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THE LAWN LINCOLN

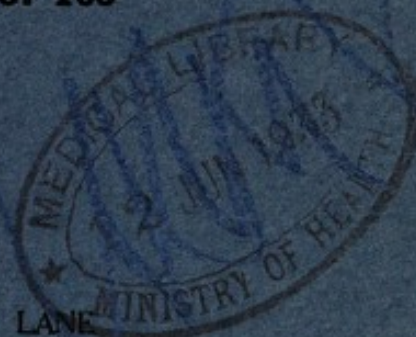
REGISTERED HOSPITAL FOR
MENTAL AND NERVOUS DISEASES

Instituted November 4th, 1819

One Hundred-and-Fourth
Annual Report
: for the Year 1932 :


Telephone - - No. 165

LINCOLN :
DONCASTERS LIMITED, MINT LANE





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The Lawn Hospital, Lincoln

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GOVERNING BODY

Patron :

THE RIGHT HONOURABLE THE EARL OF YARBOROUGH.

President :

MAJOR THE HON. DUDLEY R. PELHAM.

Vice-Presidents :

DR. A. P. RUSSELL.

CAPTAIN J. S. REEVE.

EUSTACE ABEL SMITH, ESQ.

SIR HICKMAN B. BACON, BART.

Governors :

CHATTERTON, THE REVD. CANON, *Chairman.*

NEVILE, MISS M. E., *Vice-Chairman.*

BARLOW, DR. H. C.

BEATSON BELL, MRS.

BROOK, DR. W. H. B.

HILL, J. W. F., ESQ.

KAYE, THE REVD. CANON

MITCHINSON, MISS E.

MINTON, R. C., ESQ.

NEVILE, E. F., ESQ.

SCORER, C. REYNOLDS, ESQ.

SYKES, EUSTACE, ESQ.

TRUSTEES OF REAL ESTATE :

THE RIGHT HONOURABLE THE EARL OF YARBOROUGH.

EUSTACE ABEL SMITH, Esq.

OFFICERS :

Resident Medical Superintendent :

MARY R. BARKAS, M.D., B.S. (LONDON), D.P.M.

Assistant Medical Officer :

MYRA MACKENZIE, M.B., CH.B.

Hon. Chaplain :

THE REV. CANON CHATTERTON.

Secretary & Steward : MR. C. H. BULLIMORE.

Matron : MRS. C. W. GILLINGS.

Auditors :

J. S. STREETS & Co., *Chartered Accountants.*

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FORM OF SUBSCRIPTION OR DONATION (enclosed).

GOVERNORS' REPORT for 1932.

The Report for the year 1931 was the most anxious and depressing one in the history of The Lawn. The dark clouds have now somewhat lifted ; but the sky is still overcast although the prospect is more cheerful. A debit balance at the bank of £1,067 12s. 0d. at the end of 1931 has been turned into a credit balance of £552 12s. 3d. at the end of 1932. Exhaustive investigations were made by a Special Sub-Committee, and their recommendations, accepted by the Governors, have been loyally and fully carried out. The Governors wish to express their deepest gratitude to the Medical Superintendent and her Assistant, to the Secretary and Steward, and to the staff as a whole for the loyal team work which has achieved such a notable result.

At the same time it has to be remembered that, while the buildings and amenities have not been allowed to suffer, (in fact more has been spent in painting and decorating this year than the previous one) no new improvements have been or can be undertaken. As the figures show, we are holding our own for the moment, but we are waiting for more prosperous times for undertaking any work which is not of immediate necessity.

It is greatly to be regretted that the appeal of the Governors for financial help has met with so little outside response. The commercial depression is no doubt chiefly responsible, but once more the Governors venture to renew their appeal, basing it as they do on their deep conviction that no Hospital of this kind is doing a better work than The Lawn, and on the hope that the people of Lincoln and Lincolnshire will get to know it better and take more advantage of its services.

The overhead charges must to a great extent remain stationery while the number of patients fluctuates. The number at present is small, and many of them do not pay the full cost of maintenance. Having reviewed the whole of the finances, the Governors have felt justified in deciding not to close the Hospital. The Governors are further encouraged by the appreciative reports of the Commissioners of the Board of Control, who have visited the Hospital twice during the year, to which they call special attention. They also call attention to the Report of the Medical Superintendent.

Governing Body

The death of Mr. Coningsby Charles Sibthorp on the 9th May, 1932, has broken a long line of service at The Lawn, and the Governors express their regret, sympathy and deep sense of gratitude for the assistance he has given. Mr. Sibthorp became Vice-President in 1872, and in the next year he was appointed Treasurer and also a Trustee of the Real Estate. He continued Treasurer until 1927, a period of no less than fifty-four years. He was also Chairman of the Governors for many years. His deep interest in The Lawn Hospital was manifested in his constant attendance at the meetings, his interest in the patients and his ever ready help. An expression of the Governors' sympathy and regret was sent to his relatives and The Lawn was represented at the funeral.

Sir Hickman B. Bacon became a Vice-President and Mr. C. Reynolds Scorer a Governor in January, 1932 ; and the Board have been very glad of their help and advice during the year.

The Annual Meeting in April was open to the Press, and a full account of the proceedings reported in many

papers. It is hoped that this will lead to The Lawn, its work, purpose and position becoming better known and appreciated. In the unavoidable absence of the Patron, Lord Yarborough and the President, Major the Hon. Dudley Pelham, Mr. Eustace Abel Smith took the Chair and in his address gave a detailed survey of the year's work, the present position, and the future prospects of The Lawn. He also made an appeal for donations and subscriptions. At this meeting the retiring Chairman and Vice-Chairman, The Revd. Canon Chatterton and Miss M. E. Nevile, were re-elected together with the Auditors Messrs. J. S. Streets & Co.

Staff.

Owing to the illness of the Medical Superintendent's father the Governors granted Dr. Barkas six months leave to visit him in New Zealand, but unfortunately he died before her arrival. The Governors record their deepest sympathy with Dr. Barkas in her bereavement; they anticipate with much pleasure her return in the near future. Dr. Mackenzie has undertaken the supervision of the Hospital in the interim and with the assistance of Dr. Yates everything has continued its usual course, the greatest skill and experience being always available for the patients. The Governors wish to express their appreciation of Dr. Mackenzie's services. The Chaplain's duties have been continued in an honorary capacity by the Chairman to whom the Board is extremely grateful.

