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# THE LAWN LINCOLN

REGISTERED HOSPITAL FOR  
MENTAL & NERVOUS  
DISEASES

*Instituted November 4th, 1819*

1943

One Hundred & Fifteenth  
Annual Report



*Telephone : Lincoln 165*



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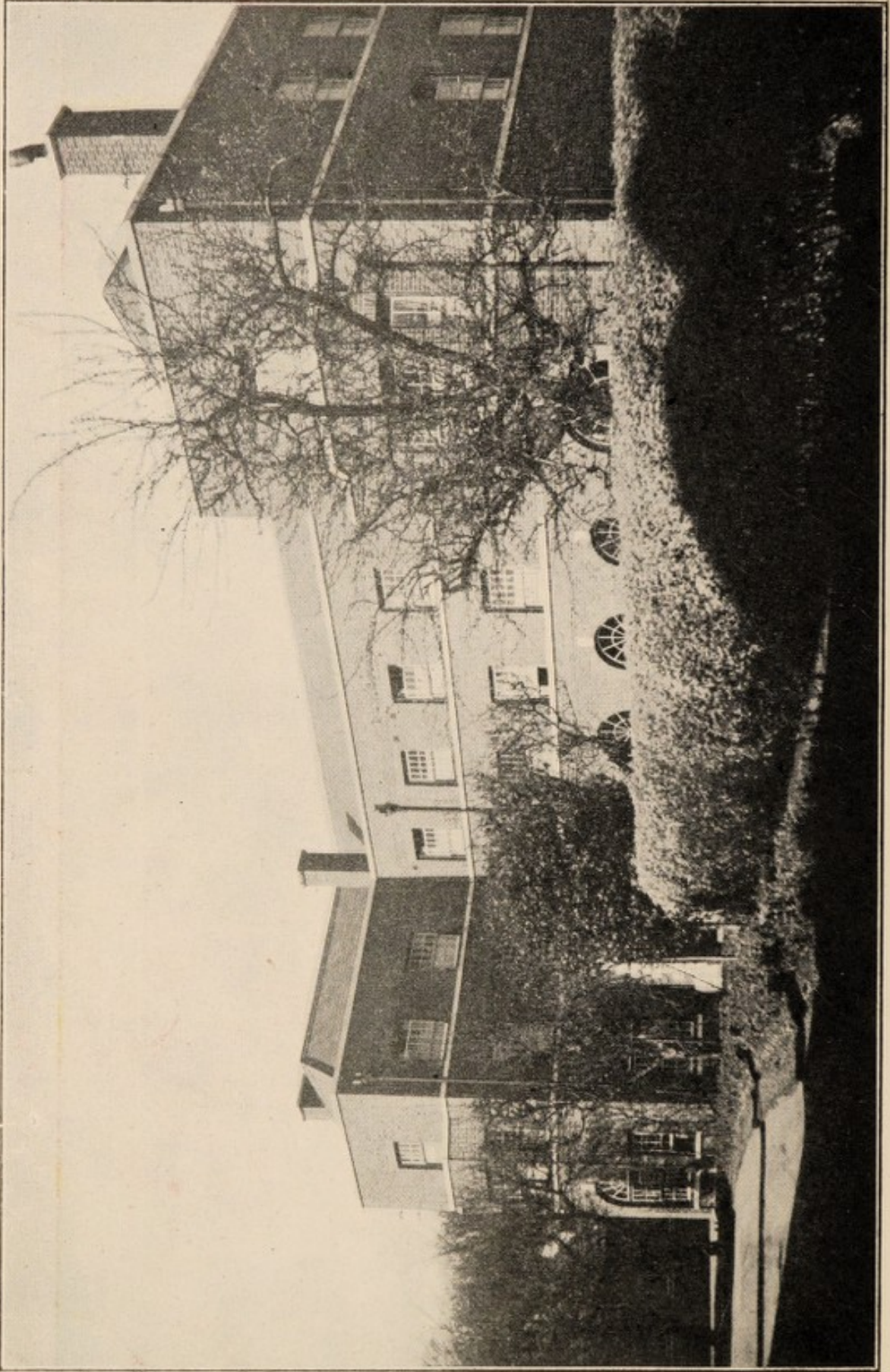
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THE LAWN, LINCOLN



THE NURSES' HOME

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# THE LAWN, LINCOLN

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## GOVERNING BODY

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### Patron :

THE RIGHT HON. THE LORD HENEAGE, O.B.E., D.L., J.P.

