

The early history and heritage of the Royal Hospital for Neuro-disability

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My talk today will highlight some of the documents found in the hospital archive and what they can tell us about the patients who came to the hospital during the 19th century.

The Royal Hospital for the Incurables was founded at Mansion House on the 31 July 1854. The founder of the hospital, Rev Andrew Reed, was a clergyman and philanthropist who over the course of his lifetime established five benevolent charities. Reed had seemingly begun to meditate on the scheme back in 1845: In a letter, dated January 1845, he mentioned that during a Board meeting for the Wanstead Infant Orphan Asylum, he had raised a motion that the charity would admit an infant whose father was shown to have a medical certificate stating that they were hopelessly disqualified for the duties of life, even though the child was not an orphan. He wrote: *“it would be blessed thing if we had a provision in the land to give ‘shelter to the despairing incurables”*.

The first appeal of the newly established Royal Hospital for the Incurables, echoed Reed’s earlier words in that it set out to administer help to those ‘hopelessly disqualified from life’ and provide ‘a final home, where every comfort may be enjoyed to mitigate their affliction, and where the best medical skill and care may be had, with the hope of making disease something less than incurable”.

It should be mentioned that that the constitution of the hospital did not provide universal entry to those deemed to be incurable. As article III states, the hospital would not admit patients who could be administered by other specialist medical charities, such as institutions for the blind, infectious disease or learning difficulties. Nor would the hospital admit

anyone classified as a 'pauper case', which as the constitution went onto coldly say, 'the law of the land sufficiently provides for the wants of that class. This criterion of course did of course change over the history of the hospital but it was still explicitly stated in the annual reports in the 1943 that the hospital was '*intended for the middle classes*'.

The hospital first home was in Carshalton, Surrey, in a former workhouse, this however soon proved too small for the steady increase in applicants, and therefore the hospital moved to Putney House in 1860, before moving to the current site in West Hill in 1863.

From the hospital's inception, two types of patients were admitted for partial or full relief from the charity. The 'out-patients' or 'pensioners' were the most numerous. These patients lived at home and were supported by friends or family. They received an annual sum of £20.00, around £1200 in today's money, to help support them and they lived across the United Kingdom. The number of pensioners peaked at around 700 in 1920s and then gradually declined before this type of admission was discontinued in 1951, with the last remaining pensioner dying in the 1990s.

The 'inmates' or 'home patients' were those who resided within the hospital itself. A limited number of patients were admitted as 'paying patients' but predominantly admission was through an electoral system. Elections were held twice a year, In May and November. Applicants would first have to fill in a very detailed form giving full personal and family particulars, together with two medical certificates. Once these were checked, a member of the Board visited the applicant before final acceptance was given.

The voting rights were based on subscribers to the charity paying half Guinea every year for one vote, or paying 5 guineas for a lifetime vote. A list of the subscribers was published annually in the form of a booklet,

which would run to around 300 pages. Competition was fierce with usually only 16 patients admitted each year as vacancies arose. In order to assured admission a candidate would have to receive around 2000 votes, with other candidates requiring between 1000-1500 votes. If the candidate had not received over 400 votes after ten consecutive elections they would be removed from the list.

The voting system remained in place until 1951, the system was widely used by other similar

Institutions but was not without controversy. Henry Burdett, writing in 1883, noted: “*[That] the result of this system is that friends have to incur much expenditure in postage, in printing, in canvassing, and other ways, and that almost necessarily in consequence the sufferings of the incurable case is increased. It is not infrequent...for patients to die before admission within the institution is procured*”.

Prof Andrews will be providing more details about the medical conditions of the patients who were admitted into the hospital. I will however focus on the sources of information about the patients.

The patient case books, provide a comprehensive register of all people who applied for admission to the hospital from 1854 to 2000s. These registers provide the candidates’ full name, address, date of birth, marital status, medical condition, occupation/former occupation, duration of illness, means of financial support for admission, admission decision, admission date and notes whether they were dismissed or deceased.

The first patient who applied for admission to the hospital was named Nathaniel Grange. He lived near present-day Shoreditch, London and had suffered from a nervous disorder since birth. Nathaniel was supported by his parents, who worked as straw bonnet makers. His admission for election was declined, with the rather cryptic remark “ac[tion] of minority”. This reason is somewhat mysterious but might refer to the fact that the first election happened in public in front of the

Board Committee, according to the 1936 history of the hospital, this was never repeated as Reed found the process too distressing.

