Report of the Committee of Management for 1925 / Cambridgeshire Tuberculosis Colony.

Contributors

Papworth Village Settlement (Cambridge, England) Papworth Hall Tuberculosis Colony (Cambridge, England)

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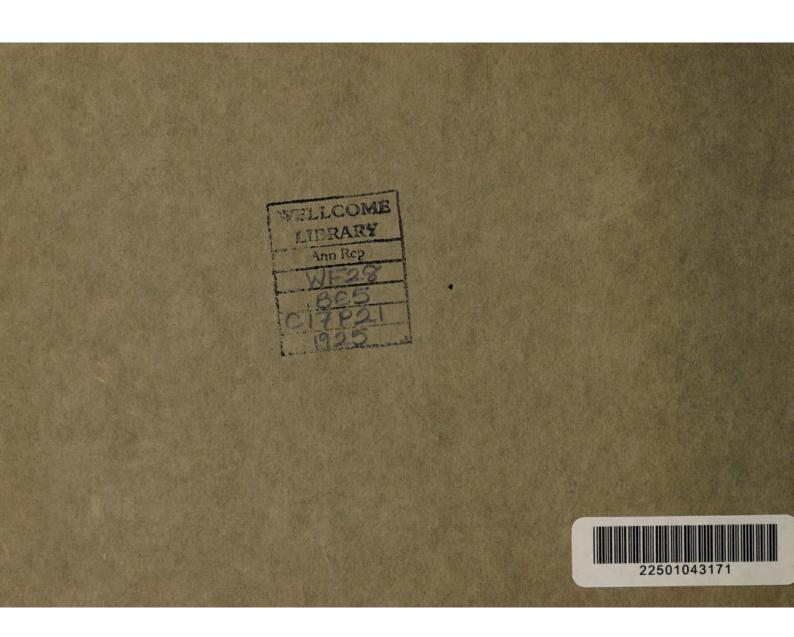
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REPORT

of the COMMITTEE of MANAGEMENT for 1925.

Presented at the Ninth General Meeting of the Colony May 12th, 1926.



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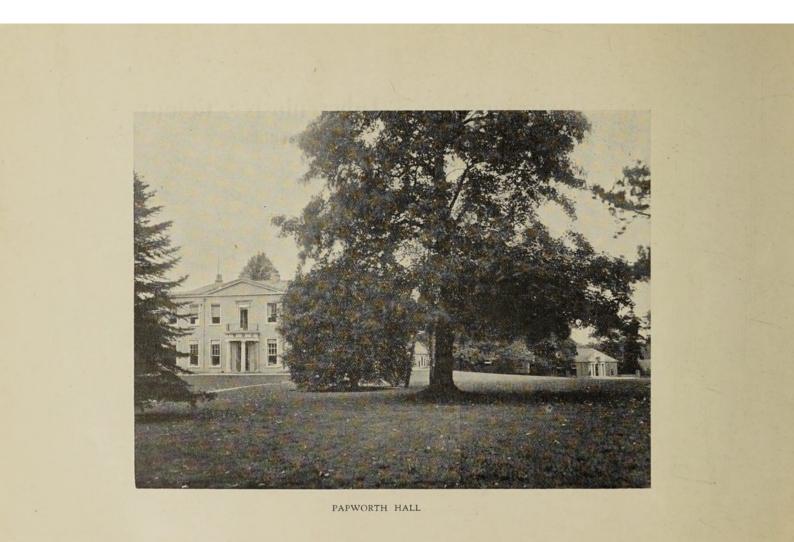
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REPORT

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COMMITTEE of **MANAGEMENT** for 1925.

Presented at the Ninth General Meeting of the Colony May 12th, 1926.



Cambridgeshire Tuberculosis Colony.

President:

Sir HUMPHRY ROLLESTON, Bt., K.C.B., Hon. D.Sc., D.C.L., LL.D., M.D., F.R.C.P., Regius Professor of Physic in the University of Cambridge.

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Hon. Treasurer:
Hon. Secretary:Sir H. GEORGE FORDHAM.
J. E. BIDWELL, Esq.
Mrs. MARCUS DIMSDALE.

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	Medical Director: P. C. VARRIER-JONES	, M.A., (Camb). M.R.C.S., L.R.	С.Р.
Assistant Medical Officer :	L. B. STOTT, M.C., M.B., Ch.B., D.P.H.	Matron : Miss K. L. I	BORNE.
Postal Ad	dress : Papworth Hall, Cambridge. Telephone : Caxto	n 18. (two lines).	
Stations :	St. Ives, Hunts, L.N.F.R. (5 miles) Huntingdon, L	N.E.R. (5 miles) Cambridge, (12 m	illes).

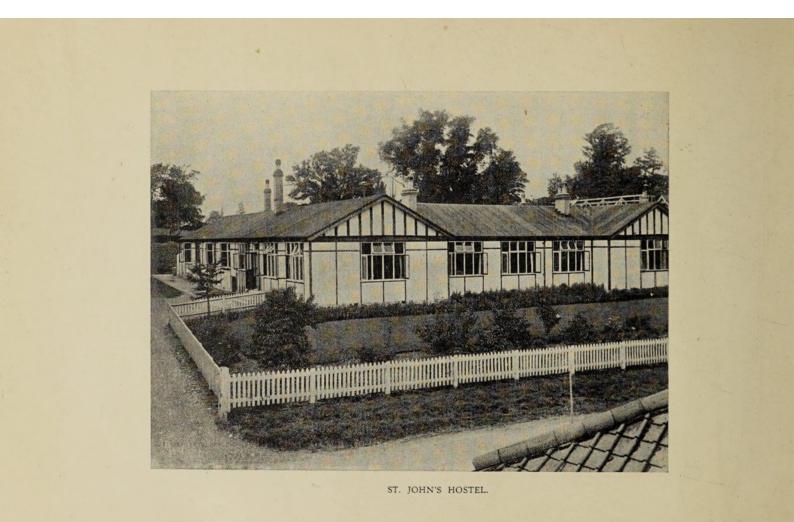


THE SIMS WOODHEAD MEMORIAL LABORATORY.