### President :

MAJOR THE HON. DUDLEY R. H. PELHAM, D.S.O., D.L., J.P.

### Vice-Presidents :

THE RIGHT REVD. THE LORD BISHOP OF LINCOLN.

THE RIGHT REVD. THE LORD BISHOP OF GRIMSBY.

SIR HICKMAN B. BACON, BART., D.L., J.P.

THE REVD. CANON CHATTERTON.

MISS M. E. NEVILE, O.B.E., J.P.

C. REYNOLDS SCORER, Esq.

MISS E. MITCHINSON, *Vice-Chairman*.

H. G. GAMBLE, Esq., J.P.

### GOVERNORS :

P. A. LANE, Esq., *Chairman*.

DR. H. C. BARLOW.

C. T. BLACKLOCK, Esq.

S. MAUDSON GRANT, Esq.

J. W. F. HILL, Esq.

MRS. MARY LANE, J.P.

MRS. J. K. M. MOORE, J.P.

LIEUT.-COL. H. B. RIGGALL, J.P.

DR. G. C. WELLS-COLE, J.P.

MAJOR WESTON CRACROFT-AMCOTTS, M.C., D.L., J.P.

THE VEN. THE ARCHDEACON OF LINCOLN.

G. A. BAGOT WALTERS, Esq., F.R.C.S. (Ed.).

**TRUSTEES OF REAL ESTATE :**

MAJOR THE HON. DUDLEY R. H. PELHAM, D.S.O., D.L., J.P.

C. REYNOLDS SCORER, Esq.

MAJOR WESTON CRACROFT-AMCOTTS, M.C., D.L., J.P.

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**OFFICERS :**

*Resident Medical Superintendent :*

JOHN F. R. GOODLAD, M.A., M.B., CH.B., D.P.M.

*Assistant Medical Officer :*

*Chaplain :*

THE REVD. MALCOLM SMITH.

*Secretary and Steward :*

MR. C. H. BULLIMORE, F.I.A.C., F.H.A.

*Matron :*

MISS ANNIE WIGHTMAN.

*Auditors :*

J. S. STREETS & Co., CHARTERED ACCOUNTANTS.

# GOVERNORS' REPORT

---

The Governors have pleasure in presenting their Report for the year 1943, and in stating that the progress noted in the two previous years has been well maintained.

As the Governors anticipated, the success of new methods of treatment has resulted in a considerable increase in the number of admissions, viz : 95 during the year, as against 28 in 1938. This notable increase is not due to war conditions, as statistics show that mental illness attributed to the war is almost negligible. No doubt the widespread knowledge of the speedy cures which have been affected by modern treatment on both the male and female sides of the Hospital is responsible for the increase, having given new hope and assurance to those afflicted by mental disease, especially in its earlier stages.

Another exhibition of patients' handicrafts was held in November and was most successful. The Exhibition was well attended and was opened by the Venerable the Archdeacon of Lincoln, one of our Governors.

It is interesting to observe that all patients' entertainments and amusements are now controlled by a Committee of Officers and Staff who meet at least once in each month to compile the entertainments in the hospital for the next month. This arrangement has resulted in varied and interesting programmes which have been much appreciated and enjoyed.

The Governors regret to record the death of Mr. E. F. Nevile, a Vice-President. Until he left the district shortly after the outbreak of war, Mr. Nevile attended most of the Meetings of the Board and took a great interest in the Hospital. He was also a valued member of the Finance Committee.

The Governors record with pleasure that Mr. H. G. Gamble has been appointed a Vice-President, and that Mr. C. T. Blacklock has been elected to the Governing Body.

The Annual Meeting was held on the 29th April, 1943. As the Patron, Lord Heneage, was unable to be present, the President, Major The Hon. Dudley Pelham, occupied the chair and said that he had been much impressed by the signs of progress in all Departments of the Hospital. He congratulated the Governors upon the success achieved.

The Annual Accounts for 1942 were presented, accepted and adopted.

Mr. P. A. Lane and Miss E. Mitchinson were re-elected Chairman and Vice-Chairman respectively, and Messrs. J. S. Streets and Co. were re-appointed Auditors.

