

**Annual report of the Derby Area Hospital Management Committee :  
1948-49.**

**Contributors**

Derby Area No. 1 Hospital Management Committee.

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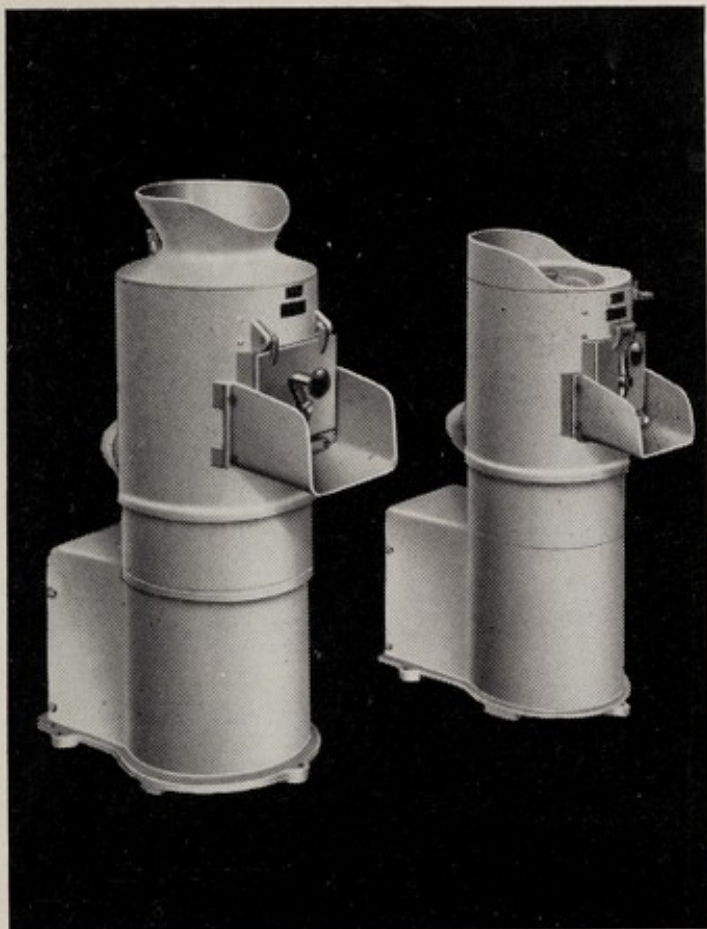
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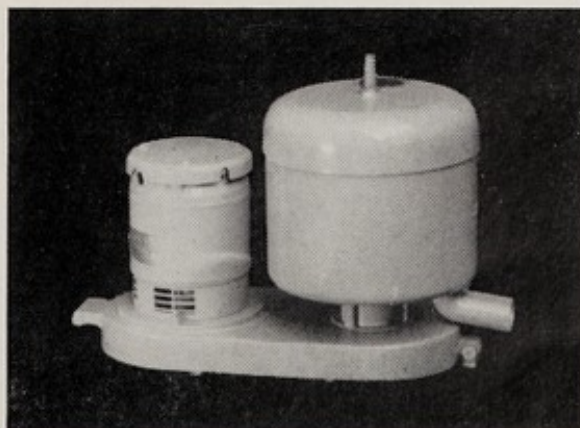
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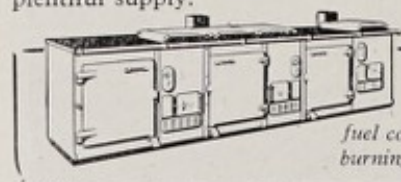
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# ANNUAL REPORT

*of the*

DERBY AREA No. I

HOSPITAL MANAGEMENT

COMMITTEE

*5th July, 1948, to the 30th June, 1949*

*Published for the Committee*

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### CONSULTANT STAFF

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C. D. W. Eddowes, Esq.			

(N.B.—This list was prepared to show the Consultant Staff as at the 1st October, 1949.)



# HOSPITALS

<i>Hospital Address &amp; Telephone No.</i>	<i>Type</i>	<i>Bed Comple- ment</i>	<i>Medical Supt.</i>	<i>Chief Lay Admin. Officer</i>	<i>Matron</i>
Derbyshire Royal Infirmary, London Road, Derby Telephone No. 44255	General	416	—	J. W. Owen, Esq.	Miss Charlton
*Manor Hospital, Utttoxeter Road, Derby Telephone No. 44662	Chronic Sick	694	—	D. D. A. Whelan, Esq.	Miss McAlister
City Hospital, Utttoxeter Road, Derby Telephone No. 3261	General	312	Dr. R. G. Cooke	E. Cholerton, Esq.	Miss Cooper
Bretby Hall Orthopaedic Hospital, Nr. Burton-on- Trent Telephone No. Burton 2644	Orthopaedic	147	R. Lunt, Esq.	—	Miss Fotheringham
Derbyshire Hospital for Sick Children, North Street, Derby Telephone No. 45841	—	84	—	F. T. Wilton, Esq.	Miss Martin
Derbyshire Hospital for Women, Friar Gate, Derby Telephone No. 45401	—	60	—	F. T. Wilton, Esq.	Miss Pettitt
Queen Mary Maternity Home, Duffield Road, Derby Telephone No. 44643	Maternity	36	—	J. Cobb, Esq.	Miss Doncaster
Nightingale Maternity Home, London Road, Derby Telephone No. 44433	Maternity	30	—	J. Cobb, Esq.	Miss Doncaster
Holbrook Maternity Home, Holbrook, Derbyshire Telephone No. Horsley 319	Maternity	24	—	—	Miss Rook
Darley Hall Maternity Home, Darley Dale, Derbyshire Tel. No. Darley Dale 176	Maternity	20	—	—	Miss Truman
Etwall Rehabilitation Centre, Etwall, Derbyshire Telephone No. Etwall 5	Rehabilitation	12	—	F. Bailey, Esq., M.B.E.	Miss Starsmore (Asst. Matron)
Ashbourne Maternity Home, Ashbourne, Derbyshire Telephone No. Ashbourne 102	Maternity	10	—	—	Miss Counter

\* A proportion of the accommodation at this hospital is used by the Derby County Borough Council for aged and infirm people, children, etc.

