffering from Cerebro-Spinal Meningitis. The condition cleared up and the patient has since been discharged. Two patients are returned as suffering from tuberculosis but both are at present considered to be in a quiescent phase. Verandah treatment is available.

Electric Convulsion therapy is among the active forms of treatment used. Insulin therapy and prolonged narcosis are available if suitable patients for these forms of treatment are admitted.

Three patients sustained fractures in the period under review ; all followed accidental falls and the diagnosis was confirmed in each case by X-Ray examination.

Dr. Russell has as his Deputy, Dr. James Scott.

(Signed) I. COFFIN DUNCAN,

Commissioner of the Board of Control.

3rd August, 1949

On the statutory books were the names of 338 patients, 175 men and 163 women. Of these, 15 men and 16 women were voluntary patients, and there were no temporary patients. During 1948 no females were admitted, but there were 33 male admissions; 22 of them having been voluntary patients. Apart from these direct admissions 11 men were admitted on transfer. During the same period 14 men departed or were discharged.

Since the end of the year, however, the Hospital has been reopened for the admission of female patients, and the survivors of the women who were transferred to other Hospitals during the war have been readmitted—the last group having returned about a week ago.

This influx of patients into premises which were far from ready to receive them occasioned many difficulties, and although conditions are far from ideal, great credit is due to the staff for what has been achieved already.

The dreadful condition in which this Hospital was handed back is well known, and again, though great progress has been made in repairing these ravages, new structural damages and deficiencies are constantly coming to light and it is as yet quite impossible to assess the total amount of repair which will be necessary or the date by which order can be expected to have been restored.

A very great deal of internal decoration has now been carried out and the results are pleasing and cheerful and the contrast with the undecorated remainder is marked. When decoration of a ward is undertaken electric wiring has been replaced at the same time, and also reconstruction of sanitary annexes and ward kitchens. The new sanitary annexes and washrooms are a great improvement, and two ward kitchens have been ingeniously arranged to serve two wards each. Rayburn slow-combustion ranges have been installed in these kitchens.

Though the wards are now bright and attractive they are still very barren having been depleted of furniture, pictures, floor coverings, and even stripped of wooden shelves. The male Occupation Therapy Department and the utility shops are doing remarkable work in providing replacements. Easy-chairs and sofas are produced by buying old furniture and reconditioning it, and by buying wooden chair frames and upholstering them. There is a slowly increasing supply of rugs and carpets.

When this Hospital was built little or no provision was made for storing patients' clothes. Recently an experimental clothes rack was obtained for one of the female wards. This consists of a strong piping frame on which are hooked metal clothes hangers. These

are designed so that a dress, underclothing, stockings and shoes can be conveniently arranged on them. This is obviously an improvement on storing clothing in bundles and it appears to be popular.

The state of the patients' clothing is very unsatisfactory. I was told that when the patients were evacuated from here each one had his own marked clothes and underclothes. On their return none of them had their own clothing and what they had was of poor quality and deficient. It is proposed to return to the system of individual clothing, but the return is likely to be a slow one.

All the wards have three daily newspapers as well as weekly papers and periodicals. There was a good supply of books in most of the wards, but the library arrangements are primitive at the moment. A complete overhaul of the books and facilities had to be started and this is still in progress. Consignments are obtained from the Red Cross, and about one hundred books are issued to each ward. At present these are only changed about every three months. Unfortunately, no room is available as a central library or for a reading-room. The need of these is fully appreciated, and I was told that rooms for these and other necessary purposes would be available when a Nurses' Home is built. A small canteen has been opened, but, if suitable premises were available, it could be extended with advantages.

The male Occupation Therapy Department is in a flourishing condition and it has been, and is being, invaluable in the restoration of this Hospital. The rooms are in a semi-basement, and I was told that they are rather dark in the winter. Perhaps strip-lighting might be helpful here. There is very ample space and Dr. Russell told me that he is considering running mixed classes here. He has so far, been unable to get a female therapist. I visited the utility shops—they are very busy, but too small.

The kitchen is large and well equipped, but it is in need of redecoration. Two electrically-heated trollies are in use. They are regarded as being experimental, in order that the best size and type may be determined before supplying them for all the wards.