The Finance Committee and the Tenders' Committee were re-elected for the year.

## Governors' Report—*continued.*

The Meeting was open to the press and the proceedings were reported in the local and county papers.

Dr. Coleridge Marchmont, Assistant Medical Officer, resigned for family reasons and left on the 2nd December, 1943. As a new appointment has not yet been made, Dr. Jessie Hunter is acting Assistant Medical Officer and the Governors are grateful for her ever ready assistance.

Miss Margaret Evans resigned her post as Housekeeper and left on the 25th September, 1943. She was succeeded by Miss C. Symington who combines the post of Housekeeper and Home Sister.

In spite of the acute shortage of labour and materials many repairs, renewals and decorations have been completed during the year. The ward lavatories which were out of date have been remodelled where needed and equipped with modern fittings. The large curtains in the main Dining and Recreation Hall have been replaced at considerable cost.

An additional Gas Cooker has been installed in the Kitchens.

To provide a private sitting room for the Assistant Matron, the necessary alterations were made in the Nurses' Home.

The work of re-decoration has gone on steadily throughout the year and the wards look bright and cheerful.

Although these improvements have entailed additional expenditure during the year the financial position remains entirely satisfactory.

The gardens have again supplied considerable quantities of vegetables and the pigs and poultry keeping has been successful.

In view of the suggested post-war reconstruction of Hospital services the Governors have decided to join an Association of Registered Hospitals which is being formed to protect the interests of these Hospitals and of their patients in any legislation affecting them.

The Governors again call attention to the considerable amount of relief given by the Hospital. During 1943 grants amounting in all to £1,885 have been made to 22 patients for the full year, and 27 patients have received similar grants amounting in all to £441 for periods of less than a year.

This Report would be incomplete if it failed to express appreciation of the efficient services of the Medical Superintendent and the Secretary. The Governors thank them and all the Staff for their never failing help and loyal co-operation which have conduced so materially to the success of the valuable work of the Hospital.

(Signed) P. A. LANE,

27th April, 1944.

Chairman of the Governing Body.

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

1943	EXPENDITURE	£	s	d	£	s	d	£	s	d
To	Salaries of Officers	...	...	...	2040	14	7			
"	Wages of Nursing Staff	...	...	...	2651	19	2			
"	Wages of Domestic Staff	...	...	...	855	0	9			
"	Pensions	...	...	...	150	0	0			
"	Less Net Income from Pension Fund	...	...	...	109	18	3			
					40	1	9			
"	National Insurance	...	...	...	259	9	0			
					5847	5	3			
"	Provisions	...	...	...	4138	18	3			
"	Wines and Spirits	...	...	...						
"	Housekeeping Incidentals, including Cleaning Materials	...	...	...	249	10	7			
"	Medicine and Surgical Appliances	...	...	...	220	3	10			
"	Amusements, including Newspapers, Books, etc.	...	...	...	127	12	2			
"	Carriage, Portage and Travelling Expenses	...	...	...	55	10	7			
"	Garden Expenses :—									
	Wages	...	...	...	295	16	0			
	Purchases and Expenses	...	...	...	57	7	7			
					353	3	7			
"	Laundry Expenses :—									
	Wages	...	...	...	252	1	5			
	Purchases and Expenses	...	...	...	223	18	4			
					475	19	9			
					1482	0	6			
"	Water Charges	...	...	...	128	1	4			
"	Insurances	...	...	...	152	2	3			
"	Rates	...	...	...	386	14	4			
"	Rents	...	...	...	28	0	0			
"	Heating and Lighting, viz. :—									
	Boilerhouse Wages	...	...	...	50	5	9			
	Gas, Electricity, Coal and Coke	...	...	...	1310	9	9			
					1360	15	6			
"	Stationery, Postages, Printing and Advertising, etc.	...	...	...	293	19	2			
"	Telephone Charges	...	...	...	100	18	5			
"	Income Tax and Land Tax	...	...	...	28	12	5			
"	Bank Charges	...	...	...	24	2	6			
"	Legal Charges	...	...	...						
"	Clothing of Attendants and Servants	...	...	...	79	18	10			
"	Nurses' Home	...	...	...	404	16	3			
					2988	1	0			
"	Repairs and Renewals of Inventory	...	...	...	1186	12	8			
"	Repairs and Decorating of Premises	...	...	...	221	0	9			
"	Air Raid Precautions	...	...	...	11	12	1			
"	Wages of Painting Staff	...	...	...	222	17	6			
"	Wages of Handyman	...	...	...	113	0	0			
					1755	3	0			
"	Balance, being excess of Income over Expenditure...				1820	15	5			
					£18,032	3	5			

the year ended 31st December, 1943, furnished pursuant  
 Rule 42 of the Commissioners in Lunacy.