Structure

The general repairs to the structure of the hospital have received daily attention by permanent employees. External repairs and painting have been begun, one block being completed in the autumn. It was found necessary to renew the Kitchen range, the old equipment being

worn out and wasteful in coal consumption. The range was replaced by three modern anthracite-burning cookers at a cost of £270. The figures show that a considerable saving in fuel is being affected.

Charitable Relief

Out of 100 patients treated during the year 40% were granted rates below the standard charge of £4. 4s. 0d. weekly. Of these 18 were treated for the full 52 weeks upon this basis, their total contributions falling short of the £4. 4s. 0d. rate by £1,596. 8s. 0d., *i.e.* an average reduction of £1. 14s. 1d. each per week.

Another 52 patients were treated for shorter periods totalling 421 weeks, or an average of 19 weeks each, at reduced rates amounting in all to a reduction of £620. 0s. 8d., *i.e.*, an average reduction of £1. 9s. 8d. each per week.

The total sum of £2,216. 8s. 0d. thus granted in reductions below the £4. 4s. 0d. rate represents an expenditure by the hospital of £1,319. 8s. 2d. needed to supplement the contributions received, the actual average of maintenance expenses for the year being £3. 10s. 9d. per patient per week.

The proportion paying above and below their cost are shown as follows :—

	1st Jan., 1932.	1st Jan, 1933
Paying above £4. 4s. 0d. per week	11	8
Paying at £4. 4s. 0d. per week	17	20
	—	—
	28	28
Total paying below cost	29	32
	—	—
Total number of Patients	57	60
	—	—

As a result of the appeal for donations and subscriptions a total of £113. 12s. 4d. has been received. The results may be summarised as follows :—Governors £47. 15s. 0d. ; Officers of The Lawn £14. 12s. 0d. ; Relatives of past and present Patients £35. 1s. 4d. ; General Public £16. 4s. 0d. The Governors also gratefully acknowledge a legacy of £100 from the late Mr. C. C. Sibthorp. A list of the Donations and Subscriptions will be found on a subsequent page in this Report.

The Governors close their report on a note of thankfulness and hope ; thankfulness for the improved financial position of the Hospital, and hope that never again may there be any fear of the necessity for closing an institution, the only one of its kind in the County, which is bringing ease and in many cases recovery to those suffering from mental illness.

T. H. CHATTERTON,
Chairman of the Governors.

Abstract of Accounts shewing Income and Expenditure pursuant to the Lunacy Acts, 1890, s. 234

1932				EXPENDITURE					
				£	s	d	£	s	d
To Salaries of Officers	...	...	...	...	...	...	1605	5	1
„ Wages of Nursing Staff	...	...	...	...	...	...	1625	2	5
„ Wages of Domestic Staff	...	...	...	...	...	...	546	5	7
„ Pensions	...	...	...	591	15	0			
Less Nett Income from Pension Fund	...	...	...	131	13	6			
							460	1	6
„ National Insurance	...	...	...	...	...	...	135	7	5
„ Provisions	...	...	...	...	...	...
„ Wines and Spirits	...	...	...	...	...	...	6	2	6
„ Housekeeping Incidents, including Cleaning Materials	...	...	...	...	...	...	121	16	7
„ Medicine and Surgical Appliances	...	...	...	...	...	...	111	11	10
„ Amusements, including Newspapers, Books, etc.	...	...	...	...	...	...	97	13	6
„ Carriage, Portage and Travelling Expenses	...	...	...	...	...	...	4	8	0
„ Garden Expenses :—									
Wages	...	...	...	225	2	1			
Purchases and Expenses	...	...	...	85	8	1			
							310	10	2
„ Laundry Expenses :—									
Wages	...	...	...	118	5	9			
Purchases and Expenses	...	...	...	71	2	1			
							189	7	10
„ Water Charges	...	...	...	...	...	...	158	3	6
„ Insurances	...	...	...	...	...	...	90	6	4
„ Rates	...	...	...	...	...	...	355	19	2
„ Rents	...	...	...	...	...	...	26	0	0
„ Heating and Lighting, viz. :—									
Boilerhouse Wages	...	...	...	69	4	0			
Gas, Electricity and Coal	...	...	...	1051	12	11			
							1120	16	11
„ Stationery, Postages, Printing and Advertising, etc.	...	...	...	...	...	...	218	3	9
„ Cost of launching Appeal for Funds	...	...	...	...	...	...	14	7	0
„ Telephone Charges	...	...	...	...	...	...	33	0	2
„ Income Tax, Schedule A, 1932/33 and Land Tax	...	...	...	...	...	...	18	14	11
„ Bank Charges	...	...	...	...	...	...	24	1	6
„ Clothing of Attendants and Servants	...	...	...	...	...	...	1	8	6
„ Repairs and Renewals of Inventory	...	...	...	...	...	...	456	18	4
„ Repairs and Decorating of Premises	...	...	...	...	...	...	98	19	0
„ Wages of Painter	...	...	...	...	...	...	182	0	0
„ Wages of Odd Work people	...	...	...	...	...	...	65	11	1
„ Balance, carried down, being excess of Income over Expenditure	...	...	...	...	...	...
							1842	15	5
							£13,022	1	9
To Debit Balance brought forward 1st January, 1932	...	...	...	...	...	...	607	0	1
„ Depreciation Buildings	...	...	...	...	...	...	426	19	4
„ „ Plant	...	...	...	...	...	...	244	11	0
„ Credit Balance carried forward 31st December, 1932	...	...	...	...	...	...	664	5	0
							£1,942	15	5

during the year ended 31st December, 1932, furnished
and Rule 42 of the Commissioners in Lunacy.