The laundry is now well due for overhaul and redecoration. The arrangements for dealing with the foul and infected laundry are satisfactory, but those for the personal hygiene of the workers are not. There is only one water-closet for staff and patients, and this is reached by passing through the foul laundry. There is a small outbuilding which is now used for two coal stores which was probably originally sanitary accommodation, and which might well be converted again to such use. There are no facilities for washing hands.

The nursing and medical arrangements are, in general, good.

The infirmary wards, which are also used for admissions, are well equipped and here and elsewhere, satisfactory clinical rooms have been, and are being, contrived. The returning population has been found to contain an unexpectedly large proportion of bedridden and of senile cases. One or two rooms could be made available in which these cases could be collected to relieve the infirmary wards, but sanitary accommodation would have to be provided. The sanitary accommodation throughout the Hospital is, in fact, inadequate.

There are only one male and three female patients who are considered to be tuberculous. These are accommodated on verandahs in suitable conditions for themselves but most of them are ambulant, and in view of the small numbers, segregation is not possible. It is likely that in the future, the tuberculous patients in the southern part of this Region will be concentrated in one Hospital in suitable premises. There were two deaths in 1948 and three notifications from this cause.

Some old but inactive cases of dysentery have been returned to this Hospital, and one typhoid carrier is due to return, but the Hospital is free from active cases of these diseases.

Deaths during 1948 numbered 8, with a mortality rate of 4.9%. There were no inquests, and no serious casualties have been recorded.

I was told that there is no difficulty in getting the services of consultants when needed, and a dental service is still available. Out-patient work has not yet been restarted but this will probably be co-ordinated with the work of the remainder of the Hospitals in this group. Surgical cases are, if possible, moved to another Mental Hospital for operation, and, in view of the small numbers here, this seems to be the most economical plan. Again, leucotomy operations will probably be co-ordinated in some similar way.

The patients here appeared to me to be a happy and contented group in general and I received no complaints. The dietary is satisfactory and I was glad to hear that all the patients have a light supper.

On the staff there are 35 male nurses, 11 whole-time female, and 45 part-time. Three men and six women are on night duty. Twenty men and 17 women are certificated or registered as mental nurses. When I visited the female wards they seemed to me to be adequately staffed, but I was told that this is not the case in the early mornings, at week-ends, and on such occasions as Bank Holidays.

I found this an interesting visit, and I feel that Dr. Russell and his staff are to be congratulated on the progress that has been

made, and which is still being made in restoring this Hospital to a satisfactory standard. The difficulties in the way of such progress are great.

Dr. Russell has Dr. Scott as his Deputy Medical Superintendent, and there is a vacancy for another Medical Officer. The final establishment is not, however, yet fixed.

(*Signed*) E. N. BUTLER,
Commissioner of the Board of Control.

19th January, 1950

We were sorry to find at our visit to-day that Dr. Russell was on the sick list. He was, however, able to come over and meet us at luncheon, and we discussed various points which arose during our round of the wards with him then. We hope that he will shortly be quite well again. In his absence, his Deputy, Dr. Scott, escorted us and gave us every assistance. Dr. Durtenshaw, who is acting as locum-tenens, was also most helpful.

The restoration and redecoration of the wards is now nearly finished. Although such departments as the kitchen, laundry, sewing room and Entertainments Hall have not yet been dealt with, it is possible to appreciate how attractive the Hospital as a whole will be when the various works are completed.

The colours chosen for the wards are bright and pleasing. Every effort has been made to render the dayrooms comfortable and homely, although it is true that the furnishing is poor and the windows are still uncurtained. Dr. Russell is alive to the need for many more easy-chairs and is anxious to replace the large dining-tables and bentwood dining-chairs; particularly as the last-named are apt to be dangerous to old people; and fractures have resulted from falls from these chairs. Dr. Russell is experimenting with tubular steel arm-chairs in the hope that such accidents may be obviated.

The kitchen is next on the list for reconstruction and redecoration; both are badly needed. The service of meals has recently been improved and electrically-warmed food trolleys now convey meals to the female wards already carved and served in the kitchen. Trolleys for the male side are on order, but here the meals will be conveyed in bulk and the service done by the staff in the wards.

Dinner to-day consisted of hot-pot and potatoes, with a baked apple as pudding. All patients who sit up are given a supper meal, but for the others, tea served between 5.30 p.m. and 6.0 p.m. is the last meal of the day.

