

A HISTORY of the DERWENT HOSPITAL DERBY

by

Mr D Singleton (Clerical Officer 1950—1959, Hospital Secretary 1959 — 1974) with the kind assistance of the Derby Borough Central Library. It should perhaps be mentioned that the sections in inverted commas are actual quotes from reports held by them.

It is interesting to note that the first Derby Borough Infectious Hospital was a temporary wooden structure opened in 1872 and located at the Rowditch. Construction was "carried out in haste during an epidemic of Small Pox which was fought and subdued there, and on Saturday May 10th 1890 at 5.15 a.m. by order of the Sanitary Committee it was burned to the ground in the presence of Mr Councillor Harrison, Chairman of that Committee, the Medical Officer and the Chief Sanitary Inspector, this being considered the safest mode of dealing with it".

On May 1st, 1890 a new Borough Infectious Hospital was formally opened by the Chairman of the Sanitary Committee, "to whom was presented a golden key wherewith to unlock the gate at the entrance to the grounds". This of course was the Hospital, later to become known as the Borough Isolation Hospital and Sanatorium and, in 1948, as the Derwent Hospital.

Work had commenced in 1888 on a site of 3 acres owned by Derby Corporation described as a "splendid one commanding a magnificent view of both town and country and, in fact, such that any micro organisms that felt inclined to hover about the spot, would inevitably be speedily obliterated or blown into harmlessness by the first high wind and therefore may be dispelled any uneasiness that might be felt on the score of occasioning danger to persons outside".

The cost of the new hospital was apparently kept within its original estimate of £7,400 and £600 was afterwards allowed for furnishing. The staff consisted of two nurses and two probationers and the hospital comprised:—

- (1) An Administrative Block, containing a Medical Officer's Room and Matron rooms, kitchen and nurses accommodation, etc. (This block was extended in 1932 to its present size.)
- (2) An Isolation Pavilion now known as Ward A (formerly 'C').
- (3) A General Pavilion consisting of a male and female ward of 10 beds each (now known as Ward 'B').
- (4) A Laundry Block separated by a covered passage from a Disinfecter Chamber.

- (5) A Mortuary Block consisting of mortuary and post-mortem rooms, ambulance shed, carriage house, etc, the hospital having its own horse-drawn ambulance. (The present mortuary and disused post mortem room was erected in 1928, and the old Mortuary Block became the Engineers Block as at present.)

The above wards etc, were heated by open firegrates and hot water for baths etc, was provided from a central boiler in the present pump room enabling "hot baths to be procured every 3 minutes if necessary". The "closet arrangements were throughout, with one exception, on the earth-system — Moule's earth closets" and the system was "undoubtedly the best for a hospital situated as the infectious one is. The closets are sweet and clean, being under proper supervision and supplied with plenty of suitable earth which is obtained on the site and prepared in a chamber situated at the back of the drying chamber of the Laundry

The hospital was considered to be a model one in every respect and by the end of 1890, excepting Walter Morgan who had been transferred from the old hospital, it had accommodated 67 patients. The first patient was John Edmunds, aged 8 years, admitted on May 5th 1890. The total maintenance cost from its opening to the end of the year was £486 11 shillings exclusive of £25 rent, and the average period of "detention" of Scarlet Fever patients was "seven and a half weeks, excluding the one that died".

Further extensions were made in 1907 and these included a further Pavilion Block now known as Ward C; the building, was now known as the Men's Messroom, was then used as a Discharge Block where patients undressed at one end, had a bath in the centre portion, and then went into the other end to dry in front of a stove and dress. Presumably early on a Waiting Room was erected and this was the very small building immediately to the right of the present car park at the top of the main drive.

Ward D, the only other infectious case ward, was not opened until September 10th 1932 and, being a cubicle block, it was intended to house many of the less common infectious cases which until then were scattered throughout the other institutions in the town. (Thoracic surgery was carried out in a small theatre on this ward from 1949 until 1962.)