REPORT OF THE COMMITTEE OF MANAGEMENT FOR THE YEAR 1925.

Papworth is still growing. The twenty-five houses for which the Committee received £10,000 from the Minister of Health, the first of which was opened by the Duke and Duchess of York in July 1924, are now completed. They have been built by the Building Department of the Colony Industries. The houses are of brick, of the parlour type with three bedrooms and bathroom; they are semi-detached and every house has a garden. The sum allowed by the Ministry was £400 per house, but it was found that a sufficiently good type of house, complete with paths and fencing, could not be provided for less than £440. The additional £1000 required for the 25 houses had, therefore, to be found by the Colony. But each piece of expenditure involves an increased overdraft, and the Committee have been faced all through the year with this difficulty, at a time when the Colony is ready for development in every direction. The Hostels are overflowing, there is a keen demand among ex-patients for a home and a permanent settlement, and the increased trade of the Industries, which alone makes it possible to absorb the labour of the new residents, demands larger workshops and more machinery.

So keenly has it been felt that it would be a serious neglect of opportunity not to expand in response to the demand, that it has been decided to launch an appeal during the coming year with a view to bringing the need of this Industrial Settlement before those who are concerned about public health and



the prevention of infection, those who desire for economic reasons to see as many men as possible in remunerative employment, and the many who care deeply for the well-being and happiness (so far as may be) of those who are handicapped by disease incurred in many instances in the service of their country.

The number of persons in the Institution and the Village at the end of the year was 559, including 90 healthy children in the families of the ex-patients. No child who was not suffering in a marked degree from tuberculosis before coming to live in the Colony, has shown any sign of infection since becoming a resident, and the Committee are encouraged by the Medical Director to hope that, owing to the special conditions obtaining at Papworth, the children of tuberculous persons may be enabled to grow up immune to the disease.

The small Hostel for Women, opened in 1923, has proved most valuable and has been enlarged by the addition of shelters and a sanitary block. Some of the patients, whose condition has improved, find employment in the offices and workshops, as clerks, leather-stitchers, machinists, book-folders, etc., and there is great need for a residential hostel for female ex-patients, where they can reside more permanently, and continue the work in which they have been trained as patients. If these young women are discharged, there is very little chance for them to earn their living. They are not fit to be school teachers, children's nurses, or domestic helps, nor should they return to workrooms where healthy girls are employed. Here, again, the Committee are held up for lack of capital.

The Staff also requires much consideration, both as to health and social conditions. For this reason extensions are in progress in the male staff quarters, to provide improved sleeping accommodation and a cheerful recreation room.



SOME OF THE MODEL COTTAGES.

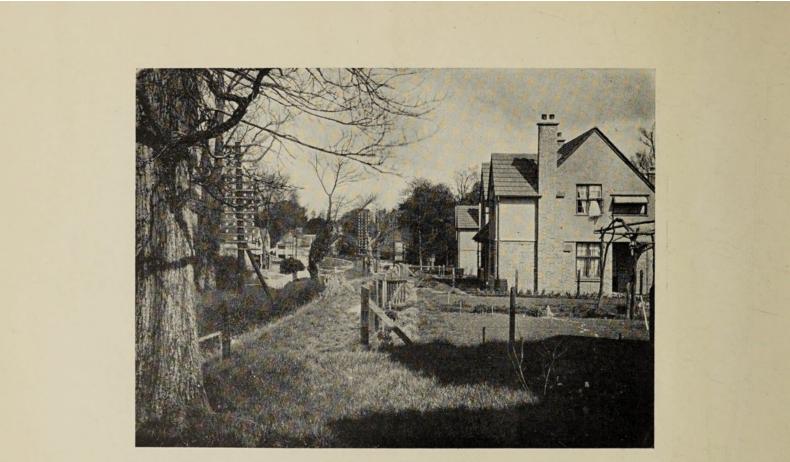
An important matter for the Nursing Staff is the provision of pensions, and the scheme worked out for the County Nursing Association is now to be adopted.

After a preliminary experiment with a Show-room for the sale of furniture, a shop was opened in Cambridge in June. It has proved of considerable value as a means of bringing the out-put of the cabinet-making department before the public, and thus obtaining orders. An Agency for the Ashstead Pottery made by disabled ex-service men has been combined with the furniture business, and their artistic ware adds to the attractiveness of the display.

In October a serious fire occurred in the trunk shop. The whole of the premises was burnt to the ground, together with the materials and a large amount of goods ready for delivery. The Committee were much impressed with the courage and energy shown by all the workers in meeting the disaster and making temporary arrangements for carrying on, and with the help of the compensation received from the Insurance Co., an enlarged and up-to-date workshop is now being buit.

The Committee desire to express their gratification that Sir Humphry Rolleston has honoured the Colony by becoming President in succession to Sir Clifford Allbutt. The continued support of the Regius Professor of Physic in the University will strengthen the link between the Cambridge Medical School and the Colony, and will, it is hoped, increase the use of the latter as a training ground for students.

The Medical Director has had to meet greater demands than ever before, and the Committee can only thank him for taking upon himself such heavy



A VIEW IN THE VILLAGE.

responsibilities. The success of the Colony is evidence of his unfailing resourcefulness and originality.

Dr. Stott, Assistant Medical Officer, has continued his good work. The Committee were glad to be able to arrange for him to spend a fortnight in Copenhagen, in order to study certain new methods of treatment that had excited interest.