Every effort is now being made to restore patients' clothing to the high standard in force at this Hospital before the war. The aim is individual clothing for each patient.

Occupation therapy is extremely well organised on the male side, but so far there is no similar department for women patients. The latter, however, do a certain amount of fancy-work and knitting in the wards. We were glad to hear that a physical training class for women patients is held.

There are plenty of entertainments. These include a weekly cinema and frequent dances, concerts, and whist-drives. A male club-room provides facilities for billiards, darts, and table-tennis.

The laundry, as mentioned in the last entry, is due for overhaul, and steam-presses should be installed here. The conversion of the two small coal stores to provide sanitary accommodation for laundry workers has not yet been carried out.

The patients in residence to-day number 345 (173 men, 172 women). There is, in addition, one female Section 20 case under observation. Thirty-eight of these patients are voluntary cases. During 1949, there were 121 direct admissions (49 men, 74 women), and of these 81 came in voluntarily. In the same period 73 patients left or were discharged, and 46 of these were regarded as recoveries.

The shortage of female nurses here remains acute, and at the present time the total resident staff of female nurses is 6. The total staff consists of 34 male and 19 female full-time nurses, and 33 female part-time nurses. Three of the male and 7 of the part-time female nursing staff are always on duty at night. Twenty-two men and six full-time and eight part-time women nurses are certificated or registered as mental nurses.

In 1949, 11 patients died (7 men, 4 women) giving the low mortality rate of 3.75%. One of these deaths was from tuberculosis.

Although 1 man and 3 women are recorded as suffering from tuberculosis, none of them is considered to be active now. One was in bed on a verandah and all of them sleep on verandahs. The Hospital is free from intestinal infections, and no such cases have been notified since the last visit.

The admission wards are also used for nursing sick patients, and they are suitable for this purpose. Their equipment is satisfactory, but a large steriliser would be useful in the male ward.

Since the last visit no inquests have been held. Two fractures have occurred in this period.

Arrangements are in force by which patients who need operations may be transferred to another nearby Mental Hospital, and such transfer is likely to be used in the future for providing for pre-frontal leucotomy.

Again, patients are moved to another Hospital for deep-insulin treatment, which is not practicable here owing to shortage of staff.

Out-patient work has not yet started, but we understand that the medical staff of this Hospital is likely to be included in a scheme for providing an out-patient service for Devon. For this, and for other reasons, it seems to us very desirable that there should be a third medical officer on the establishment.

(Signed) I. COFFIN DUNCAN,
E. N. BUTLER,

Commissioners of the Board of Control.

WONFORD HOUSE HOSPITAL

Medical Staff

Medical Superintendent :

B. J. Mullin, M.C., L.R.C.P. & S. (I) D.P.H., D.P.M.

A. C. Austin, L.R.C.P. & S. (Edin.)

Officers

Chaplain : REV. W. A. P. Glenn, A.K.C.

Steward : E. Beck

Matron : Miss E. A. Lenton, S.R.N., R.M.N., S.C.M.

Chief Male Nurse : T. T. Hay, S.R.N., R.M.N.

REPORT OF THE MEDICAL SUPERINTENDENT FOR THE YEARS 1949 AND 1950

WONFORD HOUSE HOSPITAL,
EXETER

Mr. Chairman, Ladies and Gentlemen,

I have the honour to present the Medical Superintendent's Report for the years 1949 and 1950.

On the 1st January, 1949, there were 123 patients on the Hospital Registers. Seventy-eight patients were admitted during the year, 53 were discharged, and 15 died. The number of patients on the books on the 1st January, 1950, were 133. Eighty-seven patients were admitted during 1950, sixty-seven were discharged, and 19 died, leaving the names of 134 patients on the Registers on the 1st January, 1951.

Admissions

According to sex and status, the direct admissions were as follows :—

1949	Male	Female	Total
Voluntary	22	41	63
Temporary	2	3	5
Certified	—	6	6
	—	—	—
	24	50	74
1950	Male	Female	Total
Voluntary	34	39	73
Temporary	1	2	3
Certified	7	2	9
	—	—	—
	42	43	85

The total number of admissions in 1950 was 18 more than in 1948; 89% were on a non-certified basis. The increase in the admission rate, especially for female patients, continues. There is a waiting list, and a number of applicants have to be referred to other Hospitals.