The year 1910 saw the beginning of the sanatorium side of the hospital, which was separated from the infectious side by iron railings. Half of the San Home (now West View) was erected and it contained accommodation for sanatorium staff and cooking facilities for sanatorium patients. (This building was extended to its present size in 1913.) A TB Sanatorium for 20 patients was erected (in 1910) comprising 10 x 2-bedded wooden chalets located on the site of the present Male TB Ward, Ward 4, which was erected during the 1939-45 War.

In 1913 a 28-bed Sanatorium was built (Ward 1) and this ward was still fully occupied by female TB cases in the 1950s and patients still slept outside on the verandah areas (now partly covered by dayrooms.)

A dwelling house (now Hampshire House) for the resident Medical Officer was erected in 1925, and in 1926 a further 6 cubicles were built for sanatorium cases. These were the cubicles at present on Ward 3 (which was extended to its present size) around 1947.

In 1932 Ward 2 was erected for use as a 25-bed Childrens Sanatorium Block containing a schoolroom, playroom, dining and teachers room. It was later used as a Male TB Ward. X-ray apparatus was installed on this ward in 1936.

1932 also saw the opening, by the Mayor Alderman W H Salisbury JP, of a new Nurses Home on September 10th, together with the Concert Hall, extensions to the Administrative Block, the Main Stores, the old Porters' Lodge/ Waiting Room (shortly to become a Porters'/Domestic Messroom) and two houses at the top of the drive for ambulance drivers. The hospital had become a training school for student fever nurses and later for the T.A. certificate, and the New Nurses Home then contained a classroom (later to become a Committee Room and now the main Sitting Room). The teaching accommodation ceased to be used as such in 1972, by which time the Register of Fever Nurses had closed and the hospital had also ceased to form part of the Combined Area Nurse Training Scheme for State Enrolled Nurses. History repeats itself, however, and a Lecture Room, Library and Office was arranged in the Nurses Home again in 1972 (at present used for the training of Group Nursing Auxiliaries).

The present Billiards Room, a wooden and corrugated iron structure situated between the Concert Hall and Ward 4, was erected on a date unknown for the nursing of TB patients, so too was a similar type of building now comprising the Physiotherapy and Occupational Therapy Departments.

Between Wards 3 and 4 was a brick building known as the Sputum House — a rather nasty looking place even in 1950 when sputum from tuberculosis patients was collected in steel mugs and disposed of there — which was demolished in 1971.

The present Boiler House was erected in 1933 and the two coal-fired Adamson boilers installed at that time are still in use, but low ram coking stokers were added in 1955.

The hospital had its own laboratory facilities from 1912 until 1970, since when the laboratory services have been provided by the Derbyshire Royal Infirmary, and they were contained in a building at the front of the hospital known for many years as the Lodge Home. (This building, now known as Derwent View, contains offices and non-resident nurses' changing and rest accommodation and a self-contained flat on the first floor.)

In 1949 the hospital was still being used solely for infectious and tuberculosis cases, when an average daily bed occupancy was 47 and 85 respectively, and the staff comprised 19 trained nurses, 23 students, 10 ward orderlies and 54 domestic staff including cooks, sewing room and laundry staff. It was not until 1956 that the first change in bed usage took place and since then the hospital has gradually become a Partly Acute one for medical and surgical cases, made up as follows:—

- 34 Tuberculosis beds (Wards 3 and 4)
- 14 Beds officially allocated to infectious diseases but used as required for other cases (Ward D)
- 10 Paediatric cots (Ward B)
- 10 Dermatological (Ward D)
- 19 Surgical (Ward 2)
- 20 Pre-convalescent medical/neuro-surgical (Ward C)
- 58 Chest/general medical (Wards A, 1 & 3)
- 165

Many improvements and changes have taken place since the inception of the National Health Service in 1948 when the hospital was placed under the administration of Derby No 2 Hospital Management Committee. This was disbanded in 1966 and the hospital administration was transferred to Derby No 1 Hospital Management Committee.

The main improvements are as follows:—

Use of antiquated Laundry discontinued 1962 and premises converted to linen sorting, storage and Sluice Room.