1943	INCOME	£	s	d	£	s	d
By Maintenance and other Fees charged to Patients ...		16044	17	11			
„ Surcharge on Maintenance Fees ... ..		1092	0	10			
„ Laundry charged to Patients ... ..		638	5	3			
„ Maintenance Fees, received from other Residents ...		52	9	9			
		<hr/>			17827	13	9
„ Sale of Swill, Old Stores, etc. ... ..					1	1	6
„ Discounts receivable ... ..					101	6	5
„ Interest received ... ..					39	3	3
„ Rents received ... ..					7	2	0
„ Donations and Subscriptions ... ..					55	16	6

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£18,032 3 5

# AUDITOR'S REPORT

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44, SILVER STREET,

LINCOLN,

*24th January, 1944.*

**The Governors, The Lawn, Lincoln.**

MY LORDS, LADIES AND GENTLEMEN.

We beg to report that we have audited the books and accounts of the Hospital for the year ended 31st December, 1943.

We have obtained all the information and explanations we have required and, in our opinion, the accounts are correct, according to the best of our information and as shown by the books.

The Title Deeds of the Freehold Property have been produced for our inspection and we have verified the Bank Balances and the Investments in Government Securities.

We have pleasure in reporting that we have found the accounts carefully and accurately recorded, and that we have been afforded every facility and assistance in the course of the audit.

We are,

My Lords, Ladies and Gentlemen,

Yours faithfully,

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

# Report of the Medical Superintendent for the year 1943

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MY LORDS, LADIES AND GENTLEMEN.

I have the honour to present my Report for the year 1943 with the accompanying statistical tables.

## Admissions.

There were 95 admissions during 1943. Sixty-six being female and 29 male. Fifty-five of the female admissions were voluntary, 10 were certified and one temporary. Twenty-one male admissions were voluntary and 8 were certified.

It will be seen that the percentage of voluntary to certified patients 81% still remains high. This along with the percentage of discharges goes to show the importance of getting patients under care early, before their illnesses have progressed too far.

The following types of cases were treated during the year. Mania, Melancholia, Manic depressive psychosis, Schizophrenia, Paranoia, Encephalitis lethargica, General paralysis of the Insane, Senile and Presenile dementias and a few cases of Psycho-neurosis.

Several out-patients were treated by me.

## Discharges.

Seventy-one patients were discharged or left the Hospital. Thirty-six were recovered, 29 were relieved and 6 left not improved.

Factors accounting for the satisfactory percentage of discharges include :—

- (a) The individual attention given to each patient.
- (b) Electrical therapy which shortens the period of illness and permits psychotherapy to be performed without blockage.
- (c) Recreational therapy which has been varied and entertaining.
- (d) Occupational therapy.
- (e) Attentive nursing.

## Health.

The general health of patients and staff was satisfactory. There were no epidemics. The deaths during the year were from natural causes. The average age on death was sixty-nine.



## **Medical Superintendent's Report—*continued.***

### **Occupational Therapy and Amusements.**

The Exhibition and Sale of Goods made during the year amazed patients, staff and visitors alike by its variety and excellent quality. Most of the patients carry on their work in their own wards much beyond the allotted time, which shews their interest in the work. All tastes are catered for as far as war conditions allow.

During the summer months much interest was evinced in the tennis, croquet and clock golf, and several tournaments were played, including two with the County Hospital and one with the Military Hospital. Though the Lawn won only one of these tournaments, I feel sure all the games were thoroughly enjoyed by patients and staff alike.

A Gymnastic Class is held each morning for patients.

A Sports Club was formed during the year to plan Sports and Entertainments.

Before leaving this section I would like to record my sincere thanks to all those concert parties who so willingly came here to entertain the patients. Their performances were thoroughly enjoyed.

