

Reg. v. Dixon.

Prisoner, a labourer, æt. 53, was charged with the murder of Margaret Appleton, cook at Bedale Workhouse. The deceased went into the garden where prisoner was digging potatoes, pulled the fork out of his hand, and struck him. Prisoner retaliated, with the result that the woman died. He pleaded guilty of manslaughter, and the plea was accepted. In mitigation of sentence it was urged that, although the prisoner was not insane, his mind had become affected by extremely sad domestic troubles, so that on receiving great provocation from the deceased he was not able to exercise a reasonable faculty of discrimination. He lost his wife in 1891, and was left with a family of six young children. Having to attend to his family and nurse a sick child, he lost his situation. Subsequently a daughter eleven years old was criminally assaulted, and under the accumulation of troubles he attempted to commit suicide. He was then removed to the workhouse, and on improvement was discharged. Becoming worse again, he was readmitted to the workhouse, and then the incident took place for which he was now tried. He was sentenced to five years' penal servitude. The Judge said that he felt justified in treating the case as one in which there was some provocation, but he does not appear to have given any effect to the plea of unsoundness of mind, though it appears from the report to have been a case in which the plea was well substantiated.—Yorkshire Assizes, York, Dec. 1 (Mr. Justice Grantham).—"Leeds Mercury," Dec. 2, 1895.

Reg. v. Gamble.

Alfred Gamble, 17, labourer, was indicted for wounding a child named W. C. Cattle, with intent to murder. The case excited great interest on account of the fact that another young child had recently been murdered in the same neighbourhood, and although there was no legal proof of the fact, there can be little doubt that the prisoner was the culprit in that case also. The body of the first child had been found in a dustbin, enveloped in a sack. The second was found, badly wounded, concealed in a stable. The prisoner was found unfit to plead. The case belongs to the same group as the Plaistow murder—that of crimes by "instinctive" juvenile criminals.—Central Criminal Court, Jan. 15 (Mr. Justice Hawkins).—"Times," Jan. 16, 1896.

Barnard v. Garrard.

† This was an action for breach of promise to marry, the defence being that at the time the promise was made defendant was of unsound mind, and if not then of unsound mind became so before the time for fulfilment arrived. The admitted promise was made in January, 1893. On the 6th of February following the defendant was in a state of intense maniacal excitement, and on the 8th was sent to Heigham Hall, but no evidence appears to have been given that he was insane in January, nor were the medical men who saw him in February asked as to his probable condition in the previous month. The jury found that defendant was of sound mind when he made the promise, but of unsound mind at the date fixed for the performance, and assessed the damages at £500. The judge thought it a perfectly right finding, but said that as a matter of law judgment would be for the defendant.—Q. B. D., Feb. 13 (Lord Justice A. L. Smith).—"Daily Chronicle," Feb. 14, 1896.

HOLLOWAY SANATORIUM.

Report of Result of Inquiry by the Commissioners in Lunacy.

In pursuance of a direction by the Board, we, the undersigned Commissioners in Lunacy, together with our late colleague, Mr. Charles Palmer Phillips, whose sudden death we all so greatly deplore, and our colleague, Dr. Southey, who was present on the first two days, but was prevented by illness from attending our adjourned meetings, on September 26th ultimo opened an inquiry at the Holloway Sanatorium, which was resumed on the following day, and then adjourned to the 24th instant.

We were directed to inquire generally into the medical and other administration of the Sanatorium, and specifically into various allegations of neglect or maladministration which appeared in the pages of "Truth," a weekly newspaper. The inquiry was adjourned in order to communicate with the friends of the patients whose cases were the subjects of those allegations, and to invite them, if they desired it, to attend the inquiry.

Under the power conferred by Section 332 of the Lunacy Act, 1890. we summoned the following persons to appear before us and give evidence, viz.:—Dr. Jane Buchanan Henderson, Dr. Charles Caldecott, Miss Bessie Jupe, and Miss Bertha Topham Jones.

Mr. Frank Squire, the husband of a lady patient who had escaped from the Sanatorium, was the only person who, in response to our invitation, attended to offer evidence of alleged ill-treatment. Miss I —, the sister of a lady patient who was alleged to have been scalded in a bath, attended, but stated that she had no complaint to make of her sister's treatment in the Sanatorium, but was quite satisfied with that treatment. Mr. Squire was accompanied by his solicitor and his counsel, Mr. Housey, who examined him, and whom we allowed to cross-examine the other witnesses who gave evidence in the case.