Ward 2 converted and re-opened as a General Surgical Ward with theatre suite attached in January 1962.

Between 1964 and 1973 all wards except B Ward were provided with at least 1 Dayroom, in several cases using the verandah area of the wards referred to as Pavilion Blocks. Also, verandah areas on Wards A, D & 3 were completely enclosed, making conditions much better for both patients and staff.

In 1967 the top of the main drive was widened. The Gardens Department, then located in that area, was transferred to its present location near the Nurses Home and a car park was provided at the top of the drive.

Also in 1967, the Main Kitchen and Staff Dining Room facilities were very much improved. Since then a plated meal service with choice of menu has been instituted for all wards and a microwave oven installed for the cooking of night staff meals.

All beds in open wards have been cubicised by curtaining, and in 1971 Ward 1 was piped for oxygen.

Sluice Room facilities were practically non-existent on Ward 1 until Sluice Rooms were built at each end of the ward.

In 1968 the hospital Pharmacy was closed and supplies were obtained from the Group Pharmacy at the Derbyshire Royal Infirmary. Post mortems are now carried out in the old Pharmacy.

During this period items of furniture and medical equipment, far too numerous to detail, have been purchased and many minor alterations have been made in attempts to bring the hospital up to the most modern standards for the benefit of both patients and staff.

Staff numbers increased considerably during this period. Increases in the medical and nursing fields were supported by corresponding increases in para medical, clerical/administrative grades, catering, etc.

For the financial year ending 31 March 1973 the net total revenue cost of maintenance was £425,110 including salaries and wages. During that period 1,861 cases were admitted including 25 infectious disease and 94 tuberculosis cases; the average daily bed occupancy was 109 and the average length of stay per case 21 days.

It would be during the most not to mention the names of members of the staff who devoted so much of their time during the writer's most difficult periods of the hospital's history and contributed toward making the hospital what it is today:—

Dr Richard J O Taylor (Medical & latterly Physician Superintendent July 1925 until his death on 6th October 1959).

Dr Alexandra M. MacCormick (Assistant to Dr R. J. O. Taylor and Physician Superintendent 1933 — 30th September 1965).

Miss J. E. Scherer (Matron 1943 — May 1951).

Miss M. E. Moore (Matron June 1951 — June 1963) who regrettably passed away on 27 August 1973, aged 65.

Mr E. Roe (Senior Laboratory Technician 1920 until his death on 22nd December 1963).

Mr Percy Smith (Clerk and Hospital Secretary 1912 — July 1959).

Mr Tom F. Clark (Porter/Head Gardener 1925 — 10th March 1969).

Mr G. H. Kelly (Hospital Engineer and later Group Engineer 1933 — 1967).

1974 saw the re-organisation of the National Health Service and the division of Derbyshire into three Health Districts, Central, South and North. The Derwent Hospital was placed under the control of the Derby South District whose headquarters are based at the Derbyshire Royal Infirmary.

It perhaps should be indicated that on 11th September 1978 the ward names, except for Ward A, were changed:—

- Ward 1 became Ward B
- Ward 2 became Ward D
- Ward 3 became Ward C
- Ward 4 (remained unaltered as it was closed)
- Ward A continued as A
- Ward B (was being converted at the time)
- Ward C became Ward E
- Ward D became Ward F

This change caused some confusion at the time and the writer ventures to say that it still does in some circles. To make this section of the history easier to follow, the old ward numbers or letters are given in brackets.

During 1974 there was a lack of demand for paediatric cots and there were frequent temporary closures of the old Ward B which finally closed permanently in November 1976. The very old wooden hut which had housed the Occupational Therapy and Physiotherapy Departments was most unsatisfactory in all respects, and by April 1978 Ward B had been converted for use as a Rehabilitation Unit under a minor capital scheme at a cost of £38,000. This unit proved to be a great asset when, in January 1980, Etwall Hospital was temporarily closed and rehabilitation staff were transferred to Derwent Hospital. Within a month or so the unit became most busy dealing with amputees, etc, and a large number of outpatients. A cubical is set aside on the unit for the use of the Speech Therapist and, in addition, Group Speech Therapy sessions are held three times weekly in the Concert Hall.

