Annual report for the year ended 31st March, 1952 / The hospital management committee for St. Augustine's.

Contributors

St. Augustine's Hospital (Chartham Down). Hospital Management Committee. Shepherd, C. E. Alan. Scott, F. L. Butler, E. N. St. Martin's Hospital (Canterbury, England)

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¹⁻⁵² HOSPITAL MANAGEMENT COMMITTEE FOR

ANN-REP WLM 28

ST. AUGUSTINE'S

ANNUAL REPORT FOR THE

YEAR ENDED 31st MARCH, 1952

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who is appointed for the period ending 31st March, 1954

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Miss M. Sheehan, S.R.N., S.C.M.,
T. S. Stigger, Esq.,

who are appointed for the period ending 31st March, 1952

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S. C. Post, Esq., L.D.S., R.C.S.,
Mrs. M. Sharpe,
I. H. K. Stevens, Esq., M.D., M.R.C.P.,

who are appointed for the period ending 31st March, 1953

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M. S. Harvey, Esq., M B., Ch.B., D.P.H.,
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who are appointed for the period ending 31st March, 1954

Administrative Staff

Group Secretary, Finance Officer and Supplies Officer H. F. Levitt, F.H.A.

Deputy Group Secretary, Finance Officer and Supplies Officer G. Lock, F.H.A.

> Group Engineer A. C. Pearson

Staff of the Hospitals :

St. Augustine's Hospital

Medical Superintendent (Consultant Psychiatrist)
 C. E. Alan Shepherd, M.R.C.S., L.R.C.P., D.P.M.

Deputy Medical Superintendent (Consultant Psychiatrist) A. K. McCowan, M.D., Ch.B., D.P.M.

Senior Hospital Medical Officer J. A. Ainslie, B.Sc., M.R.C.S., L.R.C.P., D.P.M.

> Senior Registrar J. H. S. Whyte, M.B., Ch.B., D.P.M.

Junior Hospital Medical Officers Joan Kerr, M.B., Ch.B., B.A.O. F. Murray, M.R.C.S., L.R.C.P.

Senior House Officer W. N. G. Kendall M.R.C.S., L.R.C.P.

> Secretary H. F. Levitt., F.H.A.

Matron Miss I. R. Taylor, M.B.E., S.R.N., R.M.N., S.C.M.

Chief Male Nurse A. J. Claydon, S.R.N., R.M.N., R.M.P.A.

St. Martin's Hospital

Medical Superintendent (Consultant Psychiatrist) F. L. Scott, M.R.C.S., L.R.C.P., D.P.M.

> Secretary A. G. Webb, F.H.A.

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THE HOSPITAL MANAGEMENT COMMITTEE FOR ST. AUGUSTINE'S

Annual Report for the year ended 31st March, 1952.

The St. Augustine's Hospital Management Committee has much pleasure in publishing it's Third Annual Report.

It has received the reports of the Medical Superintendents of the two Hospitals, giving details of populations and treatments given at the Hospitals and Clinics ; these reports appear in the following pages. The Committee is still concerned that so many elderly people are certified and have to end their days in the Mental Hospital. So many beds and so many of the Nursing Staff, whose services can ill be spared, are occupied with these cases that curative treatment must suffer.

The Members realise only too well that this is a National and not a local problem but they feel that every opportunity should be taken to draw attention to this fact and to the National need.

The Committee is very pleased to record the opening of Oak House, a modern admission villa for both sexes, where selected cases are treated. Owing to shortage of Nursing Staff the occupation was a gradual progression and one that discouraged a formal ceremony. That it was accomplished without a hitch and is now running smoothly is a credit to all the Staff concerned. The building has been found ideal for summer occupation but difficulty has been experienced in combatting the driving rains of winter.

The Regional Board has intimated that the first phase of the rehabilitation of St. Martin's Hospital may be undertaken during the years 1952 and 1953. The work entailed will be the repair and renovation of half the Hospital with much reorganisation of the engineering services.

Two new houses for occupation by Assistant Medical Officers have been erected at St. Augustine's Hospital during the year under review and work has commenced on the erection of two cottages for the Farm Staff.