The Management Committee are also responsible for

the hospital services provided in the following Derbyshire County Council establishments :—

Stone House, Ashbourne .... 27 beds

The Grove, Shardlow .... 102 „

the out-patient specialist services provided at the following School Clinics :—

Temple House, Mill Hill Lane, Derby

Swadlincote Orthopaedic Clinic, Swadlincote

the administration of the Derby School for Occupational Therapists, 29, Hartington Street,  
Derby (Principal of the School—Miss I. Fitchett)



## VISITING HOURS AT THE HOSPITALS

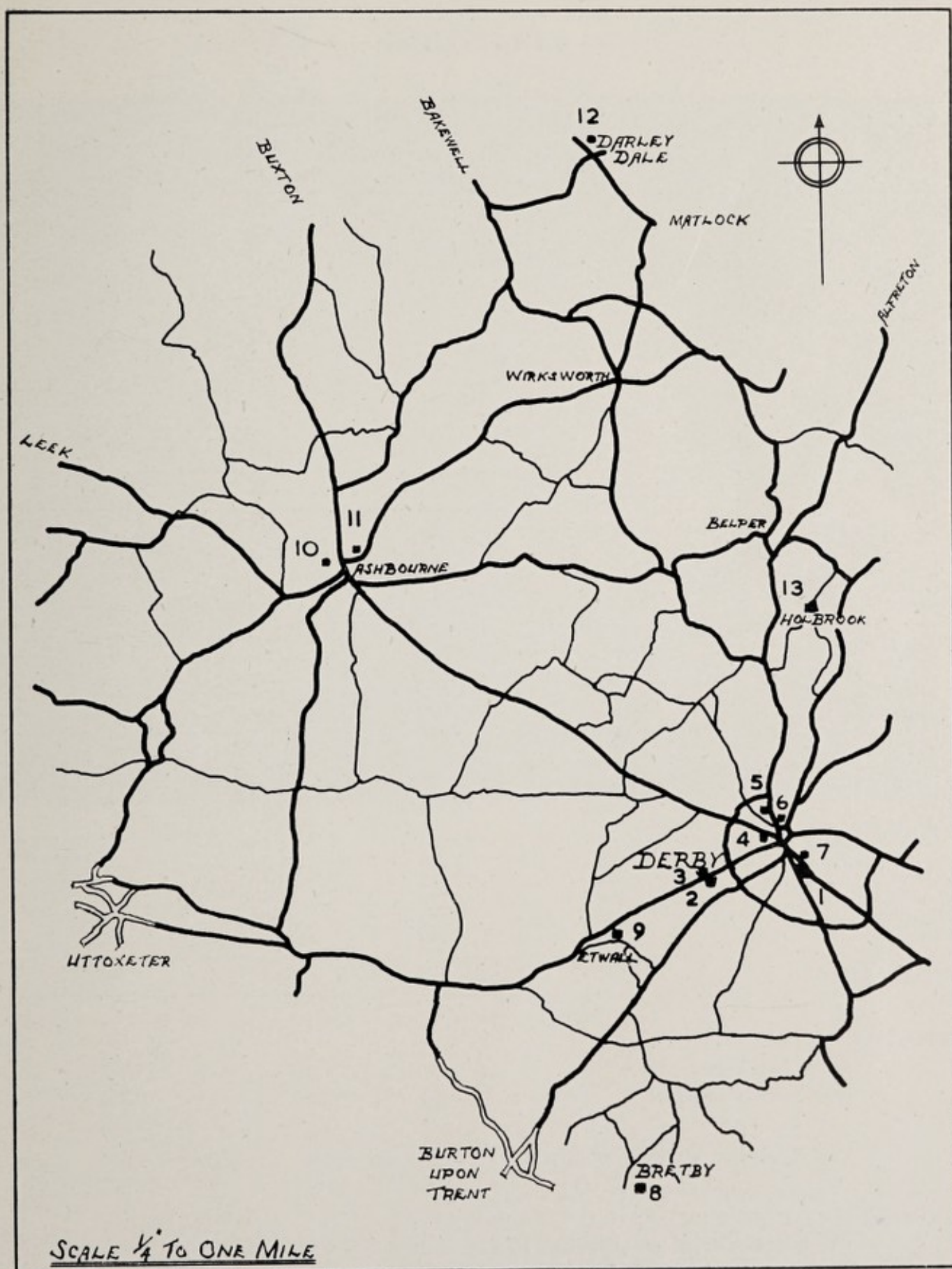
(as at the 1st October, 1949)

DERBYSHIRE ROYAL INFIRMARY		Tuesdays .....	6.0 —7.30 p.m.
		Fridays .....	2.0 —4. 0 p.m.
		Sundays .....	2.0 —3. 0 p.m.
MANOR HOSPITAL	SICK WARDS	Monday to Friday .....	7.0 —7.30 p.m.
		Saturday and Sunday .....	2.30—3.30 p.m.
	OTHER DEPARTMENTS	Every afternoon .....	3.0 —4. 0 p.m.
		Monday and Wednesday .....	7.0 —7.30 p.m.
DERBY CITY HOSPITAL		Saturday and Sunday .....	2.30—3.30 p.m.
		Monday to Friday .....	7.30—8. 0 p.m.
Maternity Patients		Wednesday .....	7.30—8. 0 p.m.
		Sunday .....	2.30—3.30 p.m.
Child patients		Sunday .....	2.30—3.30 p.m.
BRETBY HALL ORTHOPAEDIC HOSPITAL			
Adults .....		One week—Thursday and Sunday	
		Following week—Wednesday and Saturday alternating.	
Children .....		Fortnightly—Saturday	
		Alternate fortnight—Sunday	
		All 2.0—4.0 p.m.	
DERBYSHIRE HOSPITAL FOR SICK CHILDREN			
		Sunday .....	2.30—3.30 p.m.
DERBYSHIRE HOSPITAL FOR WOMEN			
		Wednesday .....	6.30—7.30 p.m.
		Saturday .....	2. 0—3.30 p.m.
		Sunday .....	2. 0—3. 0 p.m.
QUEEN MARY MATERNITY HOME			
		Tuesday and Friday .....	7. 0—7.45 p.m.
		Sunday .....	3.15—4. 0 p.m.
NIGHTINGALE MATERNITY HOME			
		Tuesday and Friday .....	7. 0—7.45 p.m.
		Sunday .....	3.15—4. 0 p.m.
HOLBROOK MATERNITY HOME			
Husbands .....		Each evening	
		(except Wednesday)	7. 0—8. 0 p.m.
General Visiting		Wednesday .....	3. 0—4. 0 p.m.
		Sunday .....	7. 0—8. 0 p.m.
(two visitors)			
DARLEY HALL MATERNITY HOME			
		Monday, Tuesday, Thursday, Friday, Saturday .....	7.15—8. 0 p.m.
		Wednesday and Sunday .....	3. 0—4. 0 p.m.
ETWALL REHABILITATION CENTRE			
		Friday and Sunday .....	2. 0—4. 0 p.m.
		Tuesday .....	6. 0—8. 0 p.m.
ASHBOURNE MATERNITY HOME			
Husbands .....		Each evening .....	7. 0—9. 0 p.m.
General Visiting		Thursday and Saturday .....	2.30—3.30 p.m.
THE GROVE, SHARDLOW			
General .....		Tuesday and Saturday .....	2. 0—4. 0 p.m.
Maternity .....		Each evening .....	7. 0—8. 0 p.m.
		(except general visiting days)	
STONE HOUSE, ASHBOURNE			
		Wednesday and Saturday	2. 0—4. 0 p.m.