### **Official Visitors.**

Commissioners of the Board of Control paid their customary visits to the Hospital on 19th June, 1943 and 8th September, 1943. They saw all the patients and inspected the premises. Copies of their Reports are appended.

### **Parole.**

As regards the situation of a Mental Hospital that of The Lawn is I consider unique, placed as it is on the brow of a hill overlooking the main part of the City. The world famous Cathedral is within four minutes' walk of the hospital, and the shopping centre within five minutes walk. The Lawn is also within easy access of the country, so that convalescent patients have the advantage of walks in town or country, and at present we grant parole to about 30% of the patients.

### **General.**

Our poultry farm has continued to do good service and in particular having geese for Christmas proved a boon when that delicacy was so scarce. Mr. Blanchard (Deputy Head Male Nurse) deserves special thanks for devoting his spare time to this successful venture.

The Gardener is again to be congratulated on his success with flowers and vegetables.

The recreation hall has been re-curtained which enhances its appearance and adds to its comfort.

## Medical Superintendent's Report—*continued*

### Staff.

Dr. Coleridge Marchmont left here in the beginning of December, and his place is now filled by Dr. Jessie Hunter, who has from time to time given valuable service to The Lawn. I thoroughly appreciate her ready help.

Sister Symington was appointed to combine the post of Domestic Supervisor and Home Sister.

Sister Taylor was appointed to take charge of the large ward following the resignation of Sister Anderson, who had to leave for domestic reasons.

I should like to express my thanks to the Secretary, Matron, Mr. Teesdale (Head Male Nurse), and all the members of the nursing, domestic and artizan staff for their loyal support during the year, and to my Secretary, Miss Glenn, who has so willingly carried out her increased duties.

Without the usual generous co-operation of the Chairman and the Governors, the year's work could not have been so successful, and I wish to thank them for their help.

I am, my Lords, Ladies and Gentlemen,

Your obedient servant,

JOHN F. R. GOODLAD,  
*Medical Superintendent.*

## Commissioners' Reports.

### First Visit.

*19th June, 1943.*

At the time of this, the first Statutory Visit of the year to this Registered Hospital, the names of 24 gentlemen and 51 ladies were on the books. Among the former, 12 were voluntary patients and a similar number under certificate. Nineteen of the ladies were voluntary patients and 32 certified. There have been no patients admitted under Section 5 of the Mental Treatment Act, 1930, since the beginning of the year\*—an unfortunate circumstance—but of the total number of admissions this year (38), 22 ladies and 7 gentlemen came voluntarily. During the course of my visit I interviewed one lady voluntary patient who I consider to be unsuitably placed in that category. I was unable to see various patients to-day. Two ladies and 2 gentlemen were on leave and 3 ladies and 2 gentlemen were out walking.

In 1943, 29 patients have been discharged or have departed. Four certified patients have recovered but it is interesting to note that less than 50% of the voluntary patients have done so. Five certified and one voluntary patients died and 2 under certificate were transferred to other statutory care.

Twenty-two gentlemen and 49 ladies were in residence to-day.

I have pleasure in congratulating Dr. Goodlad upon the state of the House and upon his progressive attitude towards the care and treatment of the patients. The rooms are extremely comfortable and re-decoration is being carried out in various parts of the building. Certain small adjustments have resulted in the provision of additional private rooms ; the construction of a service hatch in one of the wards now enables the serving of meals in such a way that the patients can eat in greater comfort. The long tables have been removed from the dining hall and smaller ones substituted. Dr. Goodlad is not satisfied with certain of the sanitary arrangements and I was glad to hear that a scheme for improving them is now under consideration.

In various other small ways an effort is being made to brighten the interior of the house and this is especially commendable in view of the obvious war-time difficulties that must be encountered.

Active physio- and psycho-therapy and occupations are the mainstays of treatment. Electrical convulsion therapy is in such general use that any further comment now appears unnecessary. Occupations are now in the hands of the Matron and her assistants and are becoming increasingly utilitarian in character as materials for "arts and crafts" become more and more difficult to obtain. I saw gentlemen working in the garden and ladies in the kitchens and wards. None appeared to have the least objection in doing domestic work and many were obviously benefiting from it.