The case of Mr. Thomas Weir, largely commented on in "Truth," was excluded by the Board from the scope of our inquiry, it being considered that the former sworn inquiry by two members of our Board, the inquest, and the inquiry conducted by Mr. Gully, Q.C., and Dr. Savage, had elicited all the information regarding it possible to be obtained.

We should state that, as the Board are aware, most of the other cases referred to in "Truth" had already been inquired into and dealt with by the Board, although evidence on oath was not taken upon the inquiries.

Our adjourned inquiry occupied two days. During the inquiry we examined on oath four members of the Committee of Management, six present or former members of the medical staff, the accountant, the auditor, six present or former members of the nursing staff, the hall porter, and Mr. Frank Squire, the one complainant who came before us. We also examined, but not on oath, two patients, and the voluntary boarder, whose visit to Epsom had been the subject of comment.

We propose to deal, in the first place, with the cases and matters specifically referred to in "Truth," stating the conclusions at which we have arrived.

1. The Case of Mr. J. A. L., stated to have been discharged from the Sanatorium suffering from a bedsore.

No person attended on behalf of the friends of this gentleman. He was admitted to the Sanatorium on January 6th, 1891. He had previously been a patient at St. Andrew's Hospital, Northampton, and afterwards in his own house. He was suffering from general paralysis of the insane and was "wet and dirty." Towards the end of the month of January a bedsore, described as "acute," developed over the sacrum, and is stated in the "case book" to have been dressed with "liq. carbonis detergens." An entry in that book under date of February 27th states that "the sore is granulating up well;" and in a further entry, dated March 14th of the same year, it is stated that "the bedsore is almost entirely filled up." On that day the patient went home in charge of his wife "on trial." There is no doubt that he was then suffering from the bedsore. Dr. Philipps stated to us in his evidence that the sore was "trophic," and not one arising from defective nursing; and that the patient was subject or liable to such sores; in proof of which statement he produced to us a letter to him from the patient's wife, dated January 12th, 1891, and enclosing an account in her handwriting of the patient's previous history, in which she said, referring to the year 1886, "I then found that a large abscess (of which I was unaware) had evidently just burst at the end of the spine." Dr. Philipps further swore that he had, within a few days prior to Mr. L.'s discharge on trial, seen the bedsore, and that it was then in a healthy granulating state, the granulations being nearly up to the surface. Dr. Nuthall, now an Assistant Medical Officer at the Sanatorium, and at the above date a Clinical Assistant there, stated in his evidence that he remembered the case of Mr. L., and that he agreed with Dr. Philipps as to the bedsore having

been "trophic," and not of the ordinary kind, and he was sure it was not one arising from defective nursing.

In the absence of evidence to the contrary, we arrived at the conclusion that the bedsores in question was of the character described, and it is a matter of common medical knowledge that persons suffering from general paralysis are more than ordinarily liable to complications of that nature.

It is but fair to Dr. Philipps to state that in 1891, when this case was the subject of correspondence with our office, he courted a formal inquiry into it, but this was not considered necessary by the Board. Also, that although the patient was removed in March, no complaint of ill-treatment or neglect was made to this office until the middle of June, and in the interval differences had arisen between Mrs. L. and the authorities of the Sanatorium respecting the account of charges which had been presented to her. There appears to have been misapprehension with regard to these charges, which ought to have been avoided by a clearer statement of their nature and amount, before the reception of the patient. We are informed that greater care is now exercised, and more precise information afforded in regard to this matter. In the correspondence between Mrs. L. and Dr. Philipps, occurred a statement by the latter that the sore "was one of many from which Mr. L. was suffering when he came here," meaning the Sanatorium; but that was not the fact, and the misstatement was subsequently explained by Dr. Philipps to have arisen from a misunderstanding on the part of a shorthand clerk to whom he had dictated the letter in which it occurred, he, Dr. Philipps, having signed the transcript without careful examination.

2. The Case of Mrs. Squire, who had escaped from the Sanatorium on January 24th, 1893.

As already mentioned, Mr. Frank Squire, the husband, attended our inquiry, and he was examined at considerable length by his counsel, and was also examined by us.

