

Annual report of the Board of Control to the Lord Chancellor : 1949

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LUNACY AND MENTAL TREATMENT ACTS

Annual Report of the Board of Control to the Lord Chancellor

For the Year 1949

Presented pursuant to Act of Parliament

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THE THIRTY-SIXTH ANNUAL REPORT OF THE BOARD OF CONTROL FOR THE YEAR 1949

To the Right Honourable the LORD HIGH CHANCELLOR

My Lord,

In pursuance of section 162 of the Lunacy Act, 1890, we beg to submit the following report:—

Accommodation

At the end of the year 1949 there were 146,228 persons under care under the Lunacy and Mental Treatment Acts, an increase of 1,503 during the year. Of these 142,414 were in hospitals vested in the Minister of Health. The shortage of accommodation continues to be one of the principal handicaps of the Mental Health Service, and it is apparent that additional beds are not being provided in a sufficient number to keep pace with the increase in the demand, which results not from any increase in the incidence of mental illness but from the normal growth of the population of the country.

On 1st January, 1950, the overcrowding in the mental hospitals amounted to approximately 14 per cent. as against 12·2 per cent. on the 1st January, 1949. The effect of the shortage of beds, however, is not to be measured solely in terms of actual overcrowding, serious though that is. But it results, unhappily, in the limitations imposed on voluntary admission, and it is known that several hospitals have declined to receive further voluntary patients on the ground that the available accommodation is scarcely sufficient to provide for certified patients who must be admitted.

Three factors have contributed to this serious situation. In the first place, there were on 1st January, 1950, 2,753 mental hospital beds diverted to other services. This figure compares with 3,034 on the 1st January, 1949. The return of these beds is not proceeding as rapidly as is necessary. But, of the accommodation that has been returned, no fewer than 2,607 beds were awaiting re-conditioning and re-equipment. The figure on 1st January, 1949, was 2,694. Secondly, the total number of new beds provided during the year by the Regional Hospital Boards for patients under the Lunacy and Mental Treatments Acts, was 92. In the third place, 2,279 beds were not in use on 1st January, 1950 through shortage of staff. This shows a slight improvement on 1st January, 1949, when the number of unstaffed beds was 2,689.

Nurses

The shortage of nurses continues and in consequence some beds otherwise available cannot yet be used. The position has improved slightly in total during the year; thus at Mental Hospitals there has been an addition in the year ended 31st December, 1949, of 303 full-time and 618 part-time female nurses, and of 517 full-time male nurses. There results a reduction of the ratio of patients to nurses (2 part-time being counted as one whole-time) from 7·6 to 7·4 for women and from 5·5 to 5·4 for men, over the whole country.

The position, therefore, continues to give rise to anxiety especially as the overall shortage is enhanced by the progressive loss of trained and experienced staff, and the continuance of the service even at its present levels is only possible by the use of less trained persons and by the very substantial use of part-time nurses. These have proved of very great value in meeting the immediate

needs of the situation but their employment presents additional administrative difficulties and moreover their number cannot be expected to continue to increase indefinitely.

An improved scale of salaries for nurses in mental institutions has been agreed after discussion by the appropriate Whitley Council and it is to be hoped that this will assist in encouraging recruitment.

Cultural and Social Activities

The valuable help given by the Women's Voluntary Services, to which reference has been made in previous Reports, was maintained in 1949, and continued to be greatly appreciated. Fifty-six mental hospitals now avail themselves of it. The report of the organization for 1949 briefly indicates the many and diverse activities in which it engages for the benefit of patients. Its work is now extended on request to follow-up visitation of discharged patients and in some cases former patients have been found work in W.V.S. Centres.

The Council for Music in Hospitals has also continued to arrange concerts in mental hospitals, forty-four of which made use of its services.

Interest in the Picture Library Scheme of the British Red Cross Society is extending and thirty hospitals now participate.

It is impossible to evaluate completely the effect of activities of this nature. Apart from their purely therapeutic side, they bring the outside world into what are perforce to some extent closed communities; and it must be of comfort and help to patients to have the assurance that kindly people are willing and anxious to do what they can to introduce into their lives interests and pleasures that might otherwise be out of reach.

Health of Patients

There were fewer cases of tuberculosis arising in the former county and borough mental hospitals than in 1948, the ratio per thousand patients resident being 7.4 compared with 8.9 the previous year; the death rate also fell from 4.7 to 4.2.

Diseases of the enteric group accounted for 3 deaths in an incidence of 36 cases. Gastro-intestinal infections affected 5 patients in a thousand, this being two-thirds of the number affected in 1948. The death rate from the disease was less than one per thousand patients resident.