Other early candidates included a woman named Sarah, suffering chronic bronchitis who was admitted as an in-patient, only to sadly die before she could come to the hospital; the next candidate, Julia, who was suffering from paralysis, was however successful. She was admitted to the hospital and would stay for 52 years until her death in 1906 at the age of 81.

In total, there are 27 volumes with over 20,000 admissions listed. These volumes are an incredible source both in terms of genealogical and epidemiological information about the patients who both applied and admitted to the hospital.

Unfortunately, there does not appear to remain any records of the initial patient application or written report of the board assessment of the applicants. One volume remains of the early election polling book, dating from 1854 to 1870, which provides a full list of the results. Some later results were published and can be found within the subscription books and early annual reports, but there does appear to be gaps in the historical record.

Equally, the archive holds only two examples of a candidate's polling card, which would have been circulated to subscribers. These are fascinating and touching items that evoke how stressful and demanding the electoral system would have been for candidates and their supporters in their need to canvass for votes.

Whilst official documents may have been lost, traces in other historical sources do remain. Recently, I was speaking to a visitor during the Open House weekend, and found out that her great great aunt had lived in the Hospital. Within her family scrapbook, she had press cuttings showing the Hospital's election results, when her relative was admitted in 1899 and a small clipping where she "returned her grateful thanks for those

who had voted for her in the election”. The cutting would suggest that more information about the electoral process is potential out there, held within historical newspaper archives, family papers and local archives.

What other sources are available to give us more insight into the patients’ lives in the hospital?

Records of the governance and day-to-day administration of the hospital are relatively well accounted for. The archive holds a comprehensive set of board of management minutes, house committee minutes and reports of the running of the hospital. The House Committee provided more of an intimate portrait of the day-to-day lives of the patients and staff at the hospital. The committee made up of the Secretary, Matron, Steward and Chief Medical Officer met weekly and would report on the health of patients; staff appointments and dismissals; visits and entertainments; estate and stock issues, and sometimes would include wonderfully eccentric entries, such as a discussion in 14 October 1942 about what to do with the late Matron’s bees. Mrs Rosier was apparently a beekeeper in her spare-time and it was her wish that the Hospital received her bees and appliances on her death. The volume also has multiple entries on the health and well-being of the Shetland ponies grazing on the hospital farm.

Whilst the House Committee records can provide a useful resource for additional medical information about the patients. Other sources can be equally valuable, such as the Matron and Chief Medical Officer reports, alongside four volumes of medical case notes of in-patients, dating 1900s-1940s. These records are significant in reporting the clinical details of the patients’ medical conditions, and providing a case history and account of the previous care they received and charting their health throughout their stay at the hospital. Some of the entries include photographs of the patients, along with clinical charts, doctor’s correspondence and press cuttings.

Beatrice Nowell (1860 – 1945)

Beatrice Nowell was born on the 23rd March 1860. She was born and raised in London, and in 1881 she joined a religious order based in Kensington Square in London. Through looking census records, it shows that she worked as a housemaid before becoming a nurse where she worked at St Bartholomew's Hospital. She became invalided in 1901 becoming a patient at the Hospital of St John and St Elizabeth, before entering the Royal Hospital in 1905. Beatrice stayed at the hospital until her death in 1945.

The archive is also rich resource in providing insights on how the charity has supported itself its history. Along with documents showing the general finance management, legacies and bequests and investments made by the Board of Management, the archive contains an expansive collection of fundraising appeals and related papers. Perhaps the most eye-catching are the collection of Christmas appeals, produced annually from 1872 to 1937.

The appeals usually took the form of a literary account of life at the hospital for the patient and staff, but also included comic sketches and illustrations, appeals from famous supporters and celebrities, and letters written by the patients themselves. The appeals were widely circulated to supporters and friends of the hospital, and were expensive to produce judging by the quality of the engraving, illustrations and early photographs within the volumes.

After the initial involvement of Charles Dickens in the founding of the hospital, a number of other well-known authors and actors also lent their names to the hospital cause. 'A Chorus of Celebrities', the Christmas appeal of 1908, again presented as a bound book, included contributions from Thomas Hardy and H. Rider Haggard.