The fact of the escape was not called in question. The evidence showed that it was effected by the patient from a "strong room," having a window secured at night by shutters, which, through negligence, were left unlocked on the night of the 23rd. Mrs. Squire opened the shutters, tore down a portion of the upper sash, which was hinged and could be opened for ventilation, and escaped through the aperture. The housemaid whose duty it was to lock the shutters, but had omitted to do so, was dismissed, and the charge nurse, who should have made sure that the shutters were locked, was deprived of an advance of wages to which she had become entitled.

Mr. Squire complained of this and of several other matters connected with his wife's treatment, the principal being that he was not informed in due course of her escape; that he had not been informed of her having received a black eye, and having developed erysipelas, before he observed these facts himself on a visit to the Sanatorium; that he was for some time refused inspection of the rooms she occupied, but was eventually told he might have it on payment of a contribution of £1 to a pension fund; that his wife had been placed in a bedroom without the usual toilet appliances and had had to perform her toilet in a lavatory; that another bedroom occupied by her was damp and not suitably furnished; that a statement that his wife had attacked and knocked down a nurse was untrue; that a small brooch sent by him as a birthday gift to his wife was withheld from her, and that nurses treated his wife roughly.

The inquiry into this case occupied us during several hours. Our conclusions are: (1) That Mr. Squire ought to have been immediately informed of his wife's escape. This is admitted by Dr. Philipps, who expressed his regret at the omission, and also by the Committee. (2) That it would have been more judicious on Dr. Philipps' part to have informed Mr. Squire that his wife had received the black eye, which, it was stated, was sustained in a quarrel with another patient, who struck Mrs. Squire. (3) That Mr. Squire was not entitled to demand, as of right, inspection of the rooms occupied or used by his wife while a patient in the Sanatorium, but that it would have been judicious on the part of the Superintendent, in the absence of strong reason to the contrary, and which did not appear

n the evidence, to have permitted the inspection sooner, and that coupling the eventual permission with the suggestion of contributing to the pension fund (which we were informed does not exist) was most ill-judged and improper. (4) That the removal of articles of furniture from the bedroom occupied by an insane patient may be a very proper course to adopt, and must depend on the mental condition of the patient, which, in Mrs. Squire's case, as disclosed by the evidence, was, in our opinion, such as to justify its adoption.

We were informed that the lavatory accommodation in the gallery in which Mrs. Squire was placed was at the time too scanty, but that the deficiency is now supplied.

(5) That the bedroom complained of as being damp had some of the wall paper discoloured by a leakage, but was not, in fact, damp when Mrs. Squire was placed in it, and that the bed and bedding complained of was similar to that generally in use, and was sufficient and of good quality. (6) That the brooch was withheld upon grounds connected with Mrs. Squire's proneness to attempt escape, as to the adequacy of which the Medical Officers were fully entitled to exercise a discretion. (7) We pressed Mr. Squire to give us instances of roughness to his wife on the part of nurses, but those he adduced did not amount to more than the employment of a somewhat peremptory tone in the utterance of such phrases or orders as— "Come along, Mrs. Squire," and "Now, Mrs. Squire, Mr. Squire must be going," these being the phrases which he quoted. We always desire to inculcate and enforce a respectful manner and address by attendants, who are necessarily placed in a position of authority over persons in a superior social station; but in the present case we do not think that Mr. Squire's evidence supported his charge of roughness or want of respect towards his wife on the part of the nurses. Mr. Squire also complained that on an occasion when he was leaving his wife at the lodge gate, and she was reluctant to return to the building, the hall porter, who had been summoned to assist the nurses, took hold of Mrs. Squire by the legs. This the hall porter, Butler, denied on oath, and informed us that Mrs. Squire had on that occasion kicked him in the groin, causing a rupture, for which Mr. Squire afterwards compensated him by a present of £20, which the Committee allowed him to accept. He added that Mrs. Squire was attempting to kick the nurses, and that had he not been prevented by the kick which he himself received he would, for the nurses' protection, have seized Mrs. Squire by the leg.