Also during 1974, the demand for male tuberculosis beds had dropped considerably and finally, on 4th September 1974, the 22-bed Ward 4, mainly a pre-cast concrete building, was closed. Males were nursed on Ward C (3) together with female tuberculosis patients (in separate sections of course!). Ward 4 remained unused, in a good state of decoration, until 14th May 1976 when it was used to accommodate pre-convalescent patients from Etwall Hospital whilst a problem concerning asbestos dust was being remedied there. In November 1976, however, the pre-cast concrete section of Ward 4 was declared structurally unsafe and the Etwall patients (together with Etwall staff incidentally) were transferred to the then unoccupied Ward B, where they stayed until their transfer back to Etwall in December 1976.

At this point it seems appropriate to record the fact that in February 1977 the Occupational Therapy Department in Stafford Street, Derby was demolished and a department known as the Work Preparation Unit was created in the sound section of Ward 4 (ie a brick built 4-bedded room and the Vic Hallam dayroom and vestibule). The Stafford Street staff were of course transferred to operate the unit which deals with physically handicapped persons of working age who are given work to do and assessed with regard to suitable employment in the future.

At the time of writing Ward 4 still stands but funds are available for the demolition of the underground part and plans are being considered for the provision of storage facilities for the Work Preparation Unit on the site.

By 1st June 1977 the hospital had been reclassified as Mainly Acute and, apart from ward closures referred to above,

- (1) 4 beds had been 'lost' on Ward A in order to provide a second dayroom;
- (2) 10 Dermatology beds on Ward F (D) had become Medical; Dermatology being transferred to Ward 23 at the Derbyshire Royal Infirmary on 5 January 1977;
- (3) 3 Hand Surgery beds on Ward D (2) had become General Surgery beds;
- (4) 3 Tuberculosis beds had been 'lost' on Ward C (3) in order to provide a proper dayroom on the ward as had been some years previously;
- (5) Ward B (1) had been re-allocated to Male and Female Asthma/General Medicine as from 27 September 1976.

This brought the total bed complement to 126 (from 165), made up as follows:—

- 51 Pre-Convalescent Medical
- 14 Infectious Diseases
- 28 Chest — non TB
- 16 General Surgery
- 3 Dental Surgery
- 14 Tuberculosis

and, during 1979, to give an example, there were:—

- 969 discharges/deaths
- 104 beds available, on average, daily
- 61 beds occupied daily: on average
- 127 day case attendances (General Surgery/Dental Surgery)
- 341 outpatient attendances — General Surgery
- 200 staff, on average, in post (many of them part-time of course) in the nursing and domestic fields.

It should be noted that, dependent upon the demand for infectious disease cases, the 14 beds allocated to that speciality on Ward F (D) were used for other specialities.

Due to lack of finance, as already mentioned, Etwall Hospital was temporarily closed in January 1980 and shortly afterwards Wards A and C (3) were made available to Rehabilitation cases and several members of the Etwall nursing staff transferred to us. Ward F (D) accommodated Infectious Diseases, Tuberculosis, Pre-Convalescent and General Medical cases. Also, due to lack of finance, Ward D (2), including the Theatre, closed on 12th January 1980 and remains so at the time of writing.

For the financial year ending March 1979 the total revenue expenditure amounted to £923,537 and the cost per in-patient day was £37.66.

During the period under review a shortage of finance affected most hospitals in the district. Fortunately Derwent Hospital was very well equipped and had been quite well maintained previously. Nevertheless, apart from normal day-to-day maintenance and replacements which were absolutely essential, considerable expense was incurred as the following information will show.

By 1975 all old-type hospital beds, bed-tables and lockers had been replaced by new modern ones. Also in 1975 the Mortuary facilities were upgraded and extended at a cost of £773. The nearby Porters' Lodge had been converted to a Porters' Messroom at a cost of £742 in 1974.