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\* Section 5 of the Mental Treatment Act, 1930, refers to a person "who is suffering from mental illness and is likely to benefit by temporary treatment, but is for the time being incapable of expressing himself as willing or unwilling to receive such treatment."

## Commissioners' Reports—*continued.*

I was interested to hear that a Sports Club has recently been formed and from the programme it is clear that the needs and aptitudes of all ages and types of patient have been considered.

With regard to the staff, Dr. Goodlad's chief problem is in recruiting domestics. Among the nurses, 9 women hold the R.M.P.A. final certificate. The present total numbers are 11 men and 20 women, of whom 5 men and 11 women are always on day duty and 2 men and 4 women by night. One female nurse does duty in the male section by day.

Miss Whiteman was appointed Matron in August, 1942 and Miss Toyne has become her assistant.

Dr. Goodlad who has been appointed Consulting Psychiatrist to the Lincoln County Hospital and to the Medical Board has the assistance of Dr. Coleridge Marchmont, and to both of these gentlemen I tender my thanks for their help to me to-day.

(Signed) T. R. FORSYTHE,  
(Commissioner of the Board of Control).

---

### Second Visit.

8th September, 1943.

There are 72 patients in residence, 52 ladies and 20 gentlemen. Of these 20 ladies and 10 gentlemen are voluntary patients, the remainder being detained under certificate.

During 1942 there were 53 direct admissions (35 ladies and 18 gentlemen) and 47 departures or discharges (35 ladies and 12 gentlemen). Nine ladies and 5 gentlemen died during this period.

One lady and 1 gentleman were out walking this morning, but we have seen all the other patients, and, apart from one or two requests for discharge, we received no complaint.

It is satisfactory to find so many patients of both sexes occupied in one way or another.

Outside the dispensary a wooden box has now replaced the basket formerly used for medicines, but this should have a lock fitted, and the box should always be kept locked except at times when it is empty.

There are 9 male and 20 female nurses, 2 of the former and 4 of the latter doing duty at night. Seven of the women are certificated or registered as mental nurses, but none of the men, are qualified.

Dr. Goodlad was away on his holiday to-day, but in his absence we have received every assistance from Dr. J. Hunter and Dr. Coleridge Marchmont.

(Signed) N. C. CROFT COHEN,  
T. R. FORSYTHE,  
Commissioners of the Board of Control.



TABLE II,

Showing Forms of Mental Illness in Certified, Temporary and Voluntary Patients admitted in 1943, including Transfers.

FORM OF MENTAL ILLNESS	PATIENTS						TOTAL	
	Certified			Voluntary & Temporary			M	F
	M	F	Total	M	F	Total		
General Paralysis ...			1	2	3	1	2	3
Insanity with Epilepsy ...								
Acute Delirium ...			5	5	10			
Confusional Insanity ...	1	1	2	1	5	1	5	6
Primary Dementia ...								
Mania " Recent	1	1	2					
" " Recurrent				1	7	8		
Melancholia—Recent				5	12	17		
" —Chronic				2	5	7		
" —Recurrent				2	7	9		
Alternating Insanity ...		1	1	5	7	12		
Delusional Insanity, Systematised...	1	2	3	2	5	7		
" " Non-	1	1	2	1	5	6		
Volitional Insanity—Impulse				5	6	11		
" " Obsession	1	1	2	1	6	8		
" " Doubt				1	8	9		
Dementia—Senile ...	2	3	5	1	4	5		
" —Terminal	1	1	2	1	3	4		
Encephalitis Lethargica ...				1	1	2		
Psycho-Neuroses ...		1	1					
Cretinoid Mongol ...								
	8	10	18	21	56	77	29	66

TABLE III.

Showing Principal Aetiological Factor in Certified, Temporary and Voluntary Patients admitted in 1943, including Transfers.