The Matron has again proved herself to be entirely devoted to the interests of the Colony. Her energy is not confined to the departments of nursing, catering, and general domestic administration, but she finds time to care for the comfort and social interests of all the inhabitants of the Village, who owe much to her kindly thought and sympathy. Her Welfare Fund has again supplied timely help in many an emergency.

The Committee have been glad to encourage the members of the Women's Institute, the Boy Scouts, and the Girl Guides, in their efforts to provide suitable premises for their activities, by promising sites for the buildings. They are very grateful to Mr. Johnson and Miss Bye for their valuable help in organising and leading the Scouts and the Guides.

It is impossible to mention individually all those who have contributed to a successful year's work. The co-operation of *all* is essential. Without this co-operation the Committee is powerless; and the fact that the Colony is more alive and vigorous with each year of its growth proves that the right spirit is there.



A VIEW IN THE VILLAGE (ERMINE STREET.)

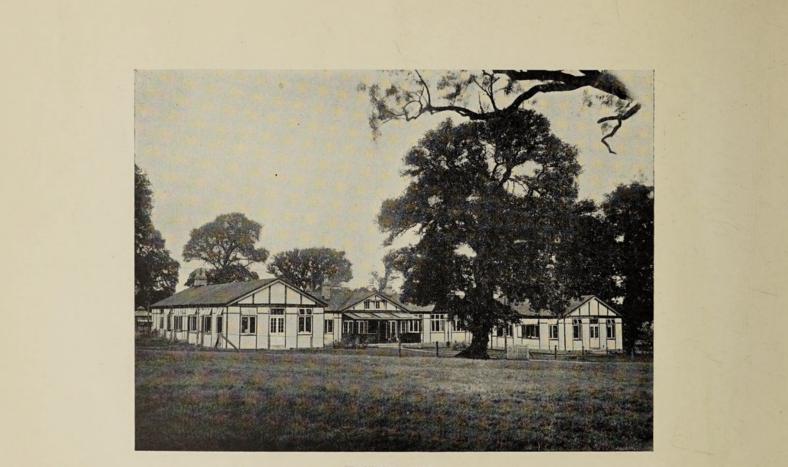
THE MEDICAL DIRECTOR'S REPORT FOR 1925.

1916-1926

TEN years! During the years 1914 to 1916 we dreamed a dream, in 1916 we started translating our ideals into actual facts. While as yet we had only a shelter or two at Bourn, roughly planted on a lawn at the back of a small farmhouse, the late Sir German Sims Woodhead and I had written of our plan in the "Lancet" as follows:

"With the hospital at one end of the scale, the Village Settlement at the other, and the intermediate rest and temperature houses, open-air shelters, hostels and workshops, each and all ready for his reception, the patient gradually gains confidence; he may be in the lowest grade, but he always keeps his eyes, his hopes and his aspirations on the highest being attainable, not only for himself, but for those dependent upon him. He is no longer a valetudinarian but a useful and productive member of society, a man who, though a consumptive, has learned to be a consumptive, to lead the life of a consumptive, and even to enjoy that life."

The time has come to review the statements we then made; to enquire whether we were right in supposing, for example, that under our scheme "the patient gradually gains confidence," confidence in his own strength to accomplish things, confidence that he is gaining moral as well as physical strength. In the article I have quoted we endeavoured to make a general statement of what we thought would occur, provided the means and the accommodation for carrying

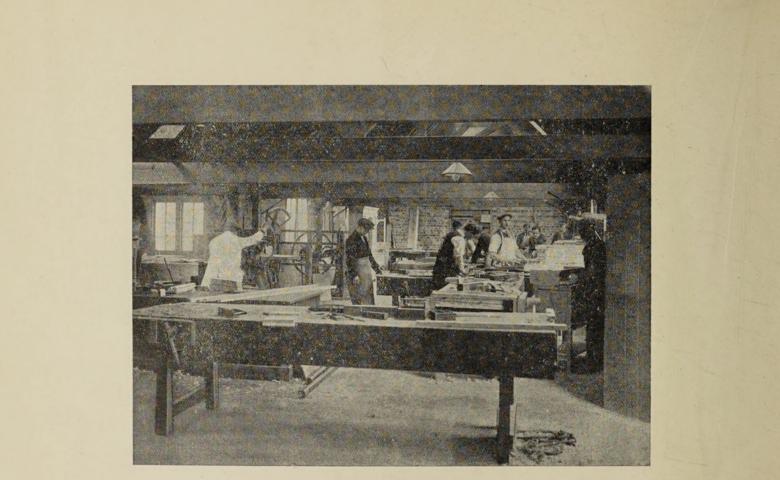


ST. PETER'S HOSTEL.

out the scheme were forthcoming. At Papworth the ways and means were found by enthusiastic and energetic friends and believers in the cause, with the result that our prophecy has been completely fulfilled. I have never had any doubts in my own mind that if certain fundamental principles were followed the result would be a success; that is to say, a Village Settlement would result composed of willing workers, maintaining their health, keeping the disease in check, rearing families highly resistant to the disease, earning their living in specially constructed workshops: self-respecting men and women. The principles we had laid down were of our own making, based on our own experience and the lessons we had learned from the experiences of others, the accumulated knowledge of other forms of treatment—sanatorium treatment and after-care.

After ten years it is well to ask ourselves whether we were right or wrong in advocating the establishment of Village Settlements, a scheme which embodies the considered opinion of sanatorium physicians. These physicians of experience continually urge that their ex-patients should be properly housed, have proper medical attention, suitable occupation, if possible under medical supervision, and, above all, be able to earn a wage sufficient to enable the man or woman and the family to put into practice the doctor's advice to live a well-ordered life, selfdisciplined and self-controlled—to follow a regime which, in fact, is the only safeguard against a recrudescence of the disease.