Discharges and Departures

According to sex and status, the discharges were as follows :—

1949	Male	Female	Total
Voluntary	14	32	46
Temporary	—	—	—
Certified	3	1	4
	—	—	—
	17	33	50
1950	Male	Female	Total
Voluntary	29	26	55
Temporary	1	2	3
Certified	3	4	7
	—	—	—
	33	32	65

The total discharges for the years under review were 115, of whom 41 were considered recovered, and 68 improved sufficiently to leave Hospital. The majority of these patients had less than three months Hospital treatment.

Deaths

Fifteen patients died in 1949, and 19 in 1950. An inquest was held in 1949 in the case of a female patient, who committed suicide by severing an artery.

General Health

The health of the patients and the staff was good ; there were no cases of infectious disease, and no epidemics.

A full range of consultants has now been appointed, and they attend the Hospital when required. Mr. E. Samuels, L.D.S., was appointed Dentist.

A comprehensive scheme of examination of the nursing staff was put into operation. This included X-ray examination of the chest at The Hospital, Exminster, for evidence of tuberculosis and the Mantoux tuberculin test. B.C.G. vaccination was done in cases showing a liability of contracting the disease.

Treatment

With few exceptions, the patients admitted had an illness of many months duration in adverse environmental conditions. The quiet orderly routine of Hospital care helps to allay the apprehension and sense of insecurity which exists in most cases. The treatment is mainly psychological, aided, when necessary, by special methods, as electroplexy and prolonged narcosis. Insulin Coma Treatment was employed in cases of early schizophrenia.

Occupation

Careful attention was paid to providing interests and occupations for all who could co-operate in any way. The classes in the Occupation Centre under Sister A. E. Sercombe, R.M.N. were well attended.

Ladies' Hairdressing Room

The Hairdressing Department continues to be a useful adjunct to treatment, in restoring self-respect and self-confidence. It relieves the nursing staff of a considerable amount of work. A chiropodist is also in regular attendance.

Recreation

The croquet and tennis-courts were in constant use throughout the summer. The hard-court was completely renovated. Badminton, table-tennis and billiard tournaments were arranged during the winter months.

The cinema performances were well attended. A new projector was purchased and is satisfactory. Our thanks are again due to the Chaplain for the time and trouble he takes to make the recreations a success. Visiting companies gave the usual concerts and entertainments.

Nursing Staff

The male nursing establishment is up to full strength. There is still a shortage of whole-time trained female nurses. There was a welcome increase in the number of both male and female students, which makes the future more hopeful, if it does not relieve the immediate difficulties.

The nurses training was completely reorganised with the opening of the Preliminary Training School at The Hospital, Exminster and improved training facilities at Wonford House. A Sister Tutor (Sister R. I. Ponsford, S.R.N., R.M.N.) was appointed. Lectures were also given by the Medical Officers and the Chief Male Nurse (Mr. T. T. Hay, S.R.N., R.M.N.).

One female nurse passed the Final Examination of the Royal Medico-Psychological Association, and four male nurses passed the Preliminary State Mental Examination.

Redecorations and Improvements

A considerable amount of redecoration was done on both the male and female sides of the Hospital; the wards and galleries are bright and attractive.

The Nurses' Home was completely redecorated, and a new central heating system installed.

The Laundry—The roof was reslated. The electric power cable was extended to the building. Additional equipment included a hydro-extractor, cordless electric irons, a pressing machine, and an additional washing machine.

The Workshops—The building was extended by an additional shop. An electric planing machine and a circular saw were installed.

The Kitchen—The arrival of new cooking equipment, which is now in the process of installation completes the first part of the scheme for renovation of the Kitchen.

General

The following male nurses retired on pension in September, 1949 :-

Mr. H. H. Trevitick, after 43 years' service,

Mr. A. E. Wright, after 40 years' service,

Mr. W. E. Marshall, after 19 years' service, and in September, 1950,

Mr. F. Saunders, after 21 years' service.

They have our best wishes in their retirement.

The Commissioners of the Board of Control, the Lord Chancellor's Visitor, and the Representative of the Ministry of Pensions paid their statutory visits.