In the former county and borough mental hospitals 9,805 patients died during the year. The death rate per cent. of the average number resident was 7.43, this being 1.17 above the rate for the previous year and .03 below the mean percentage for the past ten years.

Mental Health Statistics

The introduction of the new health service under the National Health Service Act provided an occasion for reconsidering and bringing up to date the methods of obtaining uniform information about patients admitted to mental hospitals. The value of much of the statistical information obtained by the Board of Control had been affected by the limitations imposed by war. A committee consisting of the two Medical Senior Commissioners with Dr. C. P. Blacker recommended that certain statistics be obtained centrally; and with the concurrence of the Registrar General's Department it was decided that an index card be adopted for the individual returns relating to patients admitted to the mental hospitals of England and Wales. The index cards are sent to the General Register Office for the preparation of punched cards from which the statistics are produced mechanically instead of being prepared from annual returns compiled from the hospital registers.

This index system of statistics was introduced on 1st January, 1949. Concurrently with the introduction of the card system the Board of Control issued new regulations relating to the keeping of Registers relating to patients.

The initial difficulties, mostly of a minor character, have been overcome and we understand from the General Register Office that the system is working smoothly.

Registered Hospitals, Licensed Houses and Nursing Homes

At the end of 1949 there were four hospitals registered by the Minister of Health, sixteen houses licensed by him, and twenty licensed by provincial justices for the reception of persons suffering from mental illness. These were visited during the year by Commissioners of the Board of Control who found them generally satisfactory. The nine nursing homes approved by the Minister of Health for the reception of voluntary and temporary patients were also visited as occasion required and found to be properly conducted.

National Health Service (Amendment) Act, 1949

Section 25 of this Act was designed to clarify the position with regard to payment for medical examinations and certificates or recommendations in the case of health service patients admitted to mental hospitals and mental deficiency institutions. It requires local health authorities to pay the cost of these, except that a practitioner signing a certificate or recommendation is not entitled to a fee for an examination carried out as part of his duty to provide a patient with general medical services or for an examination carried out or any certificate or recommendation given as part of his duty as an officer of a Regional Hospital Board or a Board of Governors of a teaching hospital.

Section 28 empowers the Minister of Health to recover from an in-patient in a hospital who goes out daily to paid work such part of the cost of his maintenance plus any incidental costs as may seem reasonable. It is the practice in mental institutions to arrange with local employers for patients who are convalescent or stabilised to go out to work daily as a form of treatment and the patients may earn several pounds a week. A scheme is in preparation for making deductions from the earnings of such patients; of the remainder, part will be retained by the patient as pocket money and the balance banked on his behalf.

Criminal Justice Act, 1948

The necessary steps to facilitate the operation of this Act were taken during the year. The attention of the hospitals and institutions concerned was drawn to sections 24 and 26, which came into operation on the 27th December, 1948, and to section 64 which came into operation on the 1st April, 1949. Section 24 enables a court of summary jurisdiction to send an offender, on a charge being proved and if satisfied that he is a person of unsound mind and a proper person to be detained, to a mental hospital. Section 26 requires a court of summary jurisdiction, if satisfied that an offence has been committed but that enquiry should be made into the mental or physical condition of the offender before the method of dealing with him is determined, to remand him in custody or on bail for a medical examination and report; it may be a condition of recognizance that the offender shall reside for the purpose of examination in a mental institution. Section 64 contains provisions relating to persons sent to mental deficiency institutions by the Secretary of State under section 9 of the Mental Deficiency Act, 1913.

In accordance with section 62, Broadmoor Institution was vested in the Minister and came under the management of the Board of Control on the 1st April, 1949.

Sections 4 and 74 came into operation on the 1st August, 1949, and were brought to the notice of the hospitals and institutions affected by them, while the Home Office was supplied with particulars of hospitals and clinics suitable for the purposes of section 4. Section 4 empowers a court when satisfied on medical evidence that the mental condition of an offender is such as requires and as may be susceptible to treatment but is not such as to justify his being certified under the Lunacy Act, 1890, or the Mental Deficiency Act, 1913, to include in a probation order a requirement that he shall submit to treatment for a period not exceeding twelve months as a voluntary patient under the Mental Treatment Act, 1930, or as a resident patient in an institution or place approved by the Minister of Health, or as a non-resident patient at such institution or place as may be specified in the order, or under the care of such duly qualified medical practitioner as may be specified in the order. Section 74 enables a requirement as to mental treatment to be inserted, in accordance with section 4, in a supervision order made under the Children and Young Persons Act, 1933, in respect of children and young persons who are brought before a juvenile court as beyond control, in need of care or protection, or for failing to go to school.

The information available indicates that the Courts are making good use of section 4 for both residential and non-residential mental treatment. Section 24 also appears to be used freely in appropriate cases.