Map showing the area served by the hospitals under the control of the Derby No. 1 Hospital Management Committee. The map also shows the individual hospitals by numbers which are indicated on the list below.

1. DERBYSHIRE ROYAL INFIRMARY
2. CITY HOSPITAL
3. MANOR HOSPITAL
4. WOMEN'S HOSPITAL
5. QUEEN MARY MATERNITY HOME
6. CHILDREN'S HOSPITAL
7. NIGHTINGALE HOME
8. BRETBY HALL ORTHOPÆDIC HOSPITAL
9. ETWALL REHABILITATION CENTRE
10. STONE HOUSE, ASHBOURNE
11. ASHBOURNE MATERNITY HOME
12. DARLEY DALE MATERNITY HOME
13. HOLBROOK MATERNITY HOME





## STATISTICS

IN-PATIENTS TREATED	Period 5th July, 1948—30th June, 1949					Period 1st Jan., 1947—31st Dec., 1947				
	Medical	Surgical	Obstet- rical	Total	Ave. stay (days)	Medical	Surgical	Obstet- rical	Total	Ave. stay (days)
D.R.I. ....	1165	6674	93	7932	14	1039	5768	125	6932	15
Manor ....	737	—	—	737	44	532	—	—	532	50
City ....	991	3718	1125	5834	16	690	3638	1447	5775	12
Bretby ....	—	144	—	144	101	—	188	—	188	193
D.H.S.C. ....	525	1849	—	2374	11	554	1579	—	2133	12
D.H.W. ....	—	1084	397	1481	13	—	970	569	1539	12
Q.M.M.H. ....	—	—	634	634	12	26	283	241	550	12
Nightingale ....	—	—	795	795	12	—	—	789	789	12
Holbrook ....	—	—	415	415	10	—	—	350	350	10
Darley Hall ....	—	—	290	290	10	—	—	87	87 <sup>(a)</sup>	10
Etwall (b) ....	—	106	—	106	42	30	—	—	30	42
Ashbourne ....	—	—	209	209	11	—	—	197	197	11
Grove, Shardlow ....	261	—	78	339	97	279	—	87	366	86
Stone H., Ashbourne	90	—	8	98	178	68	—	8	76	207
<b>TOTALS</b>	<b>3,769</b>	<b>13,575</b>	<b>4,044</b>	<b>21,388</b>	<b>18</b>	<b>3,218</b>	<b>12,426</b>	<b>3,900</b>	<b>19,544</b>	<b>17</b>

(a) Opened in July, 1947.

(b) Prior to 5th July, 1948, this hospital was an Infectious Diseases Hospital.

OUT-PATIENTS TREATED	Period 5th July, 1948—30th June, 1949		Period 1st Jan., 1947—31st Dec., 1947	
	Total number of patients treated	Total number of attendances	Total number of patients treated	Total number of attendances
D.R.I.—				
Out-patients' Dept. ....	36,304	232,554	25,967	176,241
Casualties Dept. ....	24,061	43,878	21,005	42,525
City ....	5,058	17,361	6,375	23,920
D.H.S.C.—				
Out-patients' Dept. ....	5,651	21,673	4,684	23,309
Casualties, etc. ....	383	2,746	792	3,194
D.H.W. ....	1,994	7,312	1,390	6,958
Q.M.M.H. ....	802	4,172	—	—
Nightingale ....	1,100	5,181	950	5,069
Etwall ....	20	299	—	—
<b>TOTALS</b>	<b>75,373</b>	<b>335,176</b>	<b>61,163</b>	<b>281,216</b>

### WAITING LISTS

At 5th July, 1948 ....	4,713
Additions during period ....	8,214
	<u>12,927</u>
Less Admissions and removed from Waiting List during period ....	6,964
At 30th June, 1949 ....	<u>5,963</u>

### DOMICILIARY VISITS

Visits paid by Consultants to Patients' Homes, 5th July, 1948—30th June, 1949 ....	979
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*Aerofilms Ltd.*

**Aerial view of  
Derbyshire Royal Infirmary**



# THE COMMITTEE'S REPORT

*In presenting this, their first Annual Report, the Committee have attempted to give a general outline of the present hospital service, and to include information which may be of value to the general public for whom the report was prepared.*

## How to obtain treatment

**H**OSPITAL treatment may become necessary because of some illness, disease, or defect, an accident which has been suffered, or for the very natural function of increasing the population. The methods of obtaining the necessary treatment differ. Normally, a person suffering from an illness will be under the care of a doctor either as a "panel" patient or as a private paying patient. The patient's doctor will arrange for hospital or specialist treatment either by applying for the patient's admission to hospital through the Bed Bureau, which is located at the Derbyshire Royal Infirmary, or by arranging for the patient to be examined by a Consultant either at a hospital out-patient Clinic or, if medically necessary, at the patient's home. Accident cases may follow the same procedure in the event of relatively minor injuries which are not of immediate urgency, but otherwise should be transported by ambulance to the Casualty Department at the Derbyshire Royal Infirmary, where they will receive immediate attention. Maternity patients desiring hospital confinement are referred to the Bed Bureau by the Obstetrics Officers of local authority or hospital clinics, but are only admitted if hospital treatment is necessary on either medical or sociological grounds.

Accident cases are admitted immediately if in-patient treatment is necessary; cases under the treatment of a doctor which become emergencies are similarly admitted immediately if so arranged by the doctor, and maternity cases accepted for hospital confinement are admitted as soon as necessary. Cases which are not emergencies are recorded by the Bed Bureau on waiting lists, and patients are admitted from the lists in order of medical necessity as beds become vacant.

## Ambulances

Ambulances for the conveyance of patients are provided by the local authorities. Ambulances required for emergency cases, *e.g.* road accidents, etc., may be summoned by anyone by asking the telephone operator for "Ambulance" in accordance with the instructions in public call boxes. Apart from street accidents and similar emergencies, and

the cases of women in labour about to enter a maternity hospital, calls for ambulances will only be accepted from hospitals, doctors, midwives and nurses.