We learnt from Mr. Squire and from members of the Committee that the former had, on April 17th, 1893, a long interview with the Committee, who gave him a very full and patient hearing, and expressed their regret at the omission to send notice of the escape, and their disapproval of the suggestion of giving a contribution to the pension fund, and requested him to take back the cheque. On his refusal to do so, the cheque was torn up and burnt. The Committee also communicated their disapprobation of the incident to Dr. Philipps, who acknowledged the error.

As regards the alleged misstatement that Mrs. Squire had assaulted a nurse, the facts, as appearing from the evidence, were that on an occasion when Mrs. Squire had to return to the galleries from the entrance hall after an interview with her husband, she resisted, and was led away by two nurses, one on each side, having hold of her arms, and that she wrenched her right arm free and struck the nurse on that side (Miss Ethel Ross) on the chest; the nurse's foot slipping at the same time, she fell. In a paper prepared by Dr. Moore, the Senior Assistant Medical Officer, for Mr. Squire, it was said that on the occasion (February 24th, 1893) in question Mrs. Squire "attacked Miss Ross and knocked her down in the corridor." This statement was certainly stronger than the facts as elicited by us justified; but it was true that Miss Ross was struck by Mrs. Squire, and that she fell. No great importance is attachable to the incident.

We may add that on January 31st, 1893, Dr. Philipps proposed to Mr. Squire to remove his wife to another institution, and gave him the names of two licensed houses, but she was not removed until April 21st, 1893, when she was taken home, but placed in St. Andrew's Hospital on the 26th of the same month on an Urgency Order, the reason given for urgency being the fear of the certifying practitioner "of her doing injury to her husband and his daughter."

3. The alleged use, for the occupation of patients, of two "tumble-down" cottages.

These cottages had frequently been seen by Visiting Commissioners on their rounds of inspection, and while occupied by patients they were in proper repair, and not considered unsuitable for their purpose. The cottage referred to as the "Cement Room" was never used, we are informed, as a store until after it had ceased to be occupied by patients; and we interviewed an intelligent patient (Mr. V.) who had occupied it, and who told us he had found it very comfortable, and regretted being removed from it to the Retreat, on the completion of the latter. It was, we believe, in the second of the two cottages, which adjoins the first, that the patient lived who is referred to as living like a "hermit." He was well known to members of our Board as an eccentric but quite harmless individual, who was allowed considerable liberty and indulged in many of his fancies, and we have every reason to believe that he was always kindly treated. We are informed that he has been discharged, and is now living by himself in the neighbourhood.

The person referred to as being "apparently not much short of 80 years of age" is supposed to have been the Rev. G. C. C., whose age at death was 53. He had been employed in the garden, with other patients, and had wheeled a barrow. His death was not sudden, but occurred after 12 days' illness from influenza and three days' from diarrhœa. The outdoor employment of private patients in gardening, or work connected with it, has our entire approval, as being remedial in its effect, or at all events calculated to improve physical health, and afford pleasant occupation.

With the patient boarded out at Stroude, which is a hamlet immediately below the Sanatorium, we had an interview, when he described to us the incident of the boots, and admitted that he had walked from Egham on a frosty day, barefooted, and with his boots slung round his neck. He gave us as his reason for doing so that the boots were new and hurt his feet, that he was a seafaring man, and had been accustomed to going barefoot on board ship, and that on the occasion in question he found it easier to go barefoot than to wear the boots. His residence at Stroude was with his father's approval; and he told us he had been very comfortable, and would regret leaving, as had been decided he should do. He had previously been lodged in the so-called "cement room," and he said that it had never been used as such, or in any way as a store, while he occupied it.

In connection with this case we may refer to a practice which we found to exist of "boarding out" persons, some being patients, some nominally voluntary boarders, and others not apparently possessing either character, the hospital receiving a weekly sum for maintenance, and paying thereout a less sum to the person in charge, the balance going to the credit of the hospital, and being, in part, expended in some way for the "boarded out" person's benefit. The sum paid to the hospital is usually 25s. a week, 20s. being given for the board and lodging of the patient. Such persons are in a very anomalous position as regards their legal status, and we must express our disapproval of the practice.