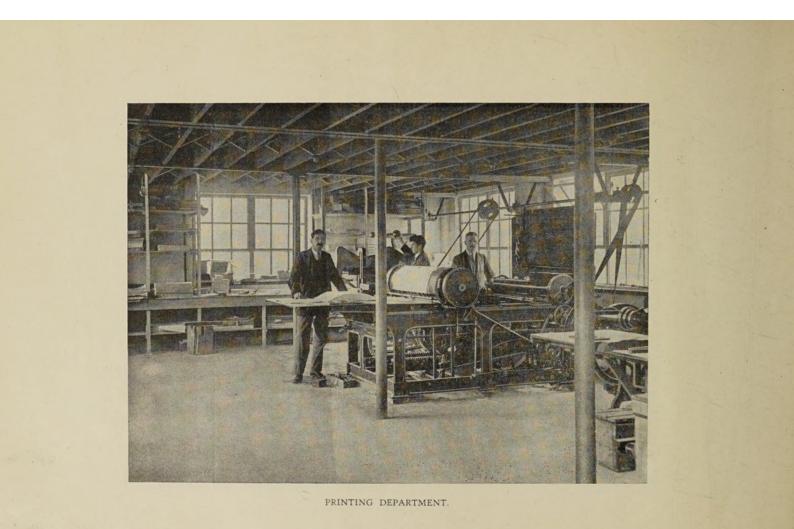
Were we wrong in supposing that it was possible to set up industries of a suitable nature in order to provide employment on a sufficiently large scale for the support of the inhabitants of a Village Settlement? The answer is that so far as Papworth is concerned we were not only on right lines, but our faith has been completely justified. The point, however, which is of interest in discussing the scheme as a whole, and which is of such great importance to all workers in the



CABINET MAKING

Tuberculosis field is whether the method is capable of universal application. Is it always going to be an unqualified success? And the answer to these questions can only be given in the affirmative when the human factor is properly grasped. The real difference between men, as someone says, is between those who are prepared to give more than they get, and those who want to get more than they give. If a Village Settlement is composed of men of the first category—or at any rate, if the majority of the inhabitants of the Village Settlement belong to that class, then all will be well. If, on the other hand, the majority belong to the latter, no success will be attained. You may have buildings of the most sumptuous order; you may have gardens fruitful and blossoming like the rose; you may have workshops and all the outward appearance of industry; you may have all the means whereby amusement may be provided ad nauseam, yet it avails you nothing; it is as "sounding brass and a tinkling cymbal." The very luxury and amusement has attracted the men who take all and give nothing, give nothing even to themselves for their own social welfare, give nothing to help their fellow men. The outward appearance of co-operation may be there; in reality there is an underlying selfishness which results in even more injury to the selfish one than to his fellows. Should the principles underlying the Village Settlement idea be blamed for the non-success of a Village Settlement, when those very principles have not been put into practice? If no trouble is taken to understand what they mean; if we allow ourselves to be deceived by appearances; if we are only anxious to make a show, surely the principles, which under such circumstances have not had a chance of proving themselves, should not be blamed for the want of success. When the principles of the Village Settlement are mastered, Village Settlements will succeed, but not until then.

In the light of, and in spite of, certain events elsewhere, I am still of the opinion

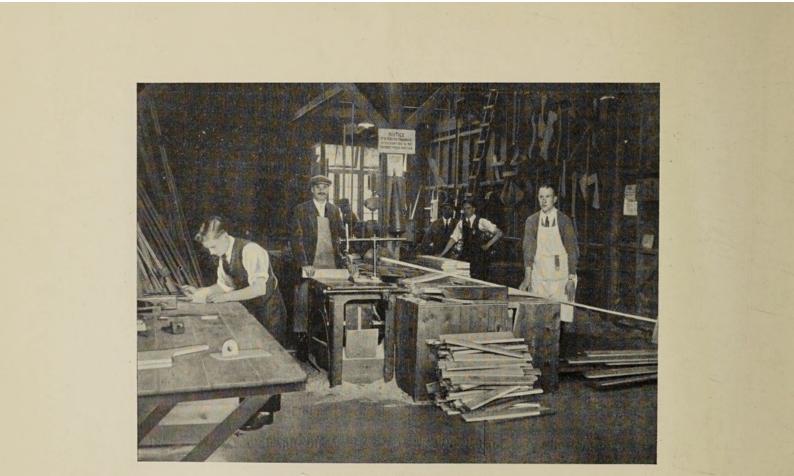


that Village Settlements are essential in combating tuberculosis. It gives the right-thinking, hard-working man his one and only means of making good. The man who desires a short life and a merry one can no more be helped by the scheme than he can by the ordinary sanatorium. But the right-thinking man and his family can, and do, derive benefits such as a sanatorium is not only unable to give, but was never designed to impart. The scheme goes to the root of the evil, the radical cause of the spread of the disease—infection in the home. It cuts the vicious circle, it solves the economic problem, and places the victim on firm ground, but, as in the case of sanatorium treatment, it is for the patient himself to tread the difficult path, the physician can only encourage him and show him the way.

Some time ago I was told that the Village Settlement was the Cinderella of the Tuberculosis Service. I had only to remind my friend of the after-history of Cinderella to make the comparison complete.

I have taken advantage of these Annual Reports from time to time to restate and amplify the principles underlying the Village Settlement scheme, and these are so simple and self-evident that they are seldom grasped. As Earl Grey says, "It is not hard to tell the truth; the difficulty is to get it believed."

Self-evident as it may appear, Settlements for the tuberculous must provide treatment, training and trade only for those about whom there is no doubt that they are clinically diagnosed as tuberculous. I say "clinically" advisedly. To be infected with the tubercle bacillus, and to be clinically diseased, are two entirely different things. It is useless to set up a Settlement and admit men who are not suffering from tuberculosis. That is the first principle.