1932					INCOME					
					£	s	d	£	s	d
By Maintenance Fees charged to Patients	...	...	...	...	121	98	9 6			
„ Laundry charged to Patients	...	...	...	...	509	4	6			
								12617	14	0
„ Sale of Swill, Rags, etc.	...	...	...	...				27	14	9
„ Discounts receivable	...	...	...	...				143	7	7
„ Donations and Subscription	...	...	...	...				113	12	4
„ Dividends received	...	...	...	...				99	14	5
„ Bonus on Conversion of War Stock	...	...	...	...				7	7	7
„ Rents received	...	...	...	...				7	5	0
„ Sale of Uniform Material	...	...	...	...				5	6	1

								£13,022	1	9
By Balance brought down	...	...	...	...				1842	15	5
„ Legacy—C. C. Sibthorp, deceased	...	...	...	...				100	0	0
								£1,942	15	5

44 SILVER STREET,

LINCOLN,

19th January, 1933.

The Governors, The Lawn, Lincoln.

MY LORD, LADIES AND GENTLEMEN,

We have audited the Books and Accounts of the Hospital for the year ended 31st December, 1932, and beg to report that we have found the same correct and duly vouched.

The Title Deeds of the Freehold Property and Certificates for the investment of 3½% War Stock have been produced for our inspection.

We have received all the information, explanations and assistance we have required and have pleasure in reporting that the Accounts have been carefully and accurately recorded.

We are,

My Lord, Ladies and Gentlemen,

Yours faithfully,

J. S. STREETS & Co.,

Chartered Accountants.

REPORT OF THE MEDICAL SUPERINTENDENT for the Year 1932.

MY LORD, LADIES AND GENTLEMEN.

I have the honour to present the following report of the year 1932, in the regretted absence of Dr. Barkas, who is in New Zealand. The statistical tables also presented may be found of interest.

Admissions

There have been 43 admissions in all during 1932, two more than in the preceding year. Of these 24 were certified and 19 were voluntary patients. The admission figure remains large considering that the average number of patients resident during the year was only 61. This year, unlike the two previous years, the certified outnumbered the voluntary patients. In 1930 and 1931 nearly twice as many voluntary as certified patients were admitted. No voluntary patient has been certified and remained in the hospital.

Of the forms of mental illness shown in Table II, melancholia accounted for the greatest number of admissions, namely 12, while the cases of confusional insanity numbered 11 and delusional insanity 9. The commonest aetiological factor, as might be expected, was prolonged mental stress.

As last year, no temporary patient has been admitted, though one or two of the acute confusional cases might perhaps have been sent in as such with advantage.

Discharges

Sixteen certified and 18 voluntary patients were discharged during the year. Of the 16 certified patients 4 recovered, 8 left relieved and 4 were not improved.

Two certified patients were transferred to public mental hospitals for financial reasons, one not improved and one relieved, and one patient was transferred because a change was considered to her advantage. Of the 4 certified patients discharged not improved, one, whose papers were irregular, was discharged by order of the Board of Control, remained in hospital for her own safety, and was recertified.

Among the 18 voluntary patients discharged were 8 recoveries, one of whom relapsed later but did not return to hospital. Eight patients left relieved and 2 not improved. One of the patients discharged relieved walked out of the hospital with a relative and did not return.

Deaths

There were 6 deaths during the year, 3 being certified patients. All the deaths were from natural causes and all except 2 occurred in patients over 70 years of age.

Patients—General

The general health of the patients has been good and there has been no epidemic disease or case of serious accident. Two patients were admitted with tuberculosis, one pulmonary and the other in the last stages of surgical tuberculosis.

As regards treatment, occupational therapy plays an important part and receives much attention in this hospital. Much more could be done in this way, however, were funds available for providing materials for greater diversity of occupations and for obtaining the services of a trained occupations officer. Owing to their small numbers occupations for the gentlemen are difficult to organize, but it is hoped to do more in this way in the near future.

In a hospital of this size much individual attention can be given to each patient, changing mental states noted as they arise and the right moment seized for giving guidance and help. In many cases there seems to be a point where if only the right impetus can be given to the patient and his attention turned in the right direction he goes on towards recovery, but once that point is passed, the psychological moment missed, he retreats farther and farther away from reality into his own world of fantasy.

As in former years, physical exercises and folk-dancing have been found very beneficial. Again the hospital has been most fortunate in entertainments provided by kind friends, and at Christmas the President again gave us a Christmas Tree. During the summer several garden parties were held as well as small picnics, and during the winter there have been whist drives and dances. Many of the patients go out on parole into the City for shopping or into the country for walks, and many more go out regularly, accompanied by nurses, for walks and drives.

Structure

A beginning has been made with the painting of the exterior of the hospital, and the usual painting and decorating of the interior has been carried on during the year. The much-needed decoration of the nurses' flat has been begun and when completed will add greatly to its amenities. A suitable nurses' home at a convenient distance from the hospital is urgently required. Under existing circumstances the nursing staff when off duty are unable to get away from sight and sound of the patients. Unfortunately, for this and many other greatly-to-be-desired improvements, the necessary funds are lacking.

The patients' sitting-rooms and galleries are kept bright and cheerful with open fires and a constant supply of plants

and flowers from the greenhouses, while hand-woven cloths, rugs and mats provided by the occupation department contribute to the pleasing effect.

It has been found impossible to provide verandahs for the gentlemen and for the acute ladies' ward, but it is hoped that an inexpensive shelter may shortly be erected in the acute ladies' garden. During last summer several patients to their great advantage spent many hours in bed in this garden, when weather permitted. With a shelter it would be possible for many more hours to be so spent. The vitaglass verandah is a great asset to the border-line and convalescent ladies' ward, being used for many purposes during the summer, and patients have been able to sleep on it even during the winter.

The anthracite-burning cookers installed at the end of the year are very successful in saving fuel and add very much to the cheerful and clean appearance of the kitchen. They are perhaps not so fool-proof as an ordinary range and intelligent management is required to obtain the best results.

It is a matter for thankfulness to all who have the welfare of this hospital at heart that its prospects are so much brighter at the end of this year. The loyal co-operation of all connected with the hospital, especially in continuing during this year the various economies begun in the previous one, has greatly contributed to this happy result. Brighter prospects encourage plans for the future. The hospital is fortunate in having as Medical Superintendent a woman of exceptional ability whose bent is towards the psychological treatment of mental disease. I hope it may be possible in the future to free Dr. Barkas from much of the administrative work and thus allow her the time required for giving special treatment on analytic lines. Neurotic, border-line and perhaps certain kinds of psychotic cases would specially

benefit by this form of treatment. If developed on these lines the hospital would offer exceptional advantages to such cases and in time might specialize in them. Dr. Barkas had some such plan in mind before her departure.