The Hospital Engineering and Building Maintenance Staff have been fully employed in the year on the redecoration and maintenance of the fabric of St. Augustine's Hospital and Houses on the Estate, and several worth-while Minor Capital Projects have been executed. The chief noteworthy event on the St. Augustine's Farm has been the acquisition of ten pedigree tuberculin tested Ayrshire Heifers which form the nucleus from which the Farm Sub-Committee hopes to build it's Dairy Herd. A new dairy shed has been erected, capable of housing twenty-four animals, and water has been piped to the pastures.

The Committee has now been advised by the Board to transfer from St. Martin's to St. Augustine's Farm the cross-bred Guernsey milking cows leaving the followers at the former farm. Steps are therefore being taken to ascertain the number of reactors to the tuberculin test and it is pleasing to record that all animals passed the first test. Pigs and poultry have been fairly successful during the year and quantities of eggs and pork have been consumed. It is expected that for a while the production of potatoes will suffer now that acreage has been curtailed, but it is hoped that the advent of the Dairy Herd will herald greater fertility in the soil.

The usual programme of entertainment for patients and staff has been maintained and many of the female patients have again welcomed the opportunity of working in the local hopfields.

The Members regret that they are unable to report, as last year, that the Staffing position was improving. During the past year, the numbers of the full-time Female Nursing Staff showed a gradual decline although the numbers of part-time Nurses remained steady : the Members wish to express to the Full-time Nurses their appreciation of the services they have rendered under such trying conditions. On the Male Side there are now a few pensioned nurses giving part-time duty.

The Committee is very conscious of rising costs and is experiencing difficulty in maintaining the standard of life within the Hospitals. The following figures give an indication of this serious problem (those shown for 1951-52 are approximate, the accounts not having been finally completed or submitted to Audit).

	Approximate Net Cost per patient week.					
	1948-49	1949-50	1950-51	1951-52		
St. Augustine's	58/8d.	60/4d.	62/4d.	73/-d.		
St. Martin's	107/3d.	105/-d.	121/7d.	115/3d.		

The Members learned with regret that the Hon. Mrs. D. Neame would be unable to continue to serve the Hospital. They have expressed to her their appreciation of her services, always so readily given, and the hope that in relinquishing these ties, she may be more able to meet the growing demands of her other public services.

REPORTS OF MEDICAL SUPERINTENDENTS

ST. AUGUSTINE'S HOSPITAL, CHARTHAM DOWN, NR. CANTERBURY

Mr. Chairman, Ladies and Gentlemen,

I beg to submit the Annual Report for the year ending 31st December, 1951.

The state of the Hospital is shown in the Appendix "A."

The most important item of news is the opening of the new Admission Hospital, Oak House, which took place on the 19th July. This unit provides 42 male and 42 female beds.

At first sight it might be thought that these extra beds would go some way towards relieving the congestion in the main building ; unfortunately it is not working out like this. When this unit was designed and built it was in the halcyon days when shortages of staff were more or less unknown. At that time it was estimated that it would need 18 female and 18 male nurses to staff the Hospital adequately. Owing to the present staffing difficulties we are only able to spare an average of 4 female nurses to be on duty by day and 2 at night; on the male side the number is 5 by day and 2 at night. This has meant that there has had to be a very careful screening of the patients coming into Oak House as well as of those being treated there and many patients are still having to be admitted direct into the main building. Although Oak House is showing empty beds, they are not ones that can be allotted to any type of patient. In spite of this we are very glad to be able to get this unit into working order at last. It is some years since it was evacuated by the military but a variety of vicissitudes prevented its use until now. Those patients with previous experience of the main Hospital only, have all been impressed with the comfort of Oak House if they have been readmitted there. The Outpatient E.C.T. Clinic is now held there with much benefit both to the staff and the patients.