## Hospital charges

There is no charge for hospital treatment, but, where accommodation permits, payment may be made, if desired, for greater privacy. There is also a small number of private pay beds in respect of which patients so desiring may make their own private fee arrangements with the doctor or surgeon concerned. The Minister of Health has specified maximum charges which may be made for the use of these beds.

Such charges as are laid down in the Road Traffic Acts in respect of the treatment of patients involved in traffic accidents are recoverable—normally from the Insurance Companies concerned.

## Patients' records

When a patient first attends hospital, either as an in-patient or out-patient, a record book is prepared which contains the relevant details of the patient, disease, treatment specified, treatment given, etc. At any time during his treatment, or on subsequent occasions, this book is immediately available for the information of the doctors, surgeons and nurses who are treating the patient.

## Treatment facilities

Derby is a fairly large hospital centre, covering a wide area, and is fortunate in possessing consultants and facilities for practically every type of treatment. In addition to the specialities which would be normal to a centre of its size, such as medicine, general surgery, orthopaedics (treatment of deformity, whether inherent or occasioned by accidents), gynaecology (diseases peculiar to women), paediatrics (children's complaints), eyes, ear, nose and throat surgery, psychiatry (mental illness), dermatology, etc. (skin diseases), diagnostic x-ray, venereal disease, etc., there are facilities for radiotherapy and neurology, and, by arrangement with visiting





*J. H. Fayers.*

**Nurses in training**



specialists, thoracic (chest) surgery and plastic surgery, all of which are specialities which would normally be provided only in much larger centres. In addition, such treatments as physiotherapy (physical medicine, *i.e.* massage, remedial exercises and electrical treatments), occupational therapy, dietetics, etc., have been greatly expanded in Derby, as is common generally. Laboratory facilities are necessary for such matters as blood and urine tests and the examination of specimens, and there are arrangements for the smaller hospitals, which do not possess adequate facilities for such tests, to have them carried out at larger hospitals.

Convalescent homes are available under the control of the Sheffield Regional Hospital Board, and arrangements for convalescence are made by the hospitals. Spa facilities for the treatment of rheumatism are also provided by the Regional Hospital Board. Dental treatment is provided for patients where necessary.

The Derby Area No. 1 Hospital Management Committee is responsible for the hospital and specialist treatment provided in the general hospitals,

special women's, children's and orthopaedic hospitals, maternity hospitals and chronic sick (long-stay patients) hospitals in the area. The Derby No. 2 Committee provides facilities for patients suffering from infectious diseases, tuberculosis, etc., and for the chronic sick, and the Derby No. 3 and No. 4 Committees administer the hospitals for mental patients.

In general, the consultant facilities provided in Derby, although mainly based on the Derbyshire Royal Infirmary, are inter-available between not only the hospitals in the Derby Area No. 1 Group, but between all the hospitals in all the Derby Groups. Consequently, the services of consultants in all the specialities covered are available locally to every in- or out-patient or prospective patient in the area.

### Care and welfare of patients

The work of the nursing profession merits much more eulogistic treatment than is possible in this report—it must suffice to say that their tradition of service has been maintained. It is difficult to visualise all the varied tasks which are comprised in the title “care of the patients”, but it will be realised that many patients are partially or entirely unable to care for themselves, and consequently must have their ordinary bodily needs attended to in addition to such treatment as is prescribed. Similarly, their need for mental recreation must be met.

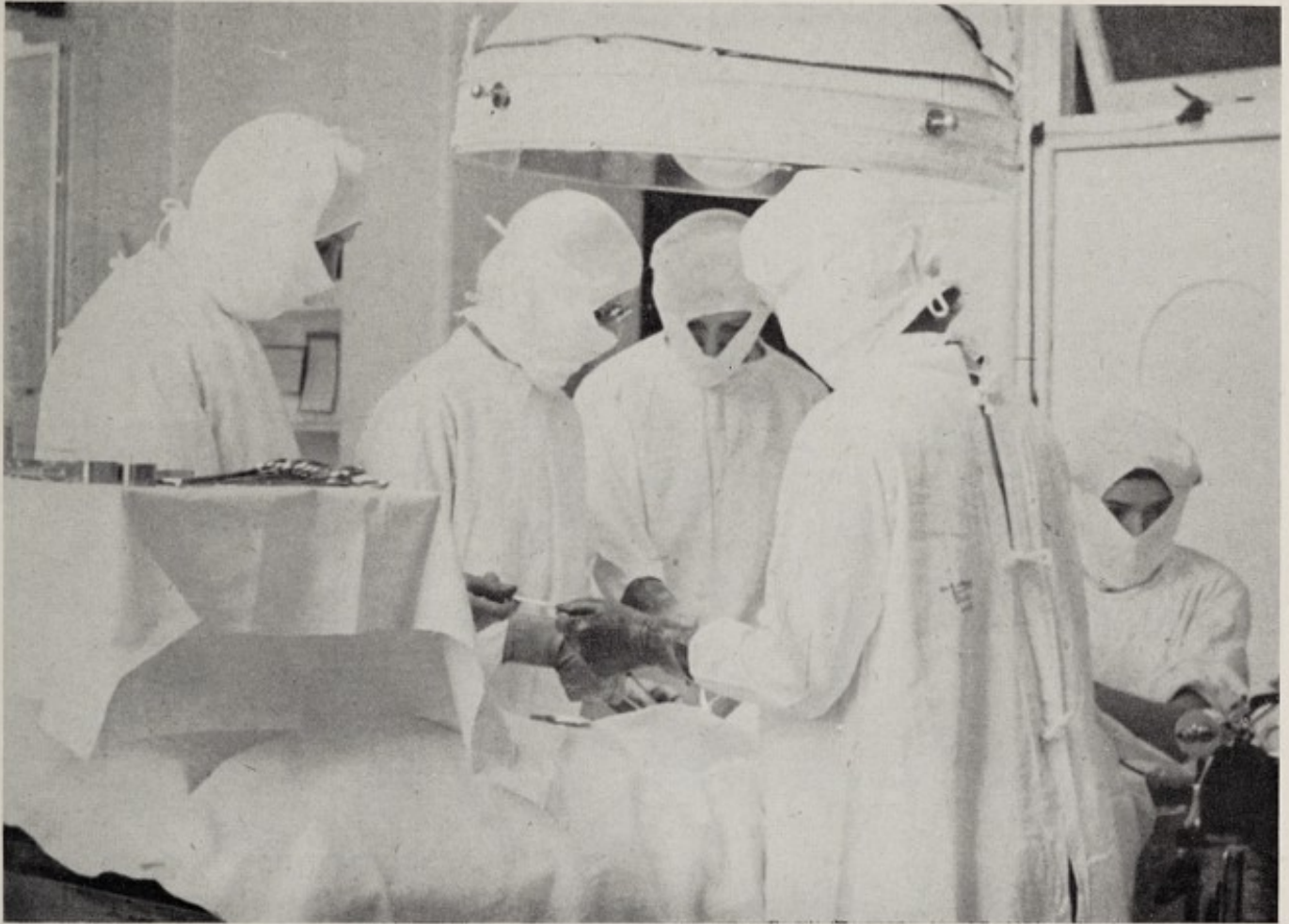
Religious services are held regularly in all hospitals. These, together with wireless sets, libraries provided and staffed by the Red Cross and Brabazon Societies, diversional therapy, and facilities for the patients to be visited by their friends and relatives, are perhaps the basic elements of welfare and are provided in the acute short-stay hospitals. In the long-stay hospitals many facilities are provided in addition to the foregoing. For example, educational instruction is given to the children of school age who are in-patients at the Bretby and Children's Hospitals—this service is provided by the Education Committees of the Local Authorities concerned. The Manor Hospital, which has a majority of long-stay patients who are mainly old people, pays great attention to welfare. Concerts are held; very valuable assistance is received from many voluntary bodies in bringing visitors to the patients and visiting and giving small presents to other patients who have no relatives; detailed individual attention is given to patients and any treatment that is beneficial is carried out, the patients often being conveyed by ambulance to other hospitals for this purpose.