I am glad to take this opportunity of expressing my gratitude for the help I have received from Dr. A. Austin, and from all members of the staff. Every department has a tried and experienced officer at its head, and I thank them for their loyal co-operation.

I should like to record my appreciation of the valuable assistance I have received from the Medical Superintendents of The Hospital, Exminster, and The Hospital, Digby, during these rather difficult times.

Lastly, I thank you Mr. Chairman, and the Members of the Hospital Management Committee, for continued support and encouragement.

I have the honour to be, Mr. Chairman, Ladies and Gentlemen,

Your obedient Servant,

B. J. MULLIN,

Medical Superintendent.

REPORTS OF THE COMMISSIONERS OF THE BOARD OF CONTROL

WONFORD HOUSE HOSPITAL,
EXETER

4th August, 1949

When I visited this Hospital the names of 129 patients were on the statutory books, 43 of these being of gentlemen and 86 of ladies. I believe that I saw all of these except one lady who was on leave. Ten gentlemen and 22 ladies are here on a voluntary basis.

Since the last visit there have been 56 direct admissions, one admission as a transfer, and 38 departures or discharges. Thirteen patients died during this period; the deaths were from natural causes with the exception of one case of suicide in which an inquest was held. There have been no cases of infectious disease.

Both insulin coma and convulsive treatment are in use in this Hospital when suitable cases are admitted, and it is satisfactory to be able to record that the number of female nurses available is sufficient to permit of insulin treatment for the ladies here. Mention should also be made of the Occupational Therapy Department which is an active and flourishing concern. It was unfortunately not in session when I visited, but I saw the large and well equipped room in which the classes are held.

The Hospital was clean and well kept and the furniture is good with an ample supply of really comfortable arm-chairs and sofas. Redecoration is progressing steadily, and is making a vast difference to the appearance, and cheerfulness of the various rooms and galleries. When I visited the Nurses' Home it was being redecorated, and radiators were being fitted inside the nurses rooms instead of on the corridors.

I was shown the main kitchen which is due for a complete reorganization. Some new equipment has already been obtained and much more is ordered. There is a comprehensive scheme for this work which includes the provision of a cold-storage room. Some electrically-heated food trollies are already in use. There is no point in providing any more until lifts have been installed.

Again, the laundry needs renovation and some new machinery. The machinery is at present driven by steam, and the present hydro-extractor has been condemned. An electric power cable has now been laid to this building.

In general it may be said that steady progress is being made in

repairing the deficiencies and deteriorations due to the war. The patients here appeared to me to be contented and well cared for both by the medical and by the nursing staff. There is a big proportion of patients here of very great age.

The nursing staff now consists of 24 men and 37 women, many of the women giving part-time service. The average number on duty each day are 24 men and 17 women.

Among the patients in residence were 13 Health Service Patients, 3 male and 10 female.

I should like to thank Dr. Mullin for his help to me during this visit. He still has Dr. A. Austin.

(Signed) E. N. BUTLER,
Commissioner of the Board of Control.

18th August, 1950

To-day there are 127 patients on the statutory books, 36 of these being gentlemen and 91 ladies. All patients were seen except one lady on leave. Since the last visit there have been 91 direct admissions, 36 gentlemen and 55 ladies; since the last visit 76 departures or discharges. This does not include transfers. Seventeen patients have died, 10 men and 7 women, all deaths were from natural causes. There are at present two temporary patients, both ladies, and properly detained. There have been no cases of infectious disease since the last visit.

There has been considerable redecoration since the last visit and the Hospital is spotlessly clean. More electrically-heated food trollies have been supplied. Repairs are at present being carried out in the laundry. There is, at present, no shortage of staff. A new staff lecture room has been fitted up and is very satisfactory. Deep insulin and E.C.T. is carried out on all suitable cases. Dr. Mullin was on leave during my visit. Dr. Austin accompanied me during the visit, and I would like to thank him for his help in all matters connected with my visit.

(Signed) I. FRASER M. CAMPBELL,
Commissioner of the Board of Control.

Printed at the
HOSPITAL PRINTING PRESS,
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FRASER M. CAMPBELL

Commissioner of the Board of Control

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FRASER M. CAMPBELL

Commissioner of the Board of Control