(1)

It will be seen that there is an increase of 11 in the total number of beds in occupation. In itself, this increase appears to be insignificant, but examination of the figures show that it has taken place at the expense of an already over-crowded female side. The number of direct admissions has risen, 751 compared with 713 in the previous year. This increase occurred in the Voluntary patients, which, it was felt, was likely to happen with the opening of Oak House. There was a slight drop in the number of Temporary patients, whilst the number of Certified patients remained exactly the same. The discharge rate is appreciably greater this year than last, 591 compared with 523, and the recovery rate is correspondingly increased, 280 compared with 221. One would expect a greater recovery rate with the greater intake of Voluntary patients, although the figures shown cannot entirely account for this, indicating that there has been some improvement in the recovery of the Certified patients. Unfortunately there has also been an increase in the death rate. There was nothing in the way of serious epidemics in the Hospital to account for this, so that the cause must rest with the aged and the infirm part of the population of the Hospital.

The Committee must be very tired of the constantly reiterated complaint about the admission of old people. During the past year there has been no relief in this respect and 119 people aged 70 or over were admitted during the year.

TREATMENT

Electro-Convulsive Therapy still remains the main form of treatment. Of the total admissions 751; 312 were given this treatment. Of the 196 females so treated 176 were discharged, 104 as recovered, 70 as improved, and 2 as unchanged. Of the 116 male admissions treated 59 were discharged as recovered or improved, 9 did not complete the course for various reasons, and 48 are still receiving maintenance doses. In addition to this, there is a very active Outpatient Clinic which dealt with 155 patients during the year, 61 males and 94 females. 51 male cases were recovered or improved and 10 showed no change or did not complete the course. Of the 94 female patients, 43 recovered, 21 were improved, 10 showed no change, 18 were still undergoing treatment and 2 still required maintenance doses. Some of the chronic patients are also given regular doses at varying intervals in order to stabilise them as far as possible.

The Insulin Department has not suffered quite so badly this year as it did last year, although there have been one or two occasions when we have had to close down for short periods owing to acute shortages of staff. These periods have been less frequent than last year, and consequently the figures for this form of treatment are rather higher than last year, in all 60 patients have had the course, 27 males and 33 females. The treatment was either Insulin Coma or Modified Insulin. Of the male patients treated 25 improved sufficiently to be discharged whilst 2 still remain in Hospital, and of the female patients 10 discharged themselves without completing the course, 8 improved enough to be discharged, 2 died later of other causes, and 13 are still in Hospital and of these 9 are showing some improvement.

Prolonged Narcosis has been used in 12 cases, 6 male and 6 female, and in each case 4 have been discharged improved and 2 still remain in Hospital.

Pre-frontal Leucotomy has been performed in 8 cases, 4 male (1 of these being transferred to the Brook General Hospital for the operation) and 4 female. Of the male patients 2 were discharged improved, 1 is improved but still in Hospital, and one died later of Pulmonary Tuberculosis. Of the 4 female cases treated, 1 was discharged improved and 3 are still in Hospital.

OUT-PATIENT CLINICS

These Clinics continue to work at full capacity and the attendance figures are given below in detail :---

		New Cases		Re-attendances		
		1950	1951	1950	1951	
Ashford		(122)	122	(192)	237	
Canterbury		(221)	206	(434)	561	
Deal		(68)	65	(101)	207	
Dover		(114)	111	(274)	321	
Folkestone		(125)	118	(426)	500	
Margate		(149)	116	(215)	305	
Ramsgate		(44)	98	(38)	169	
Sittingbourn	е	(137)	133	(149)	271	
TOT	ALS	(980)	969	(1829)	2571	

It will be seen that there has been a very slight falling off in the number of new cases seen over all, but there has been a heavy increase in the number of old cases attending. This rise in the number of old patients attending is bound to affect the number of new cases who tend to become crowded out by the chronic type of patient. This is a pity because it limits the amount of time that can be given to each patient and time is one of the most important ingredients in psycho-therapeutic treatment.

Dr. Gray's Psycho-analytical Clinic is also fully occupied. In his case, in order that he may give proper attention to his patients, he has to ration his patients instead of his time and this means that his waiting list is becoming longer and longer. This, too, is unfortunate because the result of the long wait is to make the patient think he or she has been forgotten, and they sometimes fail to turn up when their time does eventually arrive having become tired of waiting. His figures for the year are 24 new cases with 536 re-attendances.