I wish to express my deepest sympathy with Dr. Barkas in her bereavement. All in the hospital look forward to her return and she will be warmly welcomed.

I wish to thank all the officers and staff, particularly the Secretary and Steward, Mr. C. H. Bullimore, for their loyal and devoted work for the hospital throughout the year. I would also thank my assistant, Dr. Irene Yates, for her able help.

Finally I desire to express my deep gratitude to the Governors for their help and support.

I am, My Lord, Ladies and Gentlemen,

Your obedient Servant,

MYRA MACKENZIE,

Acting Medical Superintendent.

REPORT OF THE COMMISSIONERS OF THE BOARD OF CONTROL.

THE LAWN, LINCOLN,
April 27th, 1932

Visitors' Book

We have to-day paid the first visit of the year on behalf of our Board to this Hospital, and are glad to find that there has been an increase of the number of patients since the beginning of the year.

During 1931 the following were :—

			M.	F.	Total
Admitted.	Voluntary	....	10	17	41
	Certified	....	5	9	
Departed or discharged	Voluntary	....	8	17	40
	Certified	....	5	10	
Died	Voluntary	....	—	1	5
	Certified	....	3	1	

The average number in residence last year was 58 patients.

Since the commencement of this year there have been :

			M.	F.	Total
Admitted.	Voluntary	....	2	7	18
	Certified	....	2	7	
Departed or discharged,	Voluntary	....	2	2	6
	Certified	....	1	1	
Died.	Voluntary	....	1	2	4
	Certified	....	—	1	

There are to-day on the books the names of 65 patients—16 gentlemen and 49 ladies ; of these 6 and 15 respectively are on a Voluntary footing. There have not as yet been any temporary patients here.

Two ladies are away on leave of absence. We have seen all the other gentlemen and ladies, and satisfied ourselves

as to the status and circumstances under which they are residing here. To one lady we have given a private interview.

We found the patients on both sides of the Hospital receiving proper medical and nursing care and attention amid very comfortable and homelike surroundings. Their rooms were very tidy and well kept.

The general health of the hospital is good. There have been a few cases of influenza, and to-day none of the patients whom we found confined to bed were seriously ill. All the five deaths since the last visit six months ago were from natural causes.

We are glad to see that importance is given to occupational therapy. Several of the ladies were engaged in wool rug making, and we have seen some of the finished articles.

We have unfortunately missed seeing Dr. Mary Barkas, as she has just gone away on a holiday, but we have received every assistance during our visit from Dr. Myra Mackenzie.

We are glad to learn that having adopted certain suggestions of economy, which have been made to the Committee, and which have not curtailed the amenities provided for the patients, the immediate economic crisis with which the Hospital was faced, has for the time been tided over. We hope that the appeal for public subscriptions which the Committee are making in their Annual Report will be successful, as we are fully aware of the good work that has been carried on for so many years at this Hospital, and the closing of it would be a calamity.

(Signed) B. T. HODGSON,
S. E. GILL,
Comms. of the Board of Control.

Visitors' Book

We have this afternoon paid the second visit of the year on behalf of our Board to this Hospital, and have again been unfortunate in missing Dr. Barkas, as she has been given six months leave to go to New Zealand on private affairs, and left on the 21st of last month.

From statistics furnished to us we learn that since the 1st of January this year there have been :—

	M.	F.	M.	F.	Total
Admitted—Voluntary	5	13	8	31	39
„ Certified	3	18			
Transferred to other care					
„ Certified			1	3	4
Departed—Voluntary	5	13	7	21	28
Discharged—Certified....	2	8			
Recovered—Voluntary	3	5	4	8	12
„ Certified	1	3			
Died—Voluntary	1	2	1	5	6
„ Certified	—	3			

The above changes leave on the books the names of 15 gentlemen and 43 ladies, of whom 6 of the former and 11 of the latter are on a Voluntary footing. There are no temporary patients, nor have there been any as yet. One lady is away on leave. We have seen and spoken to all the others who are in residence, and are satisfied that they are receiving proper medical and nursing care and attention. Since our last visit two ladies have died, both from natural causes. The general health of the Hospital is good, and there has been no serious illness during the summer.

Divine Service is held in the Hospital on Sunday mornings, and is usually attended by 7 of the gentlemen, and 12 of the ladies. Five of the gentlemen and 25 of the ladies are generally present at the associated entertainments, such as dances, concerts, and whist drives. We saw some good results of the occupational therapy which is carried on, such as rug making, and weaving. Parole beyond the grounds is given to one gentleman and two ladies. Three of the gentlemen and 13 of the ladies walk out beyond the Hospital attended.

The fabric of the Hospital is well maintained, and the patients' rooms are well kept, and are comfortable.

The average weekly cost of maintenance was £4 7s. 6d. ; 15.53 per cent of the patients pay over that amount, 65.52 per cent over 42s., and up to the cost of maintenance, 15.51 per cent from 21s. to 42s. and 3.44 per cent 21s. and under.

The nursing staff consists of 8 male and 20 female nurses for day duty and one man and 5 female nurses for night. Two of the women nurses are certificated or registered in mental nursing.

Dr. Myra Mackenzie is now in charge of the Hospital, and has accompanied us during our visit. She has the assistance of Dr. Irene Yates during Dr. Barkas' absence.

(Signed) B. T. HODGSON,
S. E. GILL,
Commrs. of the Board of Control.

TABLE II.

Shewing Forms of Mental Illness in Certified and Voluntary Patients admitted in 1932, including Transfers.