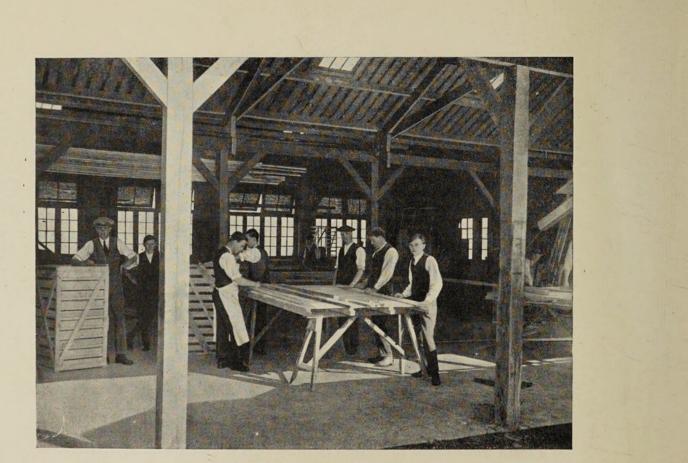
CARPENTRY & JOINERY MACHINE SHOP.

The second is likewise, namely, that a Settlement for the tuberculous should be for the benefit of the tuberculous and no one else.

The third principle is that of individuality, and takes into consideration the fact that the treatment of tuberculosis must not be a stereotyped regime, but that each case must be treated as a separate entity. Treatment must fit the case and not the case the treatment.

The fourth principle embodies the idea that the successful treatment of an individual means his restoration to as near his normal activity as possible; that treatment must not be confined to what we usually term medical, but must embrace social, psychological and economic treatment in a disease such as tuberculosis. Treatment may fall short of this complex aim, but successful treatment includes them all. Treatment cannot be termed completely successful, if at the end of it we have an individual restored to an environment in which the majority of healthy people live, but who is unfit for that environment. It may be a partial success; to complete it the environment must be adjusted to the individual. The fourth principle is therefore the recognition that the treatment of tuberculosis is complex.

The fifth principle recognises the fact that the basis of successful treatment is economic. What useful purpose is served by treatment which makes it impossible (for a variety of reasons) for the patient to earn his living? Training is equally futile, if at the end of it there is no living wage. It is useless to tell a patient to obtain a light job in the open air, when no such job is obtainable. A low wage means a lean larder. "Extra nourishment" is a phrase which sounds well, but when it takes the form of a pint of milk a day, the "extra" seems a little extravagant. Unless we can make the patient economically sound, our efforts are wasted. This is a truth which ought to be self-evident, but it is hardly ever appreciated. A



CARPENTRY DEPARTMENT.

sound economic future can only be obtained under sheltered conditions in a Village Settlement.

MEDICAL.

SANOCRYSIN METHOD. As well as continuing treatment by means of rest, exercise and purposeful work, we have, in selected cases, tried specific treatment with Sanocrysin. After the visit of Dr. Stott and myself to Copenhagen, we followed a discussion at the Annual Meeting of the Danish Medical Association with interest, and we became acquainted with the views of a large number of Danish scientific men who had had experience of Sanocrysin. A study of the reports of this meeting (vide Berlinske Tidende) made clear the following points about the position of the Sanocrysin treatment in Denmark.

(1). That the physicians grouped round Professors Faber and Moellgaard believed Sanocrysin to be a specific cure for tuberculosis.

(2) That there was a doubt as to the metallic action, apart from the specific action.

(3) That specific serum had an effect against albuminuria.

(4) That there was divergence of opinion as to the most suitable cases for treatment.

Dr. Stott remained in Denmark for some considerable time and made a study of the technique, and visited not only the Rigs Hospital and various hospitals in Copenhagen where the treatment is carried out, but also various sanatoriums in the country such as Silkeborg and Vejlefjord.



TRUNK AND PORTMANTEAU-MAKING DEPARTMENT.

The definite and undesirable results of excessive dosage of Sanocrysin and the doubt which obviously still existed in Denmark as to the metallic intoxication factor in the reaction of certain individuals to Sanocrysin, attracted our attention to the excretion of gold in the urine, and it was decided to carry out urine analyses on all cases receiving Sanocrysin. As much available time and material as possible has been devoted to the development of technique for the estimation of small quantities of gold in the urine.

The method used was Lomholt's, by which the urine is reduced to ash, which is treated with aqua regia. This solution is neutralised with ammonia and filtered. A ten per cent potassium cyanide solution is then added and the gold recovered by electrolysis on small platinum electrodes specially prepared so that they can be weighed before and after electrolysis by a Nernst Wager torsion balance. This method is said to have an accuracy of .03 mg., but it has the disadvantage of requiring the evaporation of large quantities of urine.

We found by the electrolytic method that a relatively high proportion of gold was excreted during the first twenty-four hours. The full account of the treatment and its effect will form one of a series of special Papworth reports printed and published by the Papworth Press.

To sum up shortly, our experience is that Sanocrysin in the cases we have tried at Papworth has no effect whatever in checking the disease.

SURGICAL CASES. "This form of tuberculosis,......, is 'surgical' no longer. Its treatment has passed, within the space of a year or two, from the hands of the surgeon to those of the physician skilled in natural methods of healing."

We have continued heliotherapy with satisfactory results, and we have at



TRUNK AND SUIT CASE-MAKING DEPARTMENT.

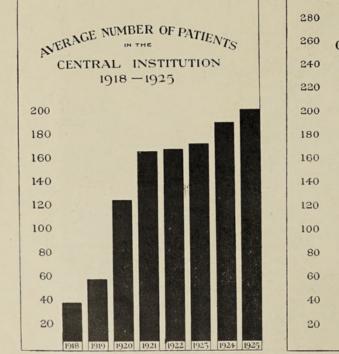
work in the Village Settlement, cases of tuberculosis of the spine, hip, and other joints, where the disease remains arrested and the men to all intents and purposes are leading a normal life. I wish to say again that it is probably only under these special conditions that a breakdown can be avoided. Unfortunately the cases which are sent to us are usually those of long-standing disease, who have had abscesses opened and drained before admission to the Colony, but even in some of these cases complete arrest of the disease has been secured.