PSYCHIATRIC SOCIAL WORK

This side of the Hospital work is badly understaffed. Miss G. Waller resigned to get married in November, and this has left Miss E. C. Selley to carry on as best she can with the assistance of Miss A. Williams, a trainee, who joined us on 31st December. One fully trained Psychiatric Social Worker and one student cannot possibly cope with all the work there is to be done and something has to be left. All their work is so important that it is not easy to decide which should be done and which should be left. There is enough work to keep three fully trained Psychiatric Social Workers going all the time.

OCCUPATIONAL THERAPY

Since the last report, Miss R. Hutchence has left to take up other work, and on the female side this department is under the direction of Miss V. Glegg. She now has Miss N. Conway and Miss B. Bailey to help her. Miss Glegg has been able to organise two new centres, one on each side of Oak House. Both these new ventures are working well. There have been no changes on the male side which is still in the charge of Male Nurse T. H. Brazier. The following work has been carried out in the Laboratory during the year :--

Blood :

Diooci .					
	Meinicke micro-read	ction		585	
	Urea			46	
	Counts (Red, White	, Hb)		595	
	Bromide			259	
	Sugar (Fasting and T	Colerance	e Curves)	224	
	Widale			11	
	Malaria			8	
	Eosinophil Counts .			58	1786
Fæces :					
	Dysentery, Typhoid	groups		543	
	TD			49	
	0 11 DI 1			56	648
	Sputum			64	
	C.S.F			34	
	Test Meals .			45	
	K.L.B			11	
	Miscellaneous .			291	445
Urine :					
	Routine			1795	
	Sugar estimations .	19,76		196	
	Microscopic exams.			163	
	Cultures			58	2212
			TOTAL		5091
			10111		
	Post Mortems			49	

NURSING STRENGTH

The figures for the Nursing Staff at the end of the year were :---

- 104 males full-time ;
- 60 females full-time ;
- 135 females part-time, the latter giving periods of service equivalent to 71 full-time nurses.

There is little to report in the way of change here. The situation on the female side remains as acute as ever and we have to rely on the part-time nurse to keep the wards properly staffed. The work they do is of inestimable value, indeed without them many of the wards would have to be closed down. Although the figures on the male side appear to be more reassuring there are problems even here. It is true that we do get student nurses joining but quite a large proportion of them only stay for a comparatively short time ; some of them are unable to cope with the training and are unable to graduate from the Preliminary Training School ; others find that the salary is not enough for them to live on especially if they are married with a family. In spite of our difficulties, however, both sides continue to run with the maximum efficiency and smoothness.

MEDICAL STAFF

We have been very fortunate in this respect. We have been able to keep our senior staff, Dr. A. K. McCowan, Dr. F. L. Scott, Dr. J. A. Ainslie and Dr. J. H. S. Whyte. Dr. N. A. Martin and Dr. Joan Kerr make up our complement. I am sorry to say that Dr. Martin will be leaving us very soon. He has been a very useful medical officer and has done a great deal of valuable work whilst he has been here. The staff may be small in numbers but they are all stalwarts in the amount of work they get through and I am satisfied that South East Kent has no cause for complaint about the care and attention that the psychologically disabled of this area, temporary or otherwise, are given.

As usual, Mr. Chairman, I have to propose my vote of thanks to yourself and to all the members of the Committee for your consideration and friendliness in the past year. I always enjoy our Committee meetings, indeed I look forward to them. I do not think that a Medical Superintendent can pay a higher tribute than that.

I have the honour to be,

Mr. Chairman, Ladies and Gentlemen,Your obedient Servant,C. E. ALAN SHEPHERD,

Medical Superintendent.

RETURN OF PATIENTS, 1951.