FORM OF MENTAL ILLNESS	PATIENTS						TOTAL		
	CERTIFIED			VOLUNTARY			M	F	Total
	M	F	Total	M	F	Total			
Confusional Insanity	3	4	7	2	2	4	5	6	11
Primary Dementia	...	1	1	...	2	2	3	3	6
Mania—Recurrent	...	2	2	...	...	...	2	2	4
Melancholia—Recent	...	3	4	2	3	5	3	4	7
Melancholia—Re-current	1	1	2	1	...	2	2	1	3
Alternating Insanity	1	1	2	...	...	...	...	...	...
Delusional Insanity—Systematised	...	4	4	...	2	2	...	6	10
Delusional Insanity—Non--Systematised	...	2	2	...	1	1	3	1	4
Obsessional Neurosis	...	1	1	...	1	1	1	2	3
Senile Dementia	...	...	...	...	...	...	...	...	...
Anxiety Hysteria	...	...	...	...	2	2	...	2	2
TOTALS	5	19	24	5	14	19	10	33	43
...

TABLE III.

Shewing Principal Aetiological Factor in Certified and Voluntary Patients admitted in 1932, including Transfers.

PRINCIPAL AETIOLOGICAL FACTOR	PATIENTS						TOTAL		
	CERTIFIED			VOLUNTARY			M	F	Total
	M	F	Total	M	F	Total			
Insane heredity	1	2	3		3	3	1	5	6
Neurotic Heredity	...	1	1		1	1	1	1	1
Alcoholic Heredity	...	2	2				2	2	2
Deprivation of Sight	...								
Deprivation of Hearing	...				1	1			1
Climacteric	...								
Senility	...								
Pregnancy	...								
Sudden Mental Stress	...								
Prolonged Mental Stress	...	2	2	4		7	6	5	11
Physical over exertion	...					2		2	2
Toxaemia	...								
Influenza	...								
Operation	...	2	1	3			2	1	3
Rheumatism	...								
Unknown	...		2	2		3		1	5
TOTALS	...	5	19	24	5	14	10	33	43

TABLE IV.

Shewing the length of Residence of those discharged Recovered, and Relieved, including Transfers during the year ended 31st December, 1932, of Certified and Voluntary Patients.

LENGTH OF RESIDENCE	CERTIFIED PATIENTS						VOLUNTARY PATIENTS						TOTAL					
	RECOVERED			RELIEVED			RECOVERED			RELIEVED			RECOVERED			RELIEVED		
	M	F	TOT'L	M	F	TOT'L	M	F	TOT'L	M	F	TOT'L	M	F	TOT'L	M	F	TOT'L

Under 1 month	...	...	...	...	1	1	2	...	2	...	...	...	2	...	2	...	1	1
1 month and under 3 months	1	1	2	1	3	4	1	1	2	1	1	2	2	2	4	2	4	6
3 months and under 6 months	...	...	...	1	1	2	...	1	1	...	2	2	...	1	1	1	3	4
6 months and under 12 months	...	2	2	...	1	1	...	3	3	1	2	3	...	5	5	1	3	4
1 year and under 2 years	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
2 years and under 3 years	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
3 years and under 5 years	...	...	...	...	...	...	...	...	...	...	1	1	...	...	...	...	1	1
5 years and over	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
	1	3	4	2	6	8	3	5	8	2	6	8	4	8	12	4	12	16

TABLE V. (*Certified and Voluntary Patients*).
Shewing the Ages of those Admitted, Discharged Recovered, and Died during the year 1932,
and of those remaining on the 31st December, 1932.

PATIENTS.												
AGES OF PATIENTS.	ADMITTED			RECOVERED			DIED			RESIDENT ON 31ST DEC., 1932.		
	M	F	TOTAL	M	F	TOTAL	M	F	TOTAL	M	F	TOTAL
16 years to 19 years ...	...	2	2	1	...	1	...	...	...	...	1	1
20 years to 24 years ...	...	...	...	...	1	1	...	...	...	2	1	3
25 years to 34 years ...	1	9	10	...	1	1	...	...	...	1	4	5
35 years to 44 years ...	2	10	12	1	3	4	1	...	1	2	6	8
45 years to 54 years ...	3	3	6	2	1	3	...	1	1	4	6	10
55 years to 64 years ...	2	3	5	...	1	1	...	...	...	4	13	17
65 years to 74 years ...	2	5	7	...	1	1	...	1	1	3	10	13
75 years and upwards	...	1	1	...	...	...	...	3	3	1	2	3
TOTALS	10	33	43	4	8	12	1	5	6	17	43	60
MEAN AGE	52	44	46	40	49	43	37	74	68	52	53	53

THE LAWN, LINCOLN.

Registered Hospital for Mental and Nervous Diseases.

Objects of the Hospital.

The Lawn was founded in 1819 by voluntary subscriptions, and its object is to provide accommodation for men and women of the educated classes having only moderate means, who would appreciate comforts approximating to their home surroundings, and the individual attention that is possible only where numbers are limited. Its aim has always been to supply the best conditions possible at a charge which merely covers the actual cost of treatment, and to help those unable to pay even this by supplementing from its charitable funds what they can themselves contribute. Such grants in aid are given in preference to residents of Lincolnshire.

The Institution is a Registered Hospital, not a private speculation, It is conducted by a Board of Governors, whose whole aim is to promote the comfort, well-being and enlightened treatment of the Patients, and who have no pecuniary interest in its prosperity. Any surplus funds are utilised either in charitable grants or in improving the amenities of the Hospital. A Meeting of the Governors is held at the Hospital on the last Thursday in each month at 12 o'clock noon.

The Hospital stands in extensive grounds on the southern slope of the hill-top near the Cathedral and Castle, combining the advantages of country and town ; fresh air, sunshine, and a free outlook over a wide expanse of country, with easy access to the City and its opportunities for social contacts.

Nervous and Mental Disorders, like other forms of ill-health, are most likely to yield to treatment if this is obtained early, and as far as possible at a stage when the patient is co-operative and desirous of cure. Any patient who wishes for treatment in the hospital can be admitted without any formality beyond signing a statement to that effect, and may leave after giving 72 hours notice of such intention. Patients incapable of such co-operation in treatment must be certified as private patients, and the responsible relative who acts as petitioner has the right to discharge them at any time.

Full particulars and forms which must be completed before admission may be obtained from the Resident Medical Superintendent, to whom all correspondence must be addressed. It is very desirable that when enquiries are made they should be accompanied by a report from the patient's medical attendant, to avoid delay in deciding whether a suitable vacancy is available for the particular requirements of the case.