4. The Number of Suicides.

There have been since the opening of the Sanatorium in 1885, four suicides there of certified patients, and one of a voluntary boarder, Mr. Milne. There have also been four serious attempts at suicide. The suicide of a servant took place after she had left the hospital service, and taken away her boxes. We are informed that she had not, to the knowledge of Dr. Philipp's, previously manifested any suicidal tendency. Mr. Milne, who committed suicide away from the asylum premises, as a boarder had his parole to go unattended within certain limits, and was about to leave the hospital altogether. Immediately previous to this he was described to us as having been apparently cheerful and in good spirits, and he had, not at any time been considered suicidal; his sick leave from his employment as a School Inspector was about to expire, and it is surmised that doubt as to his future, and distrust of his capacity to resume work, led him to commit the act.

There is no doubt that the suicides and attempts at suicide were so numerous as

to indicate a grave want of care; and it will be in the recollection of the Board that it was decided during a considerable period, that Commissioners' consent to transfer of suicidally disposed patients to the Sanatorium should be withheld. All the cases referred to were the subjects of inquiry by the Board at the times of their occurrence, and, in some instances, of censure of the medical staff.

5. The Case of Alleged Scalding of a Lady (Miss L. I.) while in a Continuous Bath.

As already stated, this lady's sister attended our inquiry, but preferred no complaint. We examined in reference to this case the lady nurse, Miss Bertha Topham Jones, who was in attendance on the patient when the scalding is alleged to have occurred; Dr. Charles Caldecott, then an Assistant Medical Officer, who was summoned to the patient; Dr. Miss Jane Buchanan Henderson, of Glasgow, the Lady Assistant Medical Officer at that time who assisted in the post-mortem examination of the patient's body; and Nurse Lydia Barrett, now of Bournemouth, who prepared the body for burial, and we are satisfied that no scalding took place. On the occasion referred to, which was on June 23rd, 1891, Miss Jones, noticing a change in Miss I.'s appearance while in the bath, called loudly for the charge nurse, who came immediately and the lady was lifted out of the bath, having then actually fainted. Dr. Caldecott was summoned, and found Miss I. gasping and apparently moribund; he gave her hypodermic injections of brandy, and applied other remedies, but she remained unconscious till her death, which occurred about twenty-four hours after. All the persons examined swore positively that there were no symptoms indicating scalding, or signs on the body of scalding having occurred, and the causes of death, as ascertained by the post-mortem examination, were stated to be "Pneumonia and Acute Mania." The pneumonia was not diagnosed during life.

The use of the continuous, or prolonged, bath is held to be very advantageous in certain cases of maniacal excitement, and its employment at the Sanatorium is declared by Dr. Philipps to have been attended by very beneficial results. While not expressing any opinion as to its value, we do not condemn its use under proper conditions. The Board's views as to these conditions are indicated by the recently issued regulation as to means of mechanical restraint; and we were glad to learn that at the Sanatorium neither the prolonged bath nor any other form of mechanical restraint is now employed without previous consultation between Dr. Philipps and the Assistant Medical Officer having immediate medical charge of the patient for whom it is proposed to be employed.

6. The Case of the Gentleman who went to the Derby.

We examined this gentleman, who was, and still is, a voluntary boarder. He was intelligent, and gave us a very coherent account of his adventures at Epsom. He at that time resided in the Sanatorium, and was allowed to go at his will anywhere within three miles of the building. He told us he had alternate "good" and "bad" days, the occasion on which he went to Epsom being a "good" day. Having carefully considered his account, and the circumstances of the case as established by other evidence, we must conclude that greater care should have been taken of this gentleman at Epsom, and that he should not have been allowed to wander about the course, as he did, unattended. It seems to us that neither the Committee nor the Medical Superintendent sufficiently realise their responsibility with regard to boarders—a responsibility which is, we think, similar to, and not much less than, that under which they rest in respect of certified patients.

7. The Case of a Servant removed to the Egham Cottage Hospital.

Dr. Philipps and Dr. Moore stated to us that the removal was decided on with a view to surgical operation, the man being suspected of suffering from grave brain mischief, and it was thought that an operation to remove the evil afforded the only chance of saving his life. In fact, the man had an abscess on the brain. We find no ground for blame in this case.

8. The use of the "Dry Pack" as a Labour Saving Appliance.

We have not discovered, and do not believe, that the dry pack was used for that purpose, or with that motive, or otherwise than as a mode of treatment.