*“Derby Evening Telegraph”*

**Christmas at the Derbyshire Hospital for Sick Children.**





*J. H. Fayers*

**Women in white**

# HOSPITAL SERVICES

## (1) BOARDS OF GOVERNORS OF TEACHING HOSPITALS

(1) The Teaching Hospitals are based on Universities having Schools of Medicine. The United Sheffield Hospitals are the only teaching hospitals in this region.

## (2) REGIONAL HOSPITAL BOARDS

(SHEFFIELD R.H.B.)

## (3) HOSPITAL MANAGEMENT COMMITTEES

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Advised by

THE HOSPITALS

(2) The Sheffield Regional Hospital Board is one of 16 Boards which cover England and Wales. Each Board has a population of approximately 3,000,000 to provide for. The Sheffield Board covers the whole or part of the following Counties : Derbyshire, Leicestershire, Nottinghamshire, Lincolnshire, Rutland and West Riding of Yorkshire.



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(3) The Derby Area No. 1 Hospital Management Committee is one of 30 Committees in the Sheffield Region, and is responsible for 14 establishments (hospitals and maternity homes) which provide general, maternity, etc., hospital treatment for a population of approximately 500,000 people in Derbyshire (except the Buxton and Chesterfield areas) and small adjoining parts of Leicestershire and Staffordshire.



As has been indicated, a great deal of voluntary assistance is given both by organisations and individuals. Gifts are received and, subject to any stipulations made by the donors, used for additional comforts and facilities for both patients and staff. For example, these gifts were used to supplement the State allowance for Christmas festivities, and it is felt, with some confidence, that the majority of patients unfortunate enough to spend last Christmas in hospital did receive some compensation, largely through the whole-hearted efforts of the hospital staffs. Some of the organisations who assist the hospitals are the Women's Voluntary Services, Red Cross and Brabazon Societies, Toc H, Catholic Women's Guild, and Baptist Missions.

The welfare of the patients at the hospitals is looked after by a full-time staff who interview patients or their relatives in order to assist, either direct or through other authorities, as the maximum benefit can be obtained from the treatment given by the doctors and nurses if the patient is free from external worry. A great part of the pre-hospital and office work and the after-care is carried out by the Local Authority in whose district the patient resides, through the Department of the Medical Officer of Health. This welfare work is of a comprehensive nature and is often initiated by the hospital welfare worker drawing the local authorities' attention to the case which is followed by a visit from the health visitor. This work has been very ably described in a booklet issued by the Derby Corporation, entitled *National Health Service—What does the Corporation Provide?*