PRINCIPAL AETIOLOGICAL FACTOR	PATIENTS						TOTAL	
	Certified			Voluntary & Temporary			M	F
	M	F	Total	M	F	Total		
Insane Heredity ...		1	1		2	3		
Epileptic " ...					8	8		
Neurotic " ...	1	2	3					
Alcoholism ...				1	1	2		
Congenital Mental Deficiency		1	1					
Puberty and Adolescence ...				2	4	6		
Climacteric ...	4	3	7	1	5	6		
Senility ...								
Pregnancy ...					1	1		
Lactation ...					1	1		
Sudden Mental Stress	2	1	3		2	2		
Prolonged " "	1	2	3	6	14	20		
Privation and Starvation				1	1	2		
Physical Over-exertion								
Alcohol ...				4	1	5		
Syphilis Acquired ...				1	1	2		
Injuries ...								
Lesions of the Brain					2	2		
Lesions of Spinal Cord and Nerves				1	1	2		
Epilepsy ...				3	4	7		
Cardio-vascular Degeneration					3	3		
Haemopoietic System ...								
	8	10	18	21	56	77	29	66

TABLE IV.

Showing the length of Residence of those discharged Recovered, and Relieved, including Transfers during the year ended 31st December, 1943, of Certified, Temporary and Voluntary Patients.

LENGTH OF RESIDENCE	CERTIFIED PATIENTS						VOLUNTARY AND TEMPORARY 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	8	9	4	6	10	1	8	9	1	4	6	10
1 month and under 3 months	1	1	2	...	...	2	13	15	3	7	10	3	14	17	3	7	10	
3 months and under 6 months	...	...	...	...	...	1	3	4	1	5	6	1	3	4	1	5	6	
6 months and under 12 months	1	1	2	1	...	1	...	...	2	...	2	1	1	2	3	...	3	
1 year and under 2 years	1	...	1	...	...	...	...	...	...	...	...	1	...	1	...	...	...	
2 years and under 3 years	1	...	1	...	...	...	...	...	...	...	...	1	...	1	...	...	...	
3 years and under 5 years	...	...	...	...	...	...	1	1	...	...	...	...	1	1	...	...	...	
5 years and over	...	1	1	...	...	...	...	...	...	...	...	...	1	1	...	...	...	
	4	3	7	1	...	1	4	25	10	18	28	8	28	36	11	18	29	

TABLE V. (Certified, Temporary and Voluntary Patients).  
 Showing the Ages of those Admitted, Discharged Recovered, and Died during the year 1943.  
 and of those remaining on the 31st December, 1943.

AGES OF PATIENTS.	PATIENTS.											
	ADMITTED			RECOVERED			DIED			RESIDENT ON 31ST DEC., 1943.		
	M	F	TOTAL	M	F	TOTAL	M	F	TOTAL	M	F	TOTAL
16 years to 19 years ...	...	1	1	...	...	...	...	...	...	...	1	1
20 years to 24 years ...	2	5	7	...	1	1	...	...	...	2	1	3
25 years to 34 years ...	4	13	17	1	8	9	1	...	1	4	4	8
35 years to 44 years ...	6	10	16	2	1	3	1	1	2	5	8	13
45 years to 54 years ...	3	12	15	1	9	10	...	...	...	2	8	10
55 years to 64 years ...	8	11	19	4	6	10	1	...	1	5	15	20
65 years to 74 years ...	1	7	8	...	3	3	3	...	3	1	15	16
75 years and upwards	5	7	12	...	...	...	3	3	6	5	9	14
TOTALS	29	66	95	8	28	36	9	4	13	24	61	85
MEAN AGE	52	48	50	49	42	45	67	71	69	50	58	55



# THE LAWN, LINCOLN.

**Registered Hospital for Mental and Nervous Diseases.**

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## **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 Patients who are 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 in 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.

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 Certified Patient on a Reception Order, or as a Temporary Patient ; in cases of extreme urgency, where the Reception Order cannot be obtained immediately an Urgency Order may authorise admission for seven days 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 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 Certificates, 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, Clifton Hotel, South Promenade, St. Annes-on-Sea, Lancs., 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 £5 5s. 0d. per week. A charge of £2 2s. 0d. per quarter is made for laundry. Extra fees are charged by agreement for private sitting-rooms, special attendance and special nursing.

Arrangements for admission at a weekly rate lower than the above are made under special circumstances, when a full confidential statement must be submitted by the friends of the patient to the Board of Governors. 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 are given in preference to residents of Lincolnshire.

On admission, a deposit for maintenance is required in advance, this payment being renewed quarterly.

One fortnight's payment is required if the duration of stay should be less than a fortnight from admission.

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 and 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.