9. The alleged parading of Night Nurses to deceive Visiting Commissioners as to the Strength of the Staff.

We examined several witnesses as to this, and all absolutely denied the practice, which, indeed, is most improbable, and could hardly have escaped immediate detection had it existed. The only fact to lend colour to the charge that came to our notice is that frequently on the visits of Commissioners some additional nurses have been for the moment drafted from other galleries to No. 5 gallery, in which are warded the more maniacal female patients, who are apt to become excited by the presence of strangers. The night attendants of each sex live and spend their days out of the hospital.

We may here mention that the allegation that on the night of Mrs. Squire's escape there was a dance or other entertainment for the staff is positively denied.

10. The Certification of Boarders.

The Holloway Sanatorium is an "Institution for Lunatics as defined by the Lunacy Act, 1890," and persons who go there as voluntary patients for treatment (in other words as boarders) do so because of some degree of mental affection or insanity. The question whether they should be admitted in that character or as patients under reception orders depends on the degree of insanity. If a person is undoubtedly insane to the extent that no medical practitioner of experience could have any difficulty in signing a certificate of insanity, then the reception of such a person "except under the provisions of the Act," *i.e.*, with proper reception order, is a breach of the Act, and constitutes a misdemeanour. At the Sanatorium Visiting Commissioners have too frequently found that persons residing as boarders fall under the above description, and the Board has felt obliged in many instances to exercise the power conferred by section 20 of the Lunacy Act, 1891, and to require that boarders shall be removed, or that orders for their reception as patients be obtained. We believe that most of the boarders in the Sanatorium who have been certified have been so certified at the instance of Visiting Commissioners or by order of the Board. The tendency of the Sanatorium authorities, therefore, has been to avoid certification rather than to unduly or unnecessarily cause boarders to be placed on the footing of certified patients. For obtaining a reception order a petition must be presented by a person of full age, preferably, but not necessarily, a relative, who has seen the patient within fourteen days before the presentation of the petition. This last condition at times interposed a difficulty when a boarder's relatives resided abroad or at a distance from the Sanatorium, and for this cause was it that in some cases petitions were signed by a clerk of the hospital. The proceeding is certainly unsatisfactory, and only to be resorted to in cases of absolute necessity, and we are assured that it is not now permitted at the Sanatorium without previous reference to our office. In all cases in which it has been done relatives or persons more nearly connected with the patients have by the Board been substituted for the clerk, who by such substitution ceased to have any power of control over the patient. The suggestion that a neighbouring magistrate is not an "independent public authority" is one to which we cannot give the slightest countenance, but must completely disregard.

11. The signing of Certificates of Insanity by a discharged medical patient (Dr. S.) while residing as a boarder.

The Board will, we are sure, agree with us that this practice was extremely improper. This gentleman, between July 24th, 1888, and February 8th, 1889, signed 25 certificates of insanity, but when the practice came to the knowledge of the Committee they at once stopped it, and no certificates were signed by him after the latter date and while he resided in the Sanatorium.

Dr. S. was medically qualified; he had been discharged "recovered," and during his residence as a boarder had professionally attended the wives and families of attendants. We believe the permission given him by Dr. Philipps to sign certificates was given with no other motive than a desire to confer some pecuniary benefit on Dr. S., whose circumstances were narrow. The certificates themselves were not questioned in our office as being in any respect insufficient, and in them Dr. S. described himself as of "St. Ann's Heath, Egham, Surrey,"

which address did not of itself suggest residence in the Sanatorium, so that in examining the copies sent to our office no suspicion of such residence was aroused. Had it been, we doubt not that the impropriety, in the circumstances, of his signing certificates would have been pointed out and the practice stopped by the Board.

12. Alleged insufficiency of the Staff.

We are of opinion that there is no ground for this allegation, either as applying to the present time or to former periods in the history of the Sanatorium. The sufficiency of the staff has always been a subject of inquiry at visits of inspection by members of our Board, and the reports of those visits do not contain any complaint of inadequacy, except on one occasion, when the night nurses were thought to be too few.