Appendix 'A'

12.8 E 13.8 TOTAL 1 69 ∞ E. 11.6 ∞ M. T. CERTIFIED 127 82 E. ∞ M. 00 00 T. TEMPORARY E. -N 380 168 24 | VOLUNTARY E. E. M. TOTAL DIRECT ADMISSIONS From Hospital designated for purposes of Sect. 20 L. ÷ • DEPARTED OR DISCHARGED ... STATUTORY CARE ... Of whom received allow-Number of Post-Mortems Instances in which bed-: : Of whom had recovered... : : MORTALITY RATE (per cent) ... AVERAGE NUMBER OF PATIENTS ALLOWED OUT ON TRIAL ALLOWED OUT ON LEAVE TRANSFERRED TO OTHER ADMITTED ON TRANSFER -----: From elsewhere DIRECT ADMISSIONS :---.... RESIDENT ... (a) From Home(b) From Hospitz sores existed A. 1890 ances DIED (c)

ST. MARTIN'S HOSPITAL, CANTERBURY.

Mr. Chairman, Ladies and Gentlemen,

I beg to submit my Annual Report for the year ended 31st December, 1951.

Little or no progress has been made during this year towards the re-opening of the main wards of this hospital, which from lack of occupation have undergone a certain amount of deterioration.

With a staff of seven male nurses, we have continued to care for 28 chronic male patients and with the limited Farm and Garden Staff available, have endeavoured to keep the Grounds in reasonable order.

PATIENTS

Despite their advanced age, there has been little sickness and no case of dysentery or infectious disease has occurred.

One patient sustained a fractured leg as a result of falling in a seizure and later died.

Two patients have died of cardio-vascular disease.

Two patients were transferred to St. Augustine's Hospital for X-ray or Surgical treatment not available at this hospital.

One patient was regraded from certified to the voluntary status.

Vacancies have been filled by suitable patients from St. Augustine's Hospital.

(2)

NUMBERS

St. Martin's	Voluntary		Certified			Total			
	М.	F.	T.	М.	F.	Т.	М.	F.	Т.
Resident 31/12/50	1	_	1	27	·	27	28	_	28
Admissions	1	—	1	2	—	2	3	-	3
_	2	_	2	29	_	29	31	_	31
Discharges & Trans.	_	-	_	3	_	3	3	_	3
Deaths	1	_	1	1	-	1	2	—	2
Remaining 31/12/51	1	—	1	25	—	25	26	-	26
Bexley Hospital									
Resident 31/12/50	_	7	7	_	51	51	_	58	58
Death	.—	_	_	-	1	1	_	1	1
Remaining 31/12/51	-	7	7		50	50	-	57	57
Netherne Hospital									
Remaining 31/12/51		—	_	8	-	8	8	—	8
Remaining 31/12/51				8		8	8		8

No changes.

FARM AND GARDEN

The dairy herd at 31/12/51 consisted of 10 milking cows, 7 heifers and 8 heifer calves; the reduced number of milking cows resulted from a tuberculin test carried out on 16/4/51 and the elimination of 6 reactors which were not replaced, in spite of this a total of 8,301 gallons of milk was produced during the year.

Most of the fruit and vegetables required for use in the hospital have been produced in the garden, surplus supplies of apples and soft fruits have been sent to St. Augustine's Hospital.

> I have the honour to be, Mr. Chairman, Ladies and Gentlemen, Your obedient Servant, F. L. SCOTT, *Medical Superintendent.*

REPORTS OF THE BOARD OF CONTROL

ST. AUGUSTINE'S HOSPITAL,

14th November, 1951.

The names of 1551 patients are on the books, and of these 684 are men and 867 are women. Sixty-nine men and 87 women are voluntary patients and there are four temporary patients. Ten patients are on trial and 6 on leave.

There were 713 admissions in 1950 and of these 579 were admitted from their homes. In addition 8 were admitted as transfers from other hospitals. In the same period 523 patients departed or were discharged and 14 were transferred to other care. In the year 73 patients were sent on trial and 560 were given leave. At present 117 men and 80 women are allowed on parole; in all cases this is parole beyond the estate. Five wards only are open to the grounds.

The latest figure available for the weekly maintenance rate is 65/4d. I think that this figure is lower than average for comparable hospitals.

The most important happening since the last visit has been the opening of Oak House, the male and female admission hospital. This took place in July, but the male section was, until a month ago, used for a group of patients while their own ward was being decorated. Not only are the authorities concerned to be congratulated on the opening, long deferred, of this building, but also on the excellence of its decoration, furnishing, and equipment. The bed-linen, furniture, curtains and decorations are all good and the general impression I had was of comfort and attractiveness. Only the better type of new patients are admitted here.