The collection also includes a number of appeals written by the patients themselves, such as 'Postcards From Home', the Christmas appeal of 1927, and 'My First Year in the Royal Hospital for Incurables', from

Christmas 1907. These appeals in particular provide an invaluable insight in to the lives of patients with incurable conditions. Not only are we hearing from the patients themselves in these appeals, but in some cases their narratives and photographs provide enough information that we have been able to match the stories to the patient's admission and medical records.

These are only a small sample of the total holdings of the archives and more stories and interesting research will become known in the coming year. The Archive Service is still in its infancy, having been established in January 2018, with the goal of making the collections publicly accessible. In order to do this the first year of operation was focused on a comprehensive audit of the items that we had; how best to store and preserve them and identifying the items which required conservation treatment. Once this had been achieved it was necessary to focus on procuring external funds in order to support the cost of cataloguing, preservation and conservation costs, which was fortunately achieved earlier this year with the award of a grant from the National Lottery Heritage Fund.

The grant beginning in December 2019 and running until August 2020, was awarded to the hospital to July 2019. The project will finance the cataloguing, conservation work and digitisation of selected archive material in the first year. This work will be assisted by a team of archive volunteers who will help to clean, repackage and catalogue our collections, and later digitize archive material. The second strand of the grant will support a wide-ranging public engagement programme focused on local school children and people living with disabilities. This work will take the form of school workshops, which will enable local young people to learn about Victorian history and medicine. Patients at the RHN and people living in the community with disabilities will take part in art workshops to learn about and respond creatively to archive

items. The workshops will be supported by our Therapeutic Art team and a cohort of specially trained heritage volunteers.

The grant will allow the archive service to expand beyond its current operational capacity. The archive currently provides a remote enquiry service for internal and external users. Internal users can currently access the service through advance appointments and in addition the archives can facilitate group visits. Through the course of the next year, the archive service will provide public access to the archives for the first time. Researchers will be able to view our holdings through our online catalogue, using the Access to Memory (AtoM) online cataloguing system and arrange a visit to view archive materials. The archive will also offer a reprographic service and researchers will also be able to access selected digitised records through our cataloguing system.

Over the course of the next year, the archive service will also actively promote the collection to potential user groups. The archive has already been recognized as a potential valuable resource by academic researchers, notably in the history of medicine. Through promoting the collection through mailing lists, published journals and holding conferences, I hope to raise the profile of the archives and begin to attract researchers to use our resources.

Internal users of the archives are already beginning to use the service, primarily within the Fundraising Department. This service can be expanded through improving the research service, through the creation of an online catalogue and providing internal accessible heritage resources such as a cache of digital archive images.

Another user group who have expressed interest during recent public engagement events are people who live locally. The hospital has been an iconic landmark on Putney Heath for over 160 years and is an object of curiosity. The archives contains information about the history of the local area as well as ties to local businesses. It is also a great source of

information for family historians and with many of our former and current patients being from the local community.

Every archive has gaps in its historical record, and the RHN Archive Service is no different. Gaps within the collection begin and increase from the 1970s onwards. It is for that reason that the archives is looking for ways to bridge the gap with a proactive collection policy; contacting former staff members and people associated the hospital for potential papers. We will also will be beginning next year to start an oral histories programme at the hospital. With many of our current and former staff and residence having a long association with the hospital, this would both complimentary to the written records and also capture knowledge and experiences which would otherwise be lost.

The long-term goal of the archives is to provide a heritage service for service users at the hospital. The National Lottery Heritage Fund project will be the first opportunity to see how service user respond to the archive collection and will provide useful information as to what resources can be created in the future. Currently the archive reading room is situated on the first floor of an external building with no lift access and does not have any specialist equipment to aid reading by people who are sight impaired. This situation is unlikely to change but it would be possible to move the archive material to be viewed in a more accessible room in the main hospital building and secure funding for visual aids. In other ways, the archive will look to make its collection more accessible, primarily by making our digital collections as disability friendly as possible, by conforming to the W3C web accessibility initiative. The archive has still a long way to go but it has the potential to be a fascinating historical resource and I for one am excited to have the opportunity to open up the archives to the public.

Thank you for listening.