We have been furnished with a list of the staff as it existed on September 25th, 1895, and find that there were: For the male division, a head attendant and his deputy, seven gentlemen's companions, 48 day and eight night attendants, a carpenter attendant, and three housemaids, a total of 69 persons; and for the female division, two chief nurses, one deputy chief nurse, 41 lady nurses, 13 nurses, and 26 housemaids, a total of 83 persons. At the same date, there were residing in the Sanatorium 144 male patients and boarders, and 167 female patients and boarders, and at Hove Villa, Brighton, a branch establishment, 18 gentlemen and 19 ladies of the two classes, four members of the male and nine of the female staff being then there employed. There was, therefore, for the charge of the 144 gentlemen and 167 ladies in residence in the Sanatorium on the 25th of September, 1895, 311 in all, a staff consisting of 139 persons, which, for domestic work, was strengthened by the employment of some so-called "after-care" cases, of whom there were 12. These are persons who had been patients in different institutions for the insane, and had recovered, but for whom it is difficult at first to find employment. They are maintained for a time in the Sanatorium in return for their services, but receive no wages, and we consider the system worthy of all praise as a work of true charity.

We were informed by the members of the Committee that Dr. Philipps has absolute discretion as to the strength of the ordinary staff, with powers of engagement and dismissal of its members, but that the medical staff can be altered or increased only with the concurrence of the Committee. The wages paid to attendants and others are, we think, liberal.

13. As to Dr. Philipps' position.

In his evidence before us Dr. Philipps modified his statement in regard to his position quoted in Mr. Gully's report, viz., "that he did not consider himself in active medical charge of the establishment, but looked upon himself more as the consultant physician." He stated to us that he held himself to be solely responsible, under the Committee, for the medical and general administration of the institution, and in the same position as any Superintendent of an asylum who has Assistant Medical Officers, the practice being for the ordinary routine of medical treatment to be carried on by the Senior Assistant Medical Officers in their respective divisions. He added that his Assistant Medical Officers only consulted with him in cases of importance, or as to which they had any doubt, but he held himself responsible for the medical treatment which he directs and controls.

To this definition of his position as Medical Superintendent we do not object. We think that in practice there has been too much of the detail of treatment, medical and other, left to the discretion of the Assistant Medical Officers, but we are assured that in future there will be regular consultation on cases, and more direct and immediate control of treatment by Dr. Philipps. There is no doubt that this is extremely desirable.

14. Discussion of the Accounts of the Sanatorium.

We must premise that the accounts discussed in "Truth," as taken from our annual reports for 1893 and 1894, are not balance sheets, the form of hospital accounts there published being merely that of cash accounts of receipt and payments, and they are given solely or mainly for the purpose of comparison between

the several Institutions. They consequently afford no information as to the disposal of surplus income, or as to profit and loss.

We do not agree that the expenditure on structural work at the Sanatorium has been extravagant. As was stated in our 40th report (for 1885), the building "was not designed most suitably or conveniently for its purpose, and in particular did not include any well-contrived department for the treatment of excited cases." The deficiency had to be supplied, and many alterations, in great part suggested, and all approved by our Board, had to be effected at a considerable outlay, which was supplied out of surplus revenue; and from a return furnished we learn that down to the end of 1894, £38,185 were so provided and expended. We fear that outlay in this direction has not yet reached its limits. The hospital is well, but not, in our opinion, too luxuriously furnished, for we must approve of anything in reason that adds to the well-being and comfort of the patients. In this connection we may state that the accounts of the hospital show that the average weekly expenditure per patient has increased from £1 15s. in 1887 to £2 1s. 10d. in 1894.

The hospital accounts are audited by a chartered accountant whose appointment is approved by our Board, and he gave evidence before us that they are carefully kept, and duly vouched. It is almost unnecessary to add that the members of the Committee whom we examined, assured us that no one member of that body had any pecuniary interest in the Institution, and the Medical Staff, none beyond their salaries and recognised emoluments; and in addition, the auditor testified that no payment other than the foregoing was ever made.

The Board is aware that the charitable element in the administration of the Sanatorium is governed by a scheme sanctioned by the Charity Commissioners, which provides that a certain proportion of the patients shall be received and maintained at considerably less than their actual cost, one half being received at charges not exceeding 42s. per week, and one half of these at charges not exceeding 25s. per week.

Evidence has been given which satisfies us that this condition is fully observed, and it appears that in 1894, charitable assistance, taken as the difference between the sum of the maintenance rates actually paid for this class of patients and the amount which would have been paid had the actual average cost of maintenance per head of all patients been charged, amounted to the sum of £6,560 7s. 3d.