Admission.

After it has been ascertained that a suitable vacancy is available, a patient can be admitted either as a Voluntary, or as a Private Patient on a Reception Order ; in cases of extreme urgency, where the Reception Order cannot be obtained immediately, an Urgency Order may authorise admission for seven days or pending completion of the Reception Order.

In all cases a relative or friend must undertake in writing to be responsible for the removal of the patient if requested and for expenses the Hospital has been authorised to incur on behalf of the patient. This relative must keep the Medical Superintendent notified of any change of address, and be available when called upon to make any arrangement for the patient, or appoint a representative should he cease to be available.

Voluntary Patients are required to sign before admission an application stating that they wish to enter the hospital for treatment, and must understand that they are at liberty to leave at any time after giving the Medical Superintendent 72 hours notice in writing that they wish to do so. The relative responsible will then be notified. This application is usually signed at the hospital, but in special cases it may be sent to be signed in the presence of the patient's usual medical attendant, who must witness the signature and certify that the patient understood its purport, and signed it voluntarily. Voluntary Patients must be capable of expressing volition to accept treatment and willing to apply for admission themselves.

In the case of a **Certified Patient**, the following forms must be completed before admission and can be obtained from the Medical Superintendent.

- I. **STATEMENT AND PETITION.** A responsible person over 21 years old (and if possible a relative) *who has seen the Patient within 14 days before the presentation of the Petition* must complete and sign a *Statement of Particulars* about the patient, and a *petition* to a judicial authority asking for an order to be made authorising the patient's admission to the hospital.
- II. **TWO MEDICAL CERTIFICATES** on separate sheets, signed by two Medical Practitioners, who must have examined the Patient separately *not more than seven clear days* previously to the presentation of the Petition. (One of the Certificates should, if possible, be signed by the usual Medical Attendant ; if not possible, the reason must be stated in the Petition).

III. ORDER FOR RECEPTION. The Petition, accompanied by the Statement and Certificate, must be placed before a County Court Judge or Stipendiary Magistrate, or a Justice of the Peace specially appointed, who then, if he thinks fit, with or without seeing the patient, will sign the form of Order for the Reception of the patient. Admission can take place within *seven clear days after the date on which the Petition Order was signed*.

In cases of extreme urgency a Patient can be received on an Urgency Order, signed by a relative, if possible, and accompanied by a Certificate signed by a Medical Practitioner, both of whom must have seen the patient *within two clear days* : the patient can then be detained for seven days while the usual Reception Order is being completed.

"Chancery Patients" can be received upon an order of the Committee of the person, with an office copy of the order appointing such Committee.

The *Transfer* of a patient from another Institution to this Hospital requires an Order from the Commissioners of the Board of Control, Caxton House West, Tothill Street, London, S.W.1, and this may be obtained by the Petitioner or other responsible person, who should first consult the present medical attendant of the patient as to the advisability of transfer and the necessary procedure.

Where any difficulty occurs in conducting patients to the Hospital the Medical Superintendent may send two nurses for the purpose ; all expenses and a fee according to the time required, being paid by the patient's representatives. In such cases the Urgency or Reception Order should be sent in advance, or preferably brought by the Petitioner, who can then give the history of the case and learn whether the documents are in order, as otherwise the patient could not be admitted.

Discharge of Private Patients.

On the *recovery* of a patient notice thereof will be sent to the Petitioner or responsible relative, and the patient will be discharged within seven days from the date of such notice if not previously removed.

Should the petitioner be dead or incapable of exercising these rights the nearest of kin or the person who made the last payment may do so.

The Petitioner has the right to authorise the discharge of a patient whether recovered or not, by giving directions in writing to that effect, except in cases where the Medical Superintendent certified that the patient is dangerous and unfit to be at large, when the consent of the Commissioners is necessary.

ABSENCE OF LEAVE on trial may be granted by the authority of two Governors on the recommendation of the Medical Superintendent and with the approval of the Petitioner ; if the patient does not return at the end of the period for which leave is granted a medical certificate stating, that detention in the hospital is no longer necessary must be sent.

Payments.

The usual charge for board, lodging, medical attendance, and ordinary nursing care is from £5 5s. per week upwards according to the requirements of the case for the first three months, afterwards £4 4s. per week, and upwards. On admission, a deposit in advance is required to cover this charge to the end of the current quarter and for six weeks beyond. The payment in advance for maintenance is renewed quarterly. A charge of £2 2s. per quarter in addition is made for laundry.

Extra fees are charged by agreement for private sitting-rooms, special attendance, special nursing, etc.

One fortnight's payment shall be required in any case if the duration of stay shall be less than a fortnight from admission.

Arrangements for admission at a weekly rate lower than this are made only under special circumstances, which must be submitted by the friends of the patient to the Board of Governors, with a full confidential statement of the circumstances. The Governors may then at their discretion make a grant in aid to supplement the amount which can be paid on behalf of the patient. Such grants from the charitable funds of the hospital are given in preference to residents of Lincolnshire, and are made for not more than six months at a time.

A statement is sent by the Chairman after the first monthly meeting of the Board of Governors following the admission of a patient, setting forth the rate agreed upon by the Governors and the state of the account, after which the usual quarterly statement will be sent. Where the patient on or after admission is found to require special individual nursing attention in addition to that ordinarily provided, the responsible relative will be notified that an extra charge for this is found necessary, and will be asked to authorise this or remove the patient. Such charge will be made only for the periods during which the special nursing is required.

The responsible relative is also requested to authorise such expenditure as may be desired for the patient on drives, amusements outside the hospital, wines and spirits, tobacco, and other incidentals. It is requested that pocket money should not be sent or given to the patient, but merely an authority to the Medical Superintendent to advance such sums as it is desired for the patient to have to spend.

A sufficient supply of clothing suitable to the patient's needs and position must be sent with the patient and marked with the full name. When this supply requires to be renewed, a list of requirements will be sent to the responsible relative, who must provide what is needed or authorise its purchase on behalf of the patient. In the latter case the expenditure incurred will be charged in the accounts and if no authorisation is given what is necessary will be purchased and so charged and the person responsible for payments will be liable for the amount expended.