Changes in the Board

Miss Ruth Darwin, C.B.E., a Senior Commissioner of the Board of Control, retired on the 30th September, 1949. She was originally appointed as an unpaid Commissioner of the Board in 1921; and when, following the passing of the Mental Treatment Act, 1930, the post of unpaid Commissioner was abolished, she became a part-time Commissioner until 1932, when she succeeded the late Dame Ellen Pinsent as a Senior Commissioner and Member of the Board. Miss Darwin, by her unrivalled knowledge of all aspects of mental deficiency work, and her untiring devotion to its interests, has made an invaluable contribution to the progressive development of the Mental Deficiency Service. Her knowledge and experience were also brought to bear on the general development of community care, which assumed special importance on the integration of the Mental Health Service in the National Health Service.

The Board will greatly miss a colleague to whom they owe so much; and it is fortunate that, by her acceptance of appointment to a Regional Hospital Board, Miss Darwin's services will still be available to the Mental Health Service. To fill the vacancy on the Board of Control, His Majesty, on the recommendation of the Minister of Health, appointed Miss Isabel G. H. Wilson, M.D., F.R.C.P., D.P.M., who had been a visiting Commissioner since 1931.

By Order of the Board,

(Signed) P. BARTER,
Chairman.

(Signed) H. C. BLEAKLEY,
Secretary.

32, Rutland Gate,
Knightsbridge,
London, S.W.7.

June, 1950.

APPENDIX

DISTRIBUTION

The distribution of all patients at the end of the year 1949 may be seen by reference to Tables I and II, but it may be pointed out that 97·3 per cent. of them were resident in hospitals vested in the Minister of Health.

Movement of Patients

Admissions, Discharges, Transfers to other Care and Deaths, in 1949. The following statement includes patients of each status (voluntary, temporary and certified):—

Resident on 1st January	145,779
Direct admissions	59,204
Indirect admissions (excluding re-gradings)	1,379
	206,362

Discharged and Departed:—

Recovered	16,524
Relieved... ..	22,529
Not improved	5,878
By operation of law*	584
“Not now insane”	16
Transferred (under Order) to other care	1,730
Died	11,813
Remained at end of year	147,288
	206,362

* By reason of irregular admission documents, the lapsing of reception orders (Section 38, Lunacy Act, 1890, and Section 7, Lunacy Act, 1891) or discharge after absconding (Section 85 Lunacy Act, 1890).

TABLE II
SUMMARY OF PERSONS SUFFERING FROM MENTAL DISORDER, 1ST JANUARY, 1950
Classified according to Status

Where maintained on 1st January, 1950	Voluntary			Temporary			Certified			Total		
	Males	Females	Total	Males	Females	Total	Males	Females	Total	Males	Females	Total
In Hospitals vested in the Minister of Health:—												
(i) Designated as Mental Hospitals:—												
Former County and Borough Mental Hospitals ...	9,726	11,871	21,597	104	241	345	47,434	63,865	111,299	57,264	75,977	133,241
Former Registered Hospitals ...	204	337	541	7	3	10	218	361	579	429	701	1,130
Former Public Assistance Institutions and Public Health General Hospitals ...	369	503	872	—	3	3	2,793	4,044	6,837	3,162	4,550	7,712
(ii) Teaching Hospitals ...	145	186	331	—	—	—	—	—	—	145	186	331
(iii) Broadmoor Institution ...	—	—	—	—	—	—	688	187	875	688	187	875
In Premises not vested in the Minister of Health but deemed to be Mental Hospitals ...	—	—	—	—	—	—	119	161	280	119	161	280
In Registered Hospitals ...	174	323	497	3	12	15	253	439	692	430	774	1,204
In Licensed Houses:—												
Metropolitan ...	69	219	288	3	8	11	132	306	438	204	533	737
Provincial ...	106	359	465	3	8	11	375	613	988	484	980	1,464
In Hospitals and Nursing Homes approved under the Mental Treatment Act:—												
Hospitals ...	—	—	—	—	—	—	—	—	—	—	—	—
Nursing Homes ...	5	54	59	—	—	—	—	—	—	5	54	59
In Naval and Military Hospitals ...	3	—	3	—	—	—	182	—	182	185	—	185
In Private Single-Care ...	2	2	4	—	—	—	12	54	66	14	56	70
Total ...	10,803	13,854	24,657	120	275	395	52,206	70,030	122,236	63,129	84,159	147,288
Of Total { Private Health Service ...	622	1,441	2,063	17	35	52	1,210	2,247	3,457	1,849	3,723	5,572
{ Broadmoor Patients ...	10,181	12,413	22,594	103	240	343	50,202	67,567	117,769	60,486	80,220	140,706
	—	—	—	—	—	—	794	216	1,010	794	216	1,010

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