We have now dealt with the various allegations of the periodical in question, and with the personal complaints of Mr. Squire, and, as the result of our inquiries, and the evidence given, we consider some to have had reasonable foundation, but the majority to be unfounded or resting on very slight and unimportant incidents.

It remains that we should offer some remarks on the general administration of the Sanatorium.

We questioned the members of the Committee who gave evidence, as to the amount of supervision exercised by the Committee of Management, and we were satisfied that many members of that body take an active part and interest in the affairs and administration of the Institution, which they to a very considerable extent control. It would, however, be impossible for a Committee to exercise a very minute control. The details of administration and the whole of the medical and other treatment of the patients must necessarily be left in the hands of the Medical Superintendent, and a too officious interference with his discretion would certainly be injurious.

As regards Dr. Philipps' past management, while not overlooking the very arduous task undertaken by him in the organisation from the beginning, and subsequent rapid development of the Sanatorium, and the varied duties in regard to these which devolved upon him, we must express our opinion that the failures and shortcomings which have come under our notice and that of our Commission, have been in a great measure due to want of that close and unremitting personal attention on the part of the Medical Superintendent which alone can ensure the continuously successful management of so large and important an Institution, and also to some neglect of the frequent individual intercourse with, and examination of patients, and careful consideration of their varying condition, which we regard

as essential to their proper treatment. We recognise that in so large an Institution there must be some devolution of the latter duty upon the subordinate Medical Staff, but the Medical Superintendent should still remain in full touch with all his patients, and be thoroughly conversant with the progress of every case. We must add also that there has not been on Dr. Philipps' part the strict observance of the requirements of the Lunacy Law which we regard as most important. We refer more particularly to the reception, as boarders, of persons undoubtedly insane, and who should have instead been admitted as duly certified patients in conformity with the provisions of the Act.

The recently revised Regulations of the Hospital, which will shortly be submitted for the sanction of the Secretary of State, contain a provision requiring the Medical Superintendent daily to visit all parts of the Institution and see every patient, the due observance of which requirement will, we trust, ensure the full and accurate personal knowledge and appropriate treatment of each case, and prevent the recurrence of such defects in administration as have been indicated in the course of our inquiries. All of which we submit to the Board.

(Signed) C. S. BAGOT, }
 (Signed) F. NEEDHAM, } Commissioners in Lunacy.

October 30th, 1895.

[On the 14th Feb. the House of Commons took steps for procuring the public issue of the foregoing Report on the motion of Mr. John Ellis.—Ed.]

THE CERTIFICATE IN MENTAL NURSING: RECOGNITION OF THE VALUE OF TRAINED SERVICES.

At a meeting of the Committee of the Joint Counties Asylum, Carmarthen, in January last, it was decided that a bonus of £1 10s. should be added to the wages of every attendant in the service of the asylum who should pass the examination for the above Certificate, at the end of each completed year of service after taking the Certificate. The thirteen candidates successful at the examination last May were presented at a Quarterly Meeting with their Certificates, framed by the Committee's directions, and with the medals.

The plan of recognising by a pecuniary addition (varying in amount in different institutions) the value of trained services has been adopted already at several (a dozen or more) asylums.

MALE NURSES (TEMPERANCE) CO-OPERATION.

The report of this Association for the year 1895-6 shows that the average earnings of each member working throughout the year was £101 16s., after paying all expenses. This result, moreover, is arrived at not by excessive, but by moderate charges and a careful limitation of the costs of management, which in too many nursing institutes deprive the workers of a very large percentage of their earnings.

This Association therefore appears to be worthy of support, both by the medical profession and the best class of male nurses.

ASSOCIATION OF ASYLUM WORKERS.

We have been favoured with a copy of the Executive Committee's memorandum to asylum workers.

"The Association has been initiated under the most favourable auspices, and bids fair to become a National movement. The hope is justified that the *Asylum Workers' Association* will, at no distant date, hold a place in the public estimation and regard similar to that held by the *Hospital Nurses' Association*. The Association is fortunate in the many expressions of sympathy and goodwill it has already received from the official and general public.

"President:—Sir Benjamin Ward Richardson, M.D., F.R.S. Vice-Presidents:—The Lord Bishop of London, Cardinal Vaughan, C. S. Bagot, Esq. (Lunacy Commissioner), Dr. Needham (Lunacy Commissioner), Dr. Wallis (Lunacy