The friends of patients may call in any of the regular faculty in consultation with the Medical Superintendent. In case of Medical or Surgical difficulty, or severe illness, or at the request of friends of patients, the Medical Superintendent may call in the assistance of any Physician or Surgeon for consultation and report the same to the next Board. If professional assistance be called in under such circumstances the expense shall be charged to the patient's account unless otherwise determined by such Board.

A *fortnight's notice*, or payment in lieu thereof, is required on the removal of a patient, unless the Governors shall direct otherwise. On the removal or death of a patient the amount due to the hospital is deducted from the moneys in hand and the surplus returned, except in cases where removal takes place within three months of admission, contrary to the advice of the Medical Superintendent. In all cases a minimum of a fortnight's maintenance will be charged.

Should the relatives fail to make the payments at the proper times after the account has been presented, and continue to default after the deposit in advance has been exhausted, the patient may be deemed a rate-aided patient and the Medical Superintendent may apply to the judicial authority to order his removal to a public institution, after notifying the petitioner of such intention.

During *leave of absence* for more than one week the usual maintenance charge may be suspended or reduced at the discretion of the Governors.

Rules about Visiting, Correspondence, etc.

All correspondence about patients must be addressed to the Medical Superintendent, not to individual members of the staff.

Voluntary Patients receive and send letters without any supervision.

Certified patients may send letters unopened to the Petitioner and to certain official persons set forth in a notice accessible to them, but other letters may be forwarded only at the discretion of the Medical Superintendent.

Parcels sent to patients must not contain knives, scissors, matches, or anything that might be a source of danger.

Visiting.

In most cases, visits are not allowed until at least a fortnight after admission, after that time they will be allowed except when the Medical Superintendent deems it prejudicial to the patient. It should be

remembered that in many cases of mental and nervous disorder the relatives and friends often evoke emotional reactions which may be harmful or distressing to the patient or recall the environment and circumstances in which a breakdown has occurred, so that visits may hinder progress. The opinion of the petitioner or responsible relative as to the advisability of visits from other individuals will be taken into consideration in deciding whether visitors shall see any patient.

VISITING HOURS are from 11 a.m. to 1 p.m. and 3 p.m. to 5 p.m. on weekdays. On Sundays or at other hours visits are permitted only if arranged by previous appointment. No visitors are allowed on Christmas Day or Good Friday. During the visiting hours a medical officer can always be interviewed if the visitor so wishes, or at other times by appointment.

Visitors must not give anything to the patients without the permission of the Medical Officer ; articles which might be used for self-injury must not be taken into the wards or visiting rooms.

Visitors must not take out of the Hospital any letters or parcels from patients to be posted or otherwise transmitted, unless the Medical Superintendent gives special permission in each case.

The patient's usual medical attendant may visit at any time, if the relatives so desire, and the Medical Superintendent will welcome the opportunity of discussing the case with him.

Rules against Gratuities.

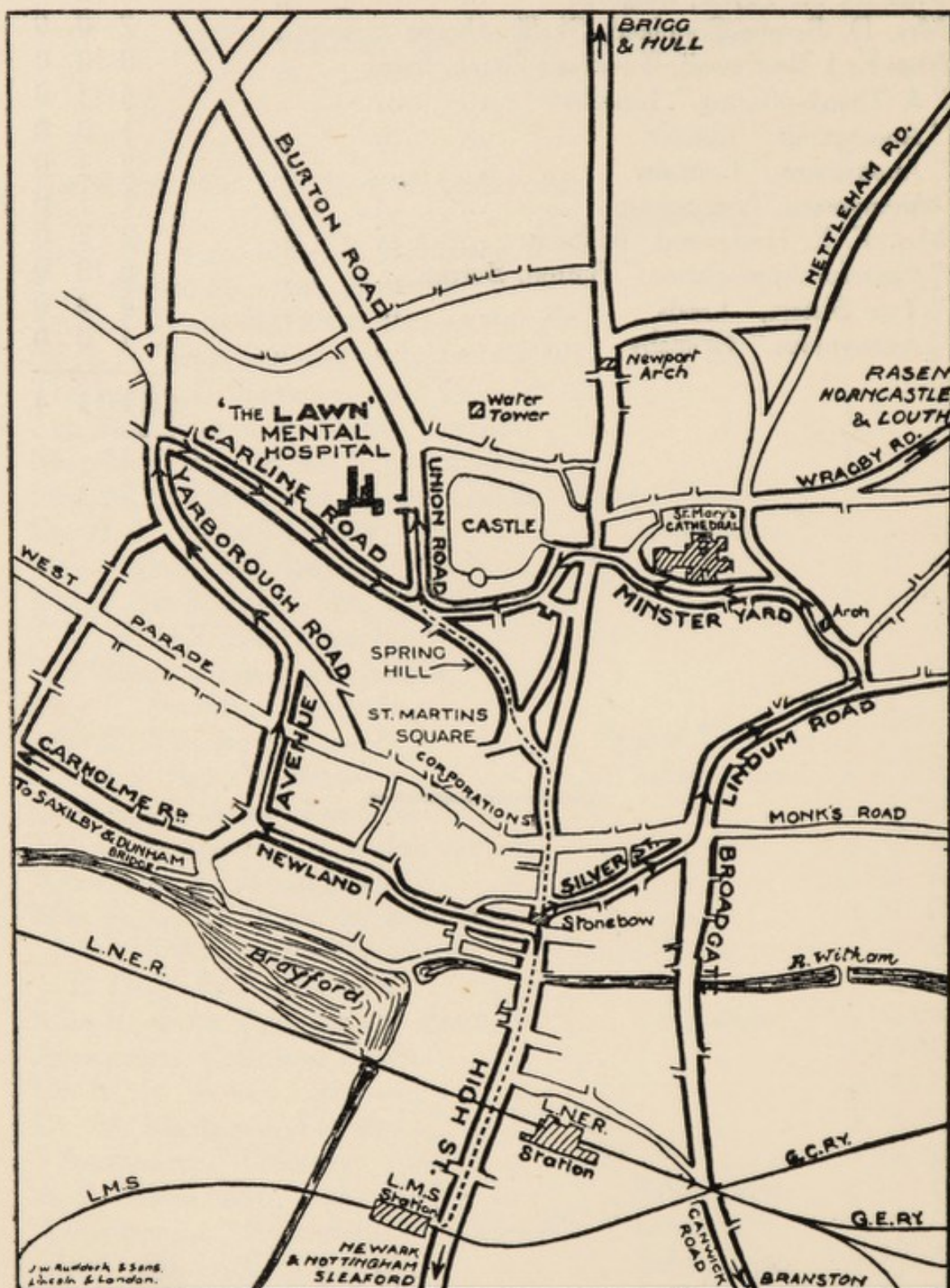
No officer or person whatsoever employed by this Institution shall give to, or receive from any Tradesman, Servant, Patient, Stranger, or other person whatsoever, any fee, reward, gratuity, or present, directly or indirectly for anything done, or to be done, on account of the Institution, on pain of expulsion.

