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PHILA. HOSPITAL  
INSANE DEPT.  
REPORT 1885

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# REPORT

OF THE

## CONSULTING STAFF

OF THE

# INSANE DEPARTMENT,

PHILADELPHIA HOSPITAL.

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CONSULTING STAFF OF INSANE DEPARTMENT,  
PHILADELPHIA HOSPITAL.

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*Philadelphia, January 30, 1885.*

To the Board of Guardians of the Poor.

GENTLEMEN :—The Rules given us for the Regulation of the Consulting Staff, exact from it inspection duties, as well as consequent reports, and suggestions for the better government of the Hospital. In accordance with your requests we have arranged our order of service, and have also made primary inspection of the wards; ventilation, heating, food and occupations of patients, and of the general character of the nurses called attendants, and of the mode of their appointment and discharge.

WARDS.

The new wards are comfortable, well built and heated, lighted and ventilated. The old wards are most dismal halls, quite unfit for their present purposes, and are, on the whole, badly ventilated—most wretched, of all are the attic female wards in the old buildings, and the male violent wards. There is a good deal of room wasted in the now unused dark cells and closets, and needed space might be gained by inexpensive alterations. As yet, we have made no inspection of drainage. Below will be found more specific statements. The wards are kept remarkably clean and the beds and bedding are neat and

clean also. Probably it would be best to reform the old establishment by building wards enough like those in the new building. We give below a report on the state of the separate wards, with the number of patients at the date of inspection, and the number of attendant nurses.

#### MALE WARDS.

Ward K.	Patients.....	72.	Attendants.....	3.
		(Clean.)		
Ward N.	Patients.....	24.	Attendants.....	2.
		(Closets filthy.)		
Ward O.	Patients.....	23.	Attendants.....	2.
Ward L.	Patients.....	73.	Attendants.....	3.
Ward 2.	Patients.....	24.	Attendants.....	2.
Ward M.	Patients.....	74.	Attendants.....	4.

This ward contains an Infirmary room which lies between dormitories, and has about 25 beds, and strangely enough, this the refuge of the sick has been placed in the ward for the violent and incurably filthy. It should be the best room in the house.

The water closet for this Infirmary is placed in the corner of the Infirmary chamber, and is ventilated into this home for the sick.

All of this ward is dreary past description; ill ventilated; has the mouldy hospital smell, now so rarely encountered, and has corridors paved with asphalt like a sidewalk.

This is the home of the incurable, filthy, and the violent. If an effort had been made to match their hopelessness with an abode which suggests nothing but a blank, it could hardly have been better done. They are well fed, but the plain white walls, and the absence of prints or pictures or colour must be depressing.

#### FEMALE DEPARTMENT (OLD WARDS).

Ward A.	Patients.....	40.	Attendants.....	2.
Ward B.	Patients.....	40.	Attendants.....	2.
Ward C.	Patients.....	40.	Attendants.....	3.
		(This is the Infirmary.)		

Ward D.	Patients.....	35.	Attendants.....	3.
(This is the violent Ward.)				
Ward E.	Patients.....	35.	Attendants.....	3.
Ward F.	Patients.....	35.	Attendants.....	3.

## (NEW WARDS)

Ward G.	Patients.....	26.	Attendants.....	3.
Ward H.	Patients.....	26.	Attendants.....	2.
Ward I.	Patients.....		Attendants.....	2.
Ward J.	Patients.....	60.	Attendants.....	2.

This is an attic, and is altogether unsuitable for hospital purposes. The ceiling is low and the windows small. It must be in summer unendurable at times, with its number of chronic and for the most part hopeless cases. The ventilation is wretched, and the water supply being bad at this level, it is impossible to keep the closets wholesomely clean.

Without reasonable warming arrangements in relation to a system of ventilation it is impossible to have perfectly well aired rooms. The ward temperatures were good at our two visits, but most of the old cells which are used as dormitories are now well warmed.

## OCCUPATION.

The best hospitals are distinguished by the number of insane persons who can be induced in any way to work. Work is not merely a benefit as making many of them happier, but it appears to be directly valuable as a medical aid towards the restoration of health, of both mind and body.

At present, all the sewing, washing and ironing for the insane male or female is done by the women, who also do the domestic work of their wards. The male patients do the domestic work of their department, and some labor in the kitchen, laundry and yards. The amount of work thus accomplished is, of course largest among the women; but even among those females who can work, or can be taught to work, there is not enough domestic labor, and there is needed for them more various, and if possible, more interesting work.

Hints as to these points may be readily had from the reports of the more kindly and intelligent hospitals, such as the London Hospital, Canada, Hanwell and Norristown. The males greatly need more work and more kinds of work. The sight of these vasts, cheerless, undecorated rooms with their too numerous inmates, silent and dejected or in restless movement, but one and all absolutely unoccupied, suggests to the active onlooker that such of these insane as can still feel the weariness of hours empty of sport or of productive and therefore interesting labor must have added to their disease of mind much that we have no right to inflict; for we do not condemn even the criminal to the horrors of hours, unfilled by any labor. As it is the good custom to send away to country hospitals as many curable cases as can be thus provided for, the sad remainder must, of course, represent an usually difficult class to help and to discipline. Nevertheless, it is believed that seventy per cent. could be induced to do work of some kind; that is, enough to make a difference in their happiness and chances of relief.

The means of providing out-door work exist in the few acres of garden, now cultivated, we believe, by able-bodied paupers and the gardener. More land could be used, and to make any out-door work valuable, more persons must be employed to oversee and instruct the patients, who may be thus occupied. For in-door work we advise the erection of shops, where brush, mat and mattress making may be bought and where a certain number be incited to use their own trades, such as shoemaking, etc.