This building accommodates the X-ray Department and the Dental room, and another room is now ready for equipment as a second women's hairdressing saloon. There is already one in the main building where two full-time hairdressers work.

Two staff houses are now nearly finished and this is a matter of the first importance. They will be used at first by medical officers. That a house is available is of crucial value when recruiting medical staff.

(1)

No other major work has been undertaken but I understand that authority has been made for constructing a much needed cold-room for the Kitchen. There is a plan for the complete overhaul of the main kitchen but this is unlikely to be undertaken just yet. A gas cooker has been installed, but the chef told me that a lack of small boilers leads to a less varied diet than could be provided if they were available. There is also a shortage of larders.

Food is taken to the wards in insulated containers and it arrives in the wards in an adequately hot condition. I found that the ward plate heaters are efficient, and are being properly used. The mid-day meal which I saw being served was of macaroni-cheese with potatoes and peas, followed by date pudding and sauce. A second course is not provided on one day in the week, but on this day the first course is a particularly substantial one. A light supper is served.

In the last entry the lack of comfortable chairs especially in the male wards was mentioned. I am glad to say that there has been a marked improvement. Quite a number of easy chairs have been bought, and many of the long wooden benches, which will be eliminated gradually, have been provided with Dunlopillo seats.

I hope this process will continue as there is still a long way to go. Extensive decoration of the wards has taken place with pleasing effect and there are few really bad wards left. All the female wards had white net curtains over the lower window panes, but in the male wards curtains were conspicuous by their absence. There was a considerable supply of cut flowers considering the time of the year. All the wards and other premises were very clean and well kept.

The Hospital has no proper waiting room but a large inner entrance hall has been furnished with comfortable chairs and tables, and it serves this purpose very well.

Comments in these entries have been made several times about the state of the library service here. A new chaplain has been appointed and has been put in charge of the library. I have not visited before but it is clear to me that much hard work has been devoted to putting the actual library in order and to organise a service. The books appear to me to be well classified and properly indexed. The library is open for an hour every morning and for 2 hours on Saturdays.

Patients change their own books, or if they cannot do so, their friends or nurses do it for them. These facilities are an improvement but the hours of opening are few and there is no ward service. Even so the chaplain told me that half his time is taken up with library work, which is wrong. Failing a full-time librarian to take his place it is clear that he must have help. Patients have not proved very successful, but others should be tried. I suggested that it was possible that help might be obtained from the "W.V.S." Until recently a patient has been working quite skilfully at book-binding but he has now defected. A library such as this must have a binding department available and this occupation should be revived. The printer in the excellent printing department acts as instructor in book-binding.

A sum of $\pounds 100$ has recently been devoted to buying books but this was from the "Free Monies". I think that it should be a charge on the maintenance. I pointed out that many hospitals got a steady and useful secondary supply of books from the County Library discards.

Pocket Money and rewards have also been criticised. At present men get a free issue of tobacco and women sums of money up to 4/- a week. In addition men get payment if they work overtime on the farm. This scale compares very unfavourably with what normally obtains in the hospitals we visit.

Amusements and entertainments are well arranged. Every week there is cinema performance, a dance, and a whist-drive. There is no fixed entertainment on Wednesdays but once a month there is a concert given by the Council for Music in Hospitals and these are very popular. Local and staff concerts are frequent and take place on Wednesdays. Football fell into abeyance because the patients so wished, but the patients play cricket matches against other hospitals. There is a shield which is competed for by the various wards for billiards, table tennis, chess and other indoor games. The supply of daily papers in the wards is excellent.

There is an establishment for three Occupational Therapists (women). At present there is only one trained therapist and a second who is on the point of qualification. This has led to the abandonment of ward classes and I hope that this is only a temporary affair. Good work is done at the main Centre and in the Admission Villa but space is very limited and the classes small. Occupation in the Insulin unit is organised by the Sister-in-Charge. There is one untrained but very experienced male therapist who works with the physical Training Instructor. There are two ward classes but again the numbers are small.