DONATIONS AND SUBSCRIPTIONS

		£	s	d
The Right Hon The Earl of Yarborough, P.C., F.S.A.	Subscription	5	0	0
Major The Hon. Dudley R. H. Pelham, D.S.O.	"	5	0	0
E. A. Smith, Esq., J.P., Branston	"	5	0	0
Sir H. B. Bacon, Bt., F.S.A., D.L., J.P. for 1932	"	5	0	0
Sir H. B. Bacon, Bt., F.S.A., D.L., J.P., for 1933	"	5	0	0
The late C. C. Sibthorp, Esq., Canwick ...	"	3	3	0
The Revd. Canon Chatterton, Lincoln ...	"	2	2	0
Miss M. E. Nevile, O.B.E., J.P., Lincoln ...	"	1	1	0
Miss M. E. Nevile, O.B.E., J.P., Lincoln	Special Donation	5	0	0
Dr. H. C. Barlow, Lincoln	Subscription	2	2	0
Mrs. Beatson Bell, Lincoln	"	2	0	0
Dr. W. H. B. Brook, J.P., Lincoln	"	1	1	0
J. W. F. Hill, Esq., Lincoln	"	1	1	0
The Revd. Canon Kaye, Lincoln	"	1	1	0
Miss E. Mitchinson, Lincoln... ..	"	1	1	0
Miss E. Mitchinson, Lincoln	Special Donation	1	1	0
E. Sykes, Esq., Wellingore	Subscription	1	1	0
C. Reynolds Scorer, Esq., Lincoln	"	1	1	0
The Revd. and Mrs. E. Giles, Lincoln ...	"	2	0	0
"Anonymous," Nottingham	"	2	2	0
Miss A. G. Bengough, Horncastle	"	0	10	0
"Grateful Appreciation," Grimsby ...	"	1	1	0
J. E. Davy, Esq., J.P., Louth	"	1	0	0
Miss E. Wells, Brightlingsea, Essex...	Donation	3	3	0
Anonymous, Collection Box	"	1	19	10
Dr. M. R. Barkas, Lincoln	"	9	7	0
Dr. M. Mackenzie, Lincoln	"	5	5	0
"Anonymous," Grimsby	"	0	12	6
A. P. Brown, Esq., Sutton-on-Sea	Subscription	1	1	0
"Anonymous," Whitechurch, Ross-on-Wye	Donation	10	0	0
Charles Scorer, Esq., Lincoln	Subscription	5	0	0
"Anonymous," Ipswich	Donation	0	10	0
A. H. Bergne-Coupland, Esq., Skellingthorpe	"	3	3	0
Dr. J. B. Hunter, Lincoln	"	1	1	0

					£	s	d
Miss M. A. Taylor, Brighton	...	...	..	..	0	10	0
Mrs. D. Bergne-Coupland, Skellingthorpe...			..	..	2	0	0
Miss E. J. Brightwall, Woodford Green, Essex			..	..	0	10	0
"A Thank-offering," Lincoln	...	...	..	..	3	3	0
"Anonymous," Lincoln	...	...	...	..	1	0	0
"Anonymous," Grimsby	...	...	...	..	2	2	0
"Anonymous," Nottingham	...	...	...	..	1	1	0
Mrs. F. E. Hazlewood, Wisbech	...	...	..	..	2	2	0
"Grateful Appreciation," Sutton, Surrey	0	10	0
"Two Sisters," Leeds	4	4	0
"Anonymous," Grimsby	1	0	0
					<hr/>		
					£113	12	4
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ROUTE MAP TO LAWN HOSPITAL.



To The Governors of The Lawn, Lincoln.

I have pleasure in enclosing P.O. for £ : : as a
Donation to the Charitable Funds of The Lawn, Lincoln.
Cheque

Signature.....

Address

Date.....19 .

I am willing to subscribe £ : : annually to the Charitable
Funds of The Lawn, Lincoln, and enclose herewith Cheque
Bankers Order

Signature.....

Address

Date.....19 .
(Banker's Order).

To The
(Fill in name of your Bankers)

Please pay on the.....and annually thereafter .
until further notice the sum of £ : : (.....),
(Words)

to "THE GOVERNORS OF THE LAWN, LINCOLN," at the National Provincial Bank Ltd.,
Smith's Bank Branch, Lincoln, at the debit of my account, and this shall be your full and
sufficient authority for so doing.

Signed

2d.
Receipt
Stamp

FORM OF BEQUEST.

I bequeath to the Governors of The Lawn, the sum of £ : :
free of duty to be applied to the purposes of the hospital. I declare the receipt of the
Medical Superintendent for the time being of the hospital shall be a sufficient discharge
for the same.

Signed

Address

and the Honorable the Speaker of the House of Representatives

of the Senate and House of Representatives

of the United States of America

in Senate and House assembled

presented

the following

Report of the

Commissioners of the

General Land Office

for the year ending

on the 30th day of

June 1897

and the same is hereby

ordered to be printed

and the same is hereby

ordered to be

distributed to the

Members of the

Senate and House

of Representatives

and the same is

ordered to be

printed and the

same is hereby

ordered to be

distributed to the

Members of the