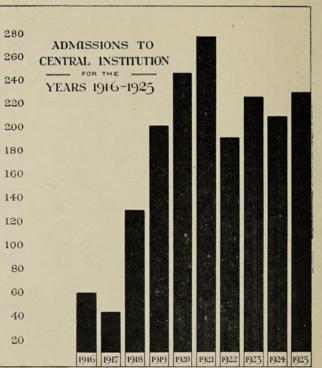
ARTIFICIAL PNEUMOTHORAX. All suitable cases are treated by this method, but unfortunately so many patients are sent to us with bilateral disease that in many instances Pneumothorax treatment is out of the question.

GLANDULAR THERAPY. The work on glandular therapy is being continued, but the main portion of this work has been transferred to Preston Hall, where Dr. E. Obermer, once our assistant here, is pursuing his studies, if possible, with increased vigour.

STUDY OF TEMPERATURES. The relation of temperature to rest and exercise is of such importance, and the opportunity of observation in a Hospital, Sanatorium, and Village Settlement is so exceptional, that no time or trouble has been spared to collect a great number of observations and an attempt has been made to draw conclusions therefrom. I propose publishing in book form my studies of continuous temperature records of cases of pulmonary tuberculosis. This work has been in progress for some years, and it has been thought desirable to collect my various papers on the subject and to publish the results of observations as a whole. The book will be published in the course of this year by the Papworth Press.

ROUTINE EXAMINATION. Every case admitted to Papworth is submitted to a thorough clinical examination, which includes an X-ray examination,





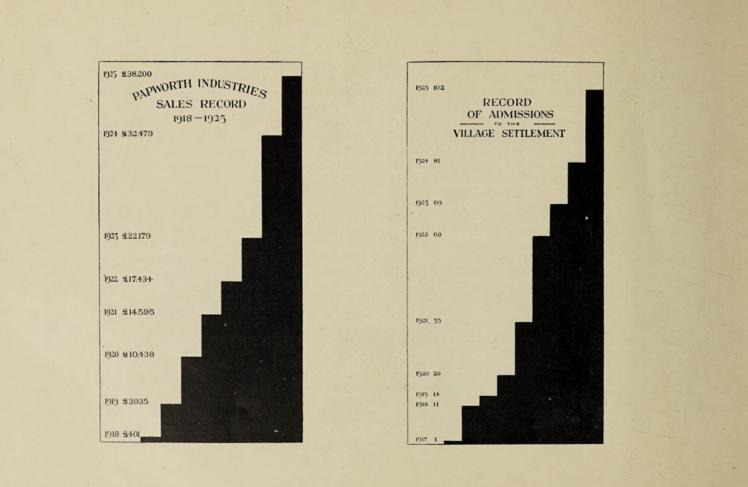
a fortnightly examination of the sputum, and a complete urine analysis. Indeed, we attach considerable importance to having as complete a metabolic picture of the patient as possible, and with this in view subsequent clinical and X-ray examinations coincide with our efforts to obtain this picture.

ADMISSION TO VILLAGE SETTLEMENT. During the last 10 years we have treated 1778 cases in the Sanatorium, and it must not be forgotten that the Sanatorium is a separate unit and as such has its own organisation. Those patients who have suitable homes to which to return, and who are looked after by the After-Care Association in Cambridge as to their employment, are discharged if the disease is sufficiently arrested.

The prevalent idea that everybody sent to the Sanatorium can in a short time be transferred to the Village Settlement is erroneous, and we do not select early cases for the Village Settlement, but try to accommodate those who are unfit for employment elsewhere. It is obvious that they can only be taken into the Village Settlement when accommodation exists for them. The diagram on page 30. will show the rate at which the cases have been passed into the Village Settlement during the 10 years we have been building up the Industries and Village.

PAPWORTH

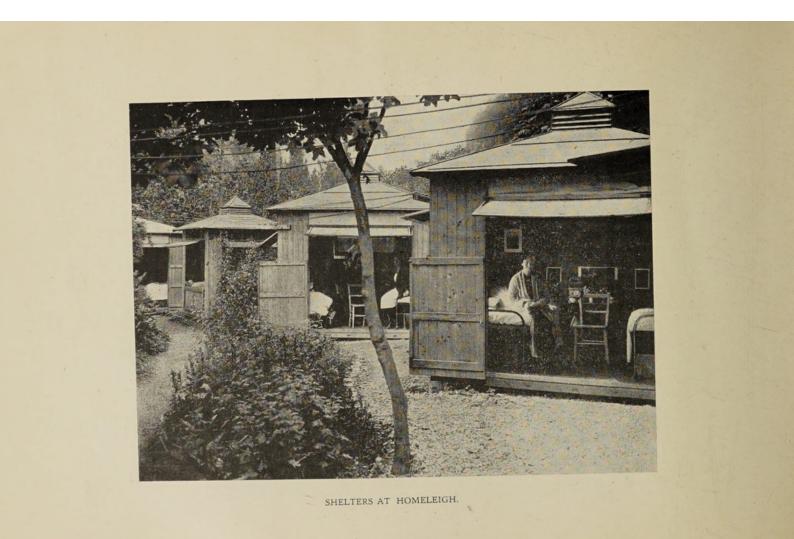
I have in my former reports given in detail the various Industries carried on at Papworth. These are now so well known and their extent so well appreciated that a somewhat shortened record must suffice. In all the Industries marked progress has been made during the year. Their position has become consolidated