### Derby City Hospital

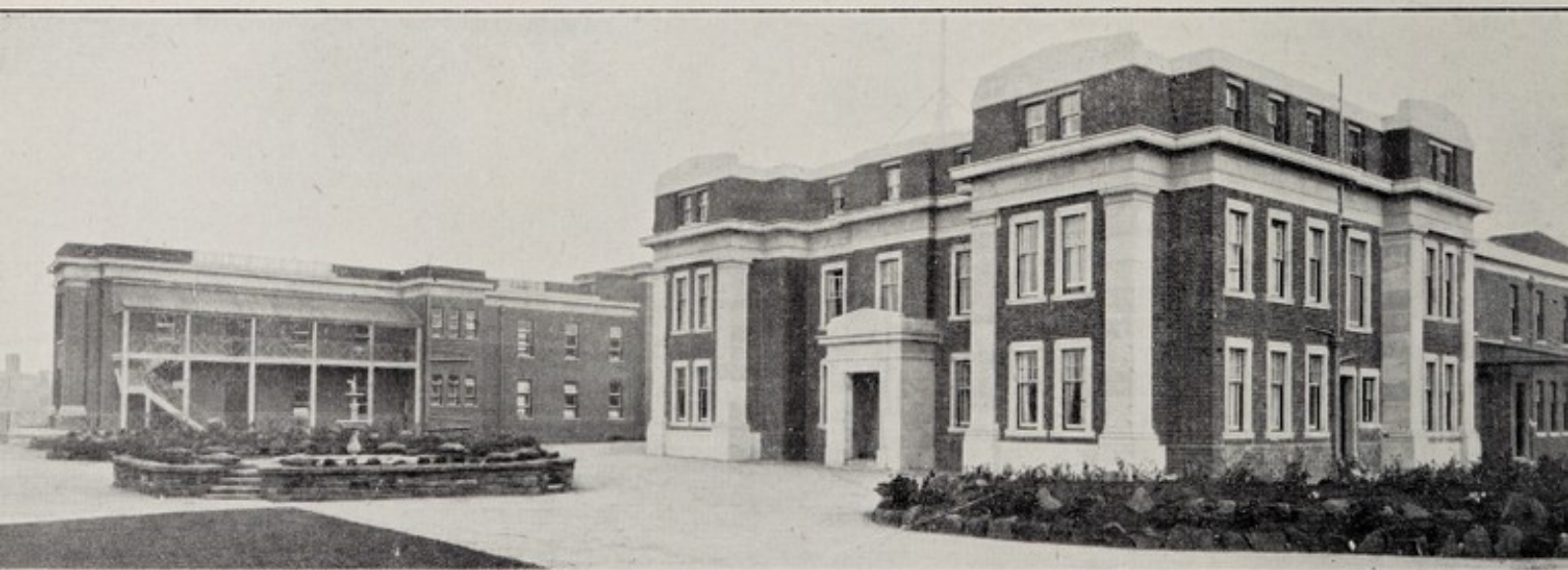
### Organisation of the service

As from the 5th July, 1948, it became the duty of the Minister of Health to promote a comprehensive health service. The Minister appointed Regional Hospital Boards to deal with the hospital and specialist services provided, or to be provided, in the regions as defined, and the Regional Hospital Boards in turn appointed Hospital Management Committees to manage and control groups of hospitals or individual hospitals. The "Family Tree" produced at the centre of this report shows in diagrammatic form this delegation of responsibility. In general, the Board's duties are supervisory, and they deal with the overall hospital and specialist services in the Region—they decide and continually review the services which should be provided, and augment existing services to these standards—while Management Committees deal with the services provided in the particular hospitals under their control.

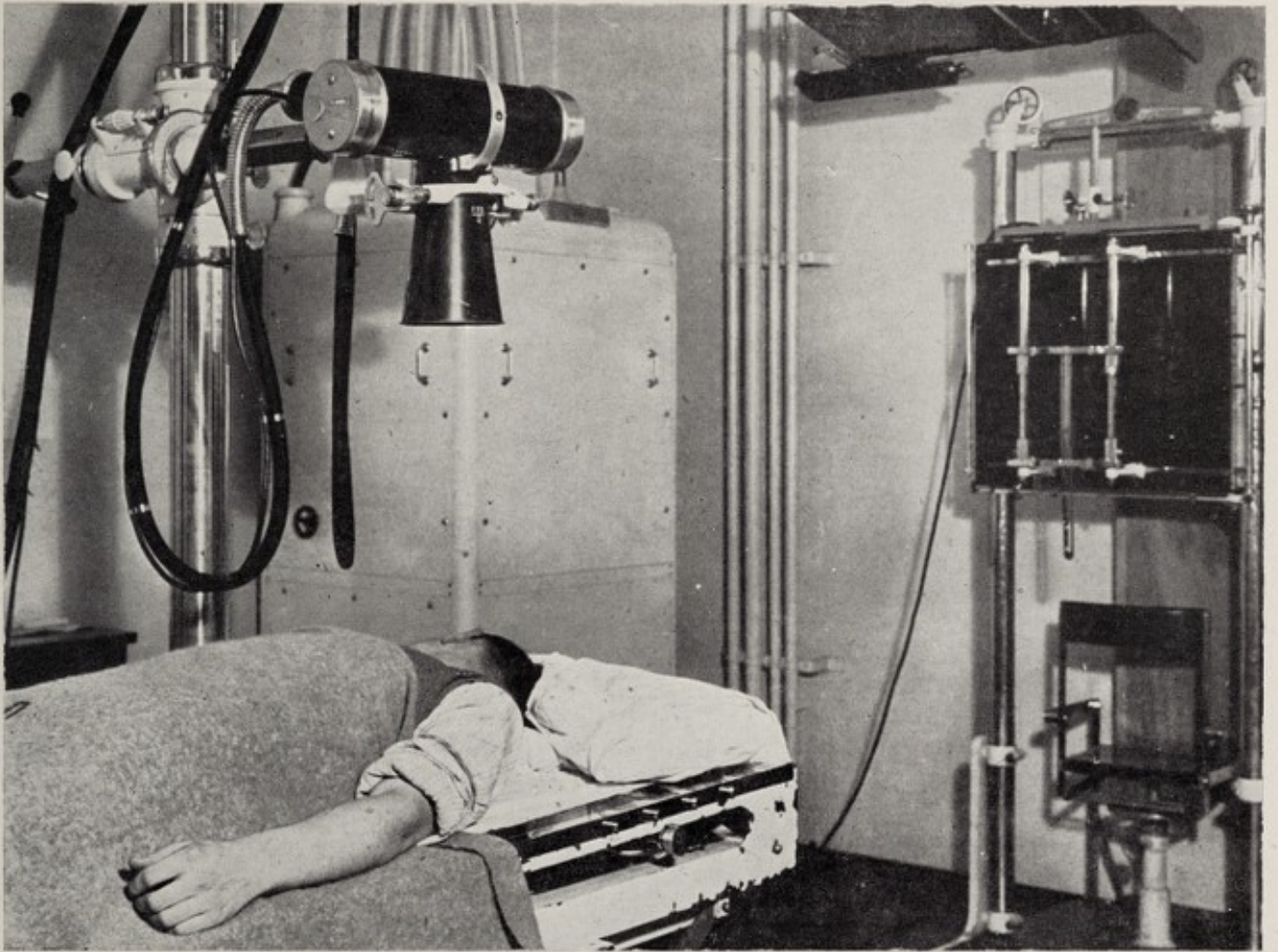
Management Committees, therefore, need to plan and review the services provided in their specific hospitals and to staff, equip, maintain, and generally administer these hospitals.

### The year summarised

This year, the first under the new regime, has been an extremely busy year in the hospital world, particularly so for the Management Committees who have had the tasks of taking over the hospitals, with all the attendant complications with regard to title deeds to property and financial holdings; continuing and improving the services; ensuring that the day-to-day work in all spheres was smoothly and effi-







*J. H. Fayers.*

**Diagnostic X-Ray at the  
Derbyshire Royal Infirmary.**



ciently carried out ; standardisation (particularly of administration) ; improving staff recruitment, training and welfare ; providing equipment ; maintaining and improving hospital buildings ; administering the various ancillary services such as farms ; and planning for, and in a necessarily piecemeal manner, working towards, future improvements both in buildings and organisation.

Very heavy demands have been made upon the time and services of the members of the Derby No. 1 Management Committee. 111 meetings, either of the Committee or its various Sub-Committees, were held during the year, and in addition, two weekly rotas of members have been in force, which ensured that all the local hospitals have been visited weekly and the more distant hospitals such as the Darley and Ashbourne Maternity Homes, monthly. Quite apart from their visits as members of a periodical rota, many members have also made a number of individual visits to various hospitals so that the benefit of their first-hand knowledge was available when problems were under discussion. It is not always appreciated that the members give their services and thus continue the fine tradition of voluntary work for hospitals.