During 1976 an equipment storage room was built on to Ward E (C) verandah at a cost of £1,792 and the Sewing Room services and new linen stocks were transferred from the Administration Block to the actual Linen Department at a cost of £774 (which included the cost of removing the sluing machine from the Linen Department). The two old sewing rooms were converted to offices for the Engineer and his assistant and their existing office in Derwent View was made available to the Assistant Domestic Services Manager. Later, (early in 1980) the old Linen Stock Room became an office for the Catering Manager and his staff.

Also in 1976 (October) the Nursing Auxiliary training facilities were transferred to the Queen Mary Maternity Home leaving vacant accommodation in the Nurses' Home. The necessary furniture was purchased and the accommodation became a Committee Suite which has proved to be most useful for a variety of purposes.

In January 1977 the disused and delapidated Night Nurses' Home was demolished under a minor capital scheme at a cost of £2,400. Also in 1977 the Administrative Block and West View were re-wired electrically and an automatic fire alarm system covering the whole hospital was installed under a minor capital scheme costing £5,500.

By 1978 the Dentistry facilities provided in a room on Ward A had been dispensed with, and by June of that year the room had been converted to a patients' Showerbath Room, the bath being provided by the League of Friends. Further, in April 1978 as already mentioned, the old Ward B reopened as a Rehabilitation Unit, and in October 1978 work commenced on the upgrading of Ward C (3). This included the upgrading of the mains electricity cable and the replacement of the nurse call system, plus the conversion of a 4-bed area on Ward A at the North end to a dayroom at a cost of £27,450 under a minor capital scheme.

Whilst writing this, further alterations are being done to convert the Treatment Room to a Bathroom on Ward C (3) and a distress call has just been received — a tradesman has put his foot through the dayroom ceiling!! Quite a calamity — a patient showered with plaster but fortunately only slightly injured. The cost of this work incidentally will be £1,470 and is to be met by the League of Friends.

Early in 1978 the hospital incinerator, which for several years had caused smoke and smut problems on the nearby Ward F (D), was taken out of commission, spare parts being unavailable. Non-infectious refuse is now collected by the local authority and infectious refuse and human tissue taken to the Derbyshire Royal Infirmary for incineration.

During the period 14 November 1978 — 9 April 1979 each ward was closed for a time whilst individual gas central heating/water boilers were installed in the basements. In fact each building at the hospital except Derwent View, the two hospital houses and the Billiard Hut was provided with similar boilers, all at a cost of £82,843 under a capital scheme. Apparently we either had to have these or close down the hospital as the two coal-fired Adamson boilers (1933) had almost reached the end of their working life. The Boiler House actually closed on 9th April 1979. The building and the boilers still stand but the chimney, which was 'topped' in 1980, is showing signs of further deterioration and costs are being sought for demolition. As a point of interest, the hospital gas account for the first quarter of 1980 amounted to £16,683.

In March 1980 all pitched roof areas were insulated under an energy conservation scheme at a cost of £4,136, and work on the electrical re-wiring of the Nurses' Home and the provision of new mains cable commenced on 11th August 1980 at a cost of £19,809 under a minor capital scheme. It might be noted that the Home has served a very useful purpose in recent years accommodating various types of students, eg Occupational Therapy, Radiography, Chiropody, etc, the demand for accommodation for Derwent Hospital staff being practically non-existent.

During the period under review the area beyond the Nurses' Home ceased to be used as a Gardens Section. Several years previously it had become Derbyshire Area Health Authority policy not to grow vegetables and finally the two greenhouses formerly used for tomatoes and potted plants were transferred to the Kingsway Hospital. There is still, considering the size of the grounds, a gardens section located near the main entrance, manned by a small permanent maintenance staff supplemented by the District Estates Department staff.

At the time of writing, prices are being obtained for the renewal of the floor covering on Ward B (1) and a cost of £1,400 has been quoted for the covering of the wooden floors on Ward A with sheet vinyl. It is hoped that the cost of the latter item will be met from savings made on the general office administrative salaries budget.