Acting on the principle that learning a trade is not play, the Industries are a serious commercial concern, manned by sub-standard men whose livelihood is obtained by work therein. Our refusal to be drawn into any fanciful "training scheme" has been amply justified. Likewise our determination not to trade on sympathy for the ex-service man has also had its reward. An article, be it a greenhouse or other portable building from the Carpenters' Dept., or a dining-room suite from the Cabinet Making Dept., or a motor-trunk or suitcase from the Leather Travelling Goods Dept., will sell, and repeat orders be obtained, if it is made in workmanlike fashion, finished off well, and is at the "right" price. Sympathy for the sub-standard man is unfortunately shortlived. The commercial world is shy of introducing a sympathetic outlook into business, and quite rightly. Let the sub-standard man depend upon his own skill and ability, and with encouragement in a sheltered community he has a good chance of success. In the opposite table, the remarkable growth of the Industries is illustrated, a definite proof of the soundness of our arguments. The Industries during the year have had to shoulder the great burden of finding a staff for Preston Hall. They have given of their best, and the success they have made of this new undertaking shows that they carried the spirit of endeavour with them, and held to a high standard of achievement.

SOCIAL.

Perhaps this heading is a little misleading, but I use it to describe the life in the Village Settlement, which although so closely linked with the medical and industrial side is yet a thing apart. While I have maintained my definition of a colonist as a free Englishman in a free English village, it is delightful to record that this freedom is supported by active co-operation on the part of all concerned; co-operation in maintaining health; co-operation in industry; co-operation in play



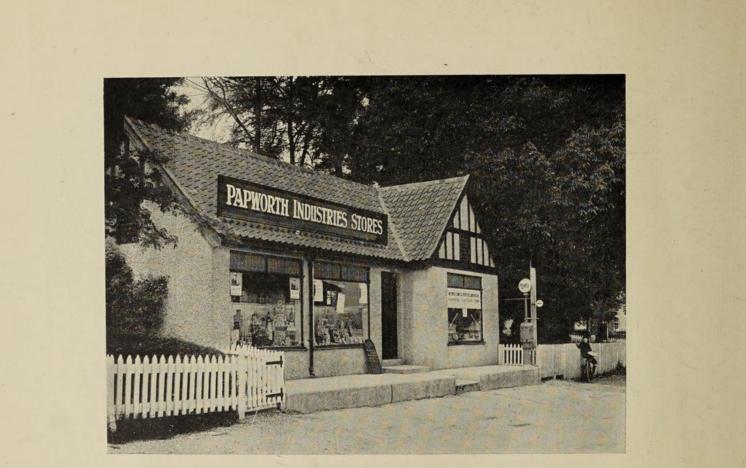
and amusement. More and more is one impressed with the interdependence of which I have written from time to time, and it is because we are careful to keep this group of ideals unimpaired that we have had the measure of success we have such pleasure in recording.

As a medical visitor recently remarked: "The life in the village seems to be a prolongation of the well-ordered life lived in a sanatorium." I have tried during the last ten years to make this clear.

With the increase in population of our village, the social activities increase. The Parish Council, the various Sports Clubs, the Horticultural Society, which holds its Annual Show in the Hospital grounds, the Boy Scouts and Girl Guides, as well as the local Branches of the Women's Institute and the British Legion, all have their work to do for the general welfare. We have been able to hold a kinematograph performance every week during the winter months, thanks to the generosity of the Gaumont Company, who for several years past have supplied us with a weekly programme of films.

The religious life of the Community, finds centres in the Parish Church and a Nonconformist Chapel. In short, Papworth is a complete and self-sufficing community, and to write the history of a year's activities would require the columns of the local paper. The various departments are illustrated in this report, and space prevents a further detailed description. I am anxious rather that the underlying principles of the scheme should be understood, than a mass of detail described which may only obscure the main issue. The numerous enquiries about Papworth from this country and abroad can best be answered by sending a copy of this Annual Report.

An organisation such as this depends on the hearty support of many workers.



THE VILLAGE STORES.

To the managers and foremen of all the departments of the Industries I tender very sincere thanks. They have shown by their work during the year that progress can not only be maintained but consolidated. To the Nursing Staff my thanks are especially due for their patience and fortitude. The section of the Hospital devoted to advanced cases needs their constant care, and letters of appreciation from relatives of patients tell me that this has been bestowed in no grudging manner.

To the Matron my thanks are freely given. During the ten eventful years under review she has shared with me the responsibilites and anxieties of a great venture. Whether as Editor of the Christmas Magazine, or as Secretary of the Welfare Fund, or as President of the Women's Institute, she seems to find time to add to her already arduous duties as Matron, and her help is indeed invaluable.

Dr. L. B. Stott, has again put me deeply in his debt by his constant care and attention to the clinical and research side of the Institution. Added to this, his work amongst the families in the Village is of the greatest value.

During the year Dr. W. B. Stott and Dr. C. R. Fielding, have filled the post of House Physician with distinction.

Last but not least I am indebted to the Committee of Management for their wholehearted support and co-operation, and for the opportunity given me of putting these theories into practice.

THE Matron acknowledges with grateful thanks gifts, both in money and kind, from the following donors during 1925:

A friend, Paris. Lady Allbutt, Cambridge. Miss Ashfield, Cambridge. Messrs. Barrett and Son, Cambridge. Barton Women's Institute. Boots the Chemists, Cambridge. Mrs. Brown, Hampstead. Captain R. G. Briscoe, M.P. British Red Cross Society. E. J. Bringloe, Esq., London. Messrs. Burgoyne and Burbidge, London. Mr. H. R. Burley, Hampstead. Mr. R. Butcher, The Directors of the Cambridge Instrument Company. Mrs. and Miss K. Chapman, Cambridge. Miss Cochrane, Croxton. Messrs. Coote and Warren, St. Ives. Coton Women's Institute. D. Connington, Esq., Godmanchester. Mr. A. Davidson. Mrs. E. Dimsdale, Cambridge. Major A. Don, Aberdeen. Mr. Emmans, Fordham. Dr. C. R. Fielding. Mr. S. E. Fordham, Cambridge. Mir, S. L. Fordham, Cambridge. Mr. Musgrave Francis. Mr. W. Furniss, Hilton. Miss Godfrey, Huntingdon.