In general I think that the patients' physical, mental and social welfare are cared for well, and the only complaints made to me were about detention. This was, in every case, essential.

In 1950, 143 patients died, 51 men and 92 women giving a mortality rate of 9.4%. This continues to be higher than the average for similar hospitals in the country. Only 26 Post Mortem examinations were made. Since the last visit, six inquests have been held and 35 fractures and other injuries of a more or less serious nature have been recorded. The period concerned is one of about 18 months.

Since the beginning of 1950, there has been no case of typhoid fever or of dysentery and the only infectious disease needing mention is tuberculosis. Of this there were 14 new cases in 1950 with 3 deaths from this cause. I found in the male ward concerned 31 cases in all, of which 9 were active, 7 quiescent and 15 were being investigated. The figures for the women were 3 active, 2 quiescent and 7 for investigation. The reason for the large number of doubtful cases is that a Mass Miniature X-ray Survey was completed in October and some patients need further examination. The results of the survey were 35 suspects, 14 positives, and 6 active cases. This seems a very clear indication of the value of such an investigation in a mental hospital. The conditions in which treatment is carried out are satisfactory and a separate sanitary annexe and a very small kitchen have been provided for the male verandah.

Mantoux testing was offered to the staff but the response from the male staff was poor. All new staff are tested and only tested nurses work with tuberculous patients. Masks and gowns are provided and are used. I suggest that sputum cups which can be destroyed be issued.

I consider that the standard of the sick wards is good and they are well equipped. By far and away the greatest number of illnesses which have to be treated are those associated with senility. There is a good provision of clinical rooms and of fitted hand-basins. I found some misuse of the poison cupboards and it should be made clear to the nurses that those substances specially labelled by the pharmacist and only those, should be stored in these cupboards.

A large number of out-patient clinics are associated with this hospital. Two a week are held at Canterbury and one a week at Margate, Dover, Folkestone, Sittingbourne, Ashford, Ramsgate, and once a fortnight at Deal. This work appears to be particularly well organised in East Kent and I was told that the co-operation of General Practitioners is good.

There is of course a shortage of female nurses, but it is not so severe as in many other hospitals. There are now 100 whole-time male nurses and 60 female, with 130 part-time, of whom 110 are Nursing Assistants. In these different categories 58 men and 49 women are certificated or registered as mental nurses and 7 are also trained in general nursing; there are 8 male and 10 female whole-time Nursing Assistants.

I should like to thank Dr. Shepherd and others of his staff for their help to me during this interesting visit.

(Signed) E. N. BUTLER,

Commisioner of the Board of Control.

There are 27 patients in residence in Stone House Annexe, the only part of this hospital which is in use at present. Since the last visit one patient has been admitted as a transfer. There have been no other changes.

The health of the patients has been remarkably good and since the last visit there have been no infectious illnesses at all. One fracture has occurred in this period.

The men here are now mainly of very advanced age and in view of this it is very creditable that 21 of them are employed, nine of them in farm work. They impressed me as receiving kindly and competent care and attention and I received no complaints at all

The rooms in this villa are very clean and well kept and there is a reasonable state of comfort. I was told a lot of good linen and of other furnishings was destroyed during the war and has not been replaced.

The total number of nurses is 7 and of these one is on night duty with another sleeping on the premises and on call. Six of them are certificated or registered as Mental Nurses and the seventh has passed the preliminary examination.

Painting of the outside of the villa and of the Medical Superintendent's House has been completed, but internal decoration is needed.

Considering the age of this small group of patients a very creditable organisation of amusements and entertainments exists.

The secondary school which has been using part of the main building has left, and it is now empty. Dr. Scott told me of plans to bring these wards into use in three phases. It is hoped that authority will soon be obtained to start on Phase 1 which would make some 100 much needed beds available.

I find that no money is issued to patients either as pocket-money or as reward for useful work. There is however an issue of tobacco and sweets.

I should like to thank Dr. Scott for his help to me today. Apart from running

this hospital his time is very fully occupied with clinics at Canterbury, Sittingbourne and Ramsgate, work at St. Augustine's Hospital, and with domiciliary visits.

(Signed) E. N. BUTLER,

Commissioner of the Board of Control.

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