Thefts and vandalism have constituted a serious problem over the years in question. Hampshire House (formerly the home of the hospital Physician Superintendent) has been extensively vandalised and, to quote a further extreme example, in 1979 someone caused an electric tug to run down a slope into a wall and the cost of repairs to the tug was £1,612.

The League of Friends have continued to provide an excellent service to the hospital, aided by staff from all sections of the hospital. Members of the actual League are few but nevertheless the twice-weekly trolley service has continued. Among the many items provided by the League were the following:—

	£
Powered chairs for movement of patients	1,279
Carpeting A & C (3) Ward Dayrooms	570
X-ray film processing unit	700
Ward curtains	886
Atjo shower bath unit	714
Atjo chair lift	500
A ventilator, pump and syringe driver for Ward B	1,200
Conversion of Treatment Room to Bathroom on Ward C (3)	1,470
Carpet for Self-Care Unit	1,656
Special beds	574
6 Sanichairs	640
Television set	280
New mattresses	424

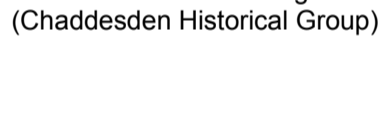
The writer would mention Miss J C Dempster and Mrs D B Hall who have served on the League of Friends more or less since its inception (and for many years as the Secretary and Treasurer respectively), and, although not connected with the League, Mrs C J Smith, of Smalley, near Derby, who has given many years voluntary service on Ward E (C).

There is little doubt that the hospital has continued to provide a most useful service to the community and through the changes and industrial disputes in the National Health Service the staff have displayed loyalty and co-operation towards the hospital and its administrators. It can only be hoped in these days of uncertainty that the hospital will continue to survive and flourish until at least its centennial year — 1990— when the Hospital Administrator (formerly known as the Hospital Secretary) will have reached his 70th year.

The writer remembers with pleasant memories the following persons in particular who, as members of the staff, gave most valuable service to the hospital:—

- (1) Miss Joan C. F. Bates, Matron from August 1963 until her retirement in August 1977.
- (2) Mr Alf Wilson, who commenced duties as a Porter in 1940, had risen to Head Porter by his early (for health reasons) retirement, in February 1975, and who regretfully passed away in August 1978.
- (3) Dr W. J. Christie, Medical Assistant from January 1960 until his death in March 1974.
- (4) Mr John (Jack) Ginno who served as Charge Nurse on a Tuberculosis Ward from 1953 until his sudden death in March 1975.
- (5) Dr Geoffrey Storey, Medical Assistant from November 1969 until his death in September 1978.

September 1980



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(Chaddesden Historical Group)

Appendix
Appears to be from a report into South Derbyshire hospitals c.1970.

DERWENT HOSPITAL

This hospital had been provided in the early 1930s by the Derby Corporation primarily for the treatment of tuberculosis and infectious diseases. The hospital was taken over and administered by the Derby No 2 Hospital Management Committee from 1948 to April 1966, when, on the winding up of the Derby No 2 Hospital Management Committee, it became the responsibility of the Derby No 1 Hospital Management Committee. In 1967 and 1968 the Committee arranged for the major reconstruction of four wards in the hospital, providing greatly improved facilities for the patients. In the meantime, the type of patients has gradually changed. The number of patients with chest infections, including tuberculosis, has been reduced and the number of patients with other infectious diseases remains at a low level. As a result, wards previously reserved for infectious cases are being used for acute medical conditions, and for patients with acute skin diseases. A certain amount of surgery is performed in the hospital using a theatre which has been built at the end of one of the existing wards.

Further improvements which have been carried out include remodelling of the kitchen and staff dining rooms and the use of the administrative accommodation. Other proposals which are awaiting implementation include the enlargement of the recreational hall to provide a new physiotherapy department. The existing physiotherapy department will then be added to occupational therapy.

The hospital now operates as a third general hospital working in very close association with the Derbyshire Royal Infirmary.