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CAMBRIDGESHIRE TUBERCULOSIS COLONY, PAPWORTH HALL, CAMBRIDGE.

Estate Income and Expenditure Account for the year ended 31st. December, 1925.

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General Income and Expenditure Account for the year ended 31st. December, 1925.

Expendito Tol Medical Officers', Matron's, and Chaplain's Solaren	2268	* 19	4 4	4		4	By/ Income. & s. d. & s. d.
Office Salaries	545		10	2814		2	Charges for Patients (including conveyance) 20602 17 8
Wages of Norsing Staff Wages of General Staff	1175 3762	58	25			7	Less : Training Grout paid to Industrial Sectors on 2187 5 0
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			1	627161	12	6	£27161 12 6

Balance Sheet 31st. December, 1925.

Lisbin	Wies.				As	Here .					
Accumulated Fund Balance as per last Account Doactions received in 1925	د د. 130023 16 4 115 0 0		*		Capital Outlay: Balance as per Int Account	4 125180 1807	1. 18 7	1 05	¢		4
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Repairs & Renewals Reserve Fund : Balance av per last Account Estate Account Balance		602 971	14 14	6 9	Account at 31 st. December, 1924 Loss : Excess of Income over Expending for year to 31st. December, 1925	. 55		5	64		
		6141632	15	7					£143632	15	7

INDUSTRIAL SECTION.

Trading Account for the Year ended 31st. December, 1925.

$ \begin{array}{cccccccccccccccccccccccccccccccccccc$	Expension	area.								Income.							
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Balance Sheet 31st. December, 1925. Lawine: A serie: A serie: A serie: A serie: A serie: A serie: Soundy Constraint: A serie: A serie: Constraint: A serie: <th colsp

INDUSTRIAL SECTION.

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CAMBRIDGESHIRE TUBERCULOSIS COLONY. MATRON'S WELFARE FUND.

Summary of Receipts and Payments for the Year ending 31st. December, 1925. Receipts. Payments.

Balance as at 1st. January, 1925:	6 4 6	6 6 6	Byl		6		4
Cash at Bash			Assistance to hearders during temporary illness		14	9	9
do, in Hand			Subsistence Allowances towards expenses of p	ationts not fully			
Loss to Wittless Fund	79 15 3		paid for by Local Authorities		39	2	
	100 0 10		Monetary Assistance to Residents in the Vill				1
	158 8 10				29	1	
Less Balance due to Magazine Fund	24 13 10	100 10 0	Presimers			6	6
		133 15 0	Grants to Families during patients' illisent		7	6.	7
Durations Received			Pocket Money and Loans for Patients without a	eparate income	- 16	7	3
Addiald Miss	2 5 0		Eatra Delicacies to Villagers during illues			13	0
Barrett L. Mr	1 0 0		Travelling expenses of Patients' relatives			10	7
Boots Chemists Ltd.	2 2 0		Energency grants to Widows		2	19	3
	2 0 0		Traveling and Board Expenses of Patient's ch	Adam or and and	i	0	0
	19 6		Descent in West Area by Released to the				
	10 0 0		Payment for Wark done by Bed-patients		2	10	6
			Conveyance Expenses in connection with Con-	conts given for			
	8.0		Villagen and Patients		5	0	0
			Expenses of Children's Party		3	7	6
			Balance of Magazine Account 2924 paid off		2	2	2
	2 0 0		Chopus Book, Printing, Postages, etc.		3	19	ĩ
	2 6						
	2 2 0		Bask Charges		1	1	0
	26						
	1 0 0						
	100 M						
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	_ 1 0 0						
	10 0 0						
	76		Belance :				
Howard Mrs	30 0		Loss to Wireless Fand:				
Higher Mr. A. M. (patient's relative)	200			144 A. 14			
	2 0 0		Amount expended to date	141 18 0			
			less Contributions received				
			fram Patients, House Com-				
			mittee and School Concert	38 13 1			
Lararus Mr. P	6 0 0						
	1 1 0			100 4 11			
	5 0		A 1	103 4 11			
Lewis Mr. G.	30 0		Cash at Bank	302 0 8			
	3 10		Cash in Hand	1 1 3			
	25 0 0				206	6	10
	20 0						
Sanger Mr. W. (ra-patient)	1 0 0						
Shelmersine Miss (patient's relative)							
(naturation)	8 0 0						
Steinerdine Mr. F. (patient's relative)	10 0 0						
Stewart Miss F. L	- 6 0						
Sotton & Sons	1 1 0						
Westward Mr. S. Mr. Co.							
Wonbwell Mr. & Mrs. (ex-patient)	10 0						
	1 0 0						
Anonymous Box	4 16 5						
Special Fees handed over by Dr. L. B.	Statt 33 7 9						
Church Collection per Rev. W. S. Ports							
		157 6 0					
Profit on Visitors' Tess		5 2 0					
Belavor, Weedbard Menerial Fand.		14 0					
Proceeds Wellars Concast, 27th, Never		50 10 C					
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	ana	1 11 0					
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		4351 2 8			4351	-	8
		and the second s			4304		
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Evertify that Elsor examined the looks and wondners relating to the above semanary of the Welfare Fund, and that is my opinion it down a correct view of the state of the Fund's allocies semeding to the bast of my information and the explorations given to not.

29th. January, 1926

(Signel) W. E. BOWYER, Certified Access