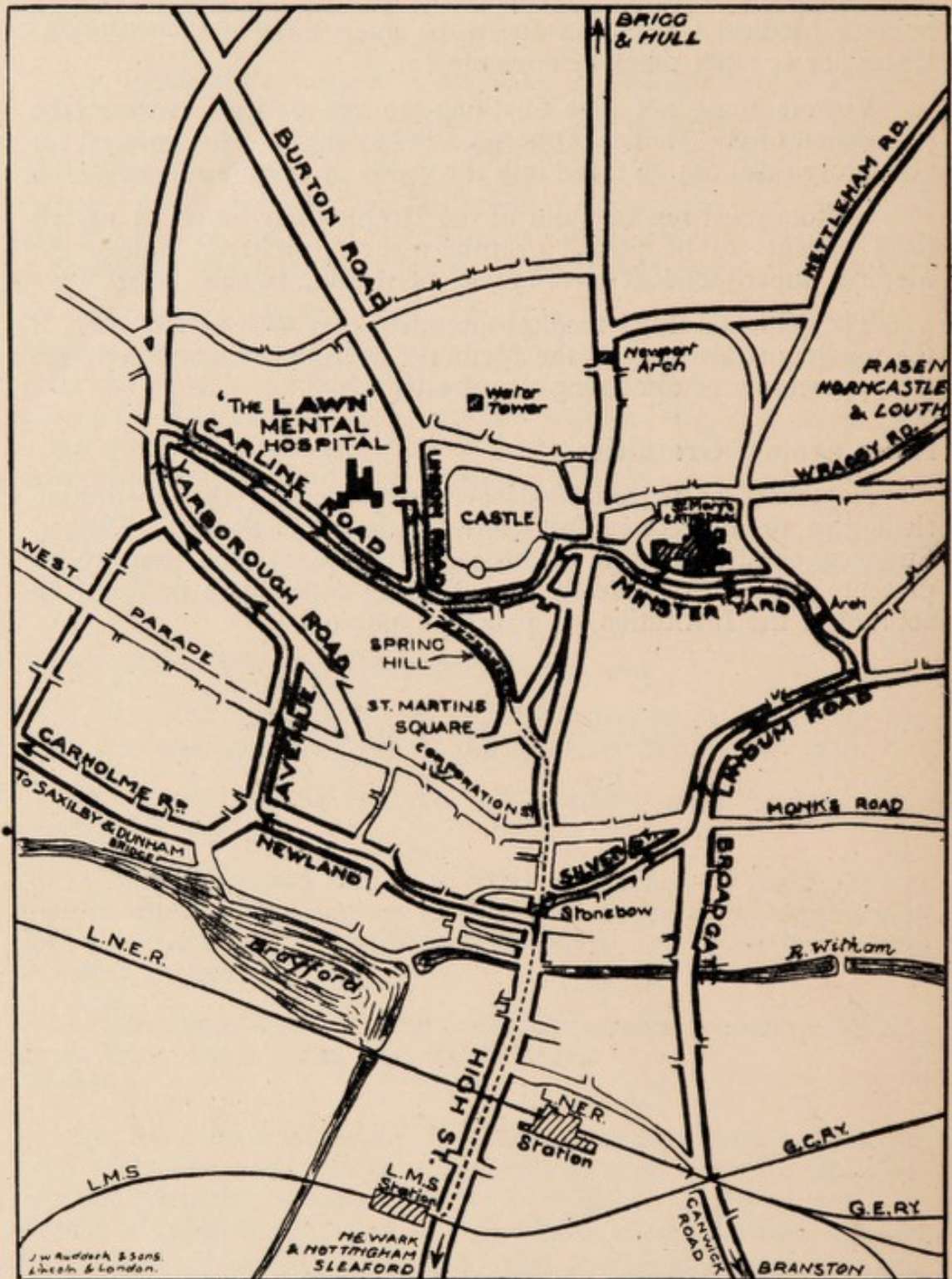
Visitors must not take out of the Hospital any letters or parcels from patients to be posted or otherwise transmitted, unless the Medical Superintendent gives special permission in each case.

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.

# ROUTE MAP TO THE LAWN HOSPITAL



←←← DENOTES MOTOR ROUTE TO HOSPITAL.  
 - - - - - " " SHORTEST " FROM STATIONS.