The Committee's administrative offices have been established at Babington Lane and the Senior Group Officers and their staffs have been appointed. Administration has been co-ordinated, financial control and the payment of wages and accounts have been centralised, thus effecting economy by the use of accounting machines and specialised staff, and the central purchasing of supplies on contract has been inaugurated. A Group Engineer has been appointed and the hospital maintenance staffs augmented. As a result, the direct labour force was able to carry out a great deal of constructional work in addition to the "normal" repairs and maintenance, and economies in both time and money have been effected. The description "normal" maintenance is used only to indicate work which is usually understood to be the duty of artisans who are in the Committee's direct employment. Actually, the maintenance work which has been carried out in the last year was abnormal, both in its amount and scope, as there were very considerable arrears which accumulated during the war. Most of the hospitals had not been painted for years, two bad outbreaks of dry rot had to be dealt with, extensive roof repairs were necessary, and a great deal of engineering and electrical equipment needed replacing.

An appointments system for out-patients has been commenced at the Derbyshire Royal Infirmary ; the

scope of the Bed Bureau services has been widened ; and an obstetric flying squad consisting of specialist surgeons, nursing staff and technicians, has been formed, its services being available on call when any emergency arises during confinements and births, whether occurring at a patient's home or in hospital.

## **The future**

The main features of the National Health Service Act are that the health services are free to all who wish to take advantage of them, and are backed by all the power and resources of the State ; consequently, where necessary, they can be planned on a wide basis. The State's resources, however, are not inexhaustible and improvements in the service will be gradual and will depend on the money available, therefore the public can help greatly by realising this fact and by using the service with discretion and economy.

With regard to planning, whilst overall control is retained by the Minister, and no doubt any revolutionary new techniques which might completely change our views on curative medicine would be developed under his general surveillance, the planning of the operational hospital service and its normal evolution is in the hands of the Regional Hospital Boards.

This Management Committee can, and has, planned to improve its own services and hospitals. A few of the schemes which are scheduled to be carried out in the near future are :—the adaptation of "Wilderslowe", Osmaston Road ; adaptation of houses to form a new Sisters' Home for the Children's Hospital ; new boilers and engineering equipment at the Derbyshire Royal Infirmary and the Children's Hospital ; new Milk Kitchen at the Children's Hospital ; new Canteen and Ante-natal Clinic and the extension of the Nurses' Dining Room at the Derby City Hospital ; and the establishment of a central Radiotherapy Department—treatment sets, consulting rooms, wards, etc., at the Derbyshire Royal Infirmary.

## **Obituary**

It is with very deep regret that the Committee record the demise of the late Captain J. A. E. Drury-Lowe, a Patron and formerly, for many years, President of the Derbyshire Hospital for Sick Children.

## **Conclusion**

In presenting this report on behalf of the Management Committee, very grateful acknowledgment





*J. H. Fayers.*

**Nurses' Home at Bretby Hall Orthopædic Hospital**

must be made of the assistance which has been received from the voluntary organisations and private individuals who have helped with gifts, donations and bequests and given freely of their services ; the local authorities, the Derby Corporation and the Derbyshire County Council, and their Officers, who assisted considerably in the commencement of the service by administering the former local authority hospitals until the Management Committee were able to take them over ; the Regional Hospital Board and their Officers for their help and advice ; the Patrons and members of the Boards of the former voluntary hospitals ; and all those who have taken an active interest in the hospital service.

The gifts, to which reference has been made, amounted during the year to a total of £12,674 14s. 1d. It is not possible to mention every gift individually, but it is thought that it would be of interest to the public to know of the distribution of the surplus available from the former Derbyshire Hospitals Contributory Association which amounted to £10,502 17s. 9d. Derby Area No. 1 Hospital Management Committee received £7,190 0s. 6d. divided between the hospitals as follows :—

Derbyshire Royal Infirmary £4,663 4s. 10d., Derbyshire Hospital for Sick Children £1,006 12s. 1d. Derby City Hospital £944 19s. 6d., Derbyshire Hospital for Women £575 4s. 1d., and Derby Area No. 2 Hospital Management Committee received £1,312 17s. 3d., shared between their hospitals. In addition, an amount of £2,000 was received to be known as the "Walthall Fund" which was created so that the Chairman of the Management Committee should have this money available for any special purposes in the interest of the service. This fund was suggested by and named in honour of Brig.-General E. C. W. D. Walthall, the founder-Chairman and last Chairman of the Association, and will enable future Chairmen of the Committee to provide, within the limits of the money available, services not covered by any other financial source.

It will be appreciated that this report is but a brief outline of the work done, the interchange of services and equipment between hospitals, and the improvements in patients' comforts. A great change has been effected smoothly and successfully through the co-operation and help of all those connected with the National Health Service.

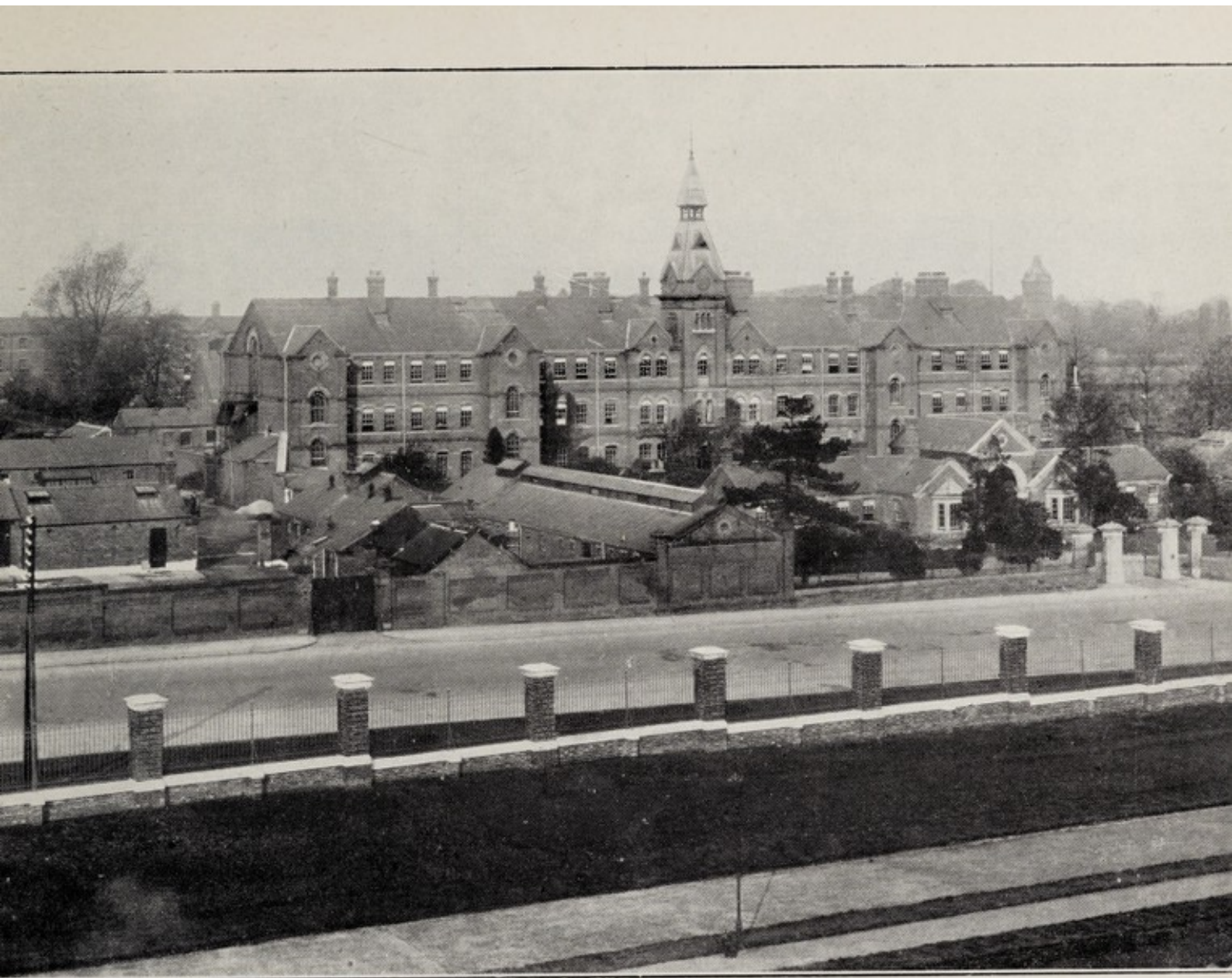
*E. A. Armstrong*

CHAIRMAN.

*Kenneth Sumner.*

SECRETARY.





*Derby Corporation.*

**Manor Hospital, Derby**



*J. H. Fayers*

**Wards at the Derbyshire Royal Infirmary  
before alteration—**





*J. H. Fayers.*

—and after alteration showing the use of curtain  
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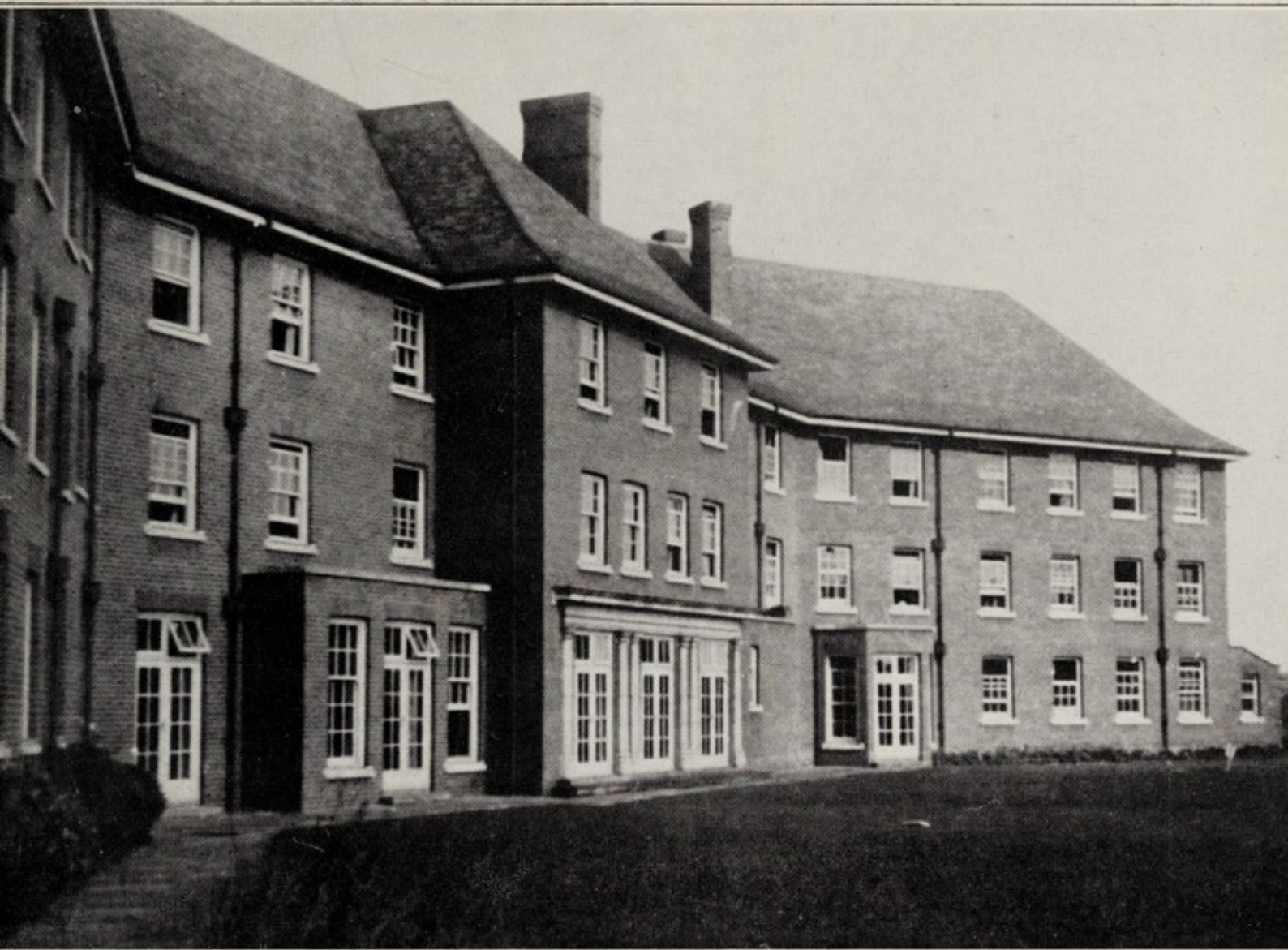
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