The means in use in England to bribe patients to work are:

First. The giving of tobacco.

Second. The addition of certain much craved articles to the diet list.

Third. The privilege of sitting up later, and the use of a room where should be found games, illustrated papers, etc.

At Hanwell this system of bribes has answered admirably.

*Amusements, Library Books, Papers, Pictures.*

Some effort is made to amuse by balls, concerts, recitations, magic lanterns. In 1884 there were about two balls every three weeks. It is very doubtful if these are of any value, chiefly from want of efforts to direct and organize. If concerts of simple nature replaced them, the change would be a good one. There were six concerts in the year, and one magic lantern entertainment.

The library consists of a dolorous collection of antique religious books, official reports, stray school books, and ragged travels. Of course but few of these insane can read, or desire to read, yet a good collection of simpler popular books would be of use. Some novels are desirable, and, above all, illustrated books and the pictorial journals are to be desired, and would be sought for with pleasure by even those who do not read.

Twenty daily papers are sent to the hospital, and a fair collection is made from boxes placed in railway stations; but these, though of use, do not replace the picture papers, which are rarely given. Each ward has a room in which patients may sit to read or play games, and where at present they receive their friends. There should be reception rooms for this latter purpose. Cards are supplied, and checkers; other games might be added, but as no effort is made to teach or personally amuse the patients, these means are little employed. The airing courts are large enough, but not having paved spaces are muddy and difficult of use in wet weather.

There seem to be no set rules as to exercise out of doors. In summer, most, if not all, are out part of each day. In winter, save those who work, the great mass of these poor creatures never go out of doors at all. On asking why, we were told that they had no warm enough clothing. Really, what is wanted is organization and a desire on the parts of attendants to do something beyond the merest barren routine. There are croquet sets, but no one to teach or invite to the game;

while balls, shiny quoits, etc., might be of value, they would be of no service with the present personnel of the ward attendance. The existing staff of physicians is altogether inadequate to the due medical care of the inmates, and it is now impossible to carry out your directions to us, which ask for the keeping of notes on the physical and mental condition of the patients. We advise that there should be appointed, at least one or more male, and an equal number of female resident physicians to be elected each year, as are the present residents of the general hospital.

There is for this vast mass of people (about 670) many of whom have distinct physical ailments; one night nurse for males, and one for females. These two are the only watches, and they alone are afoot at night, and are expected to give what medicines are needed at night, and to take notes. The ludicrous inadequacy of this arrangement needs not to be dwelt upon.

The character and general fitness of the nurses is very low as a rule; so much so that the apothecary, alone is intrusted with the giving of medicines in the day time.

We propose, if desired, to make a thorough examination of nurses in regard to their general character, and their ability to read and write, etc.

All attendant nurses are appointed by the Committee on the Insane Hospital, and no matter how grave may be their offences; if they be drunk, brutal, or absent without leave, they are not removable by the physicians without a hearing before the Committee, a system which puts an end to all possibility of exact and reasonable discipline. This system stands alone in this Commonwealth, in this hospital, and would be laughable were it not too serious a question for mirth. We give in evidence as to this point, the following communications from the heads of various asylums.

Dr. Chapin, Pennsylvania Hospital for the Insane, Philadelphia, says:

“The Physician in Chief has power to select and dismiss



at his pleasure all the attendants and other persons employed in the care of the insane. It is my further duty to report such discharges to the Committee. This power has been systematically exercised."

We give in full, the letter of the Physician to the Pennsylvania State Lunatic Hospital, Harrisburg. He says: "As Superintendent, I have the power to dismiss a nurse or attendant for drunkenness, misconduct, or dereliction of duty. This power is absolute, and has never been questioned. I believe that the Superintendent should always appoint and exercise entire control over all subordinate officers and assistants, have the entire direction of the duties of the same, and his authority to discharge them, when unfaithful, should be absolute. Any man who cannot be intrusted with such authority is not competent to take charge of any institution.

"According to the law and the instructions of our trustees, I am to appoint the attendants and nurses for the female department of this hospital, but as the female physician must be responsible for their actions, I authorize her to nominate or appoint, control and dismiss, when unfaithful, all employees necessary for the medical care of the female patients, and report the facts to me in each case. In this way, only, can her work be a success.

"Very respectfully,

"J. E. GERHARD,

"*Superintendent.*"

Dr. John C. Hall, of the Frankford Friend's Asylum, Frankford, writes that he has full power to appoint and discharge all employees. The power to do this "should be in the hands of the resident officer in charge, whose knowledge of the efficiency of the person would enable him to determine the qualifications of the incumbent. I do not think the welfare of the patients and the good order of the institution can in any other way be so well secured."

Dr. Schultz, Danville Hospital for the Insane, writes, January 15, 1885: I give a paragraph from the By-Laws: 'The

Superintendent shall be the Chief Executive Officer of the Hospital. He shall appoint and exercise entire control over all subordinate officers and assistants in the institution, and shall have entire direction of the duties of the same.' The quotation is taken from a section of the Act (March 27, 1873) organizing this Hospital. Since the opening of the Hospital, the Trustees have never expressed any desire or manifested any inclination to restrict the authority conveyed in that paragraph. I have accordingly employed and dismissed attendants, etc., as my judgment dictated, without official pressure from any source. I think I have been rarely fortunate in having a Board so courteous, who insist on results, but allow me the choice of instruments and methods."

Dr. R. W. Chase, State Hospital for Insane, Norristown, January 14, 1885, answers our query by the following extracts from the Rules of his Hospital:

*"Chapter III.*

"SECT. 2. Each of them, by and with the advice and consent of the Board of Trustees, shall appoint the necessary supervisors, attendants, and other employees in their respective departments, and shall prescribe their duties. But shall not agree upon their compensation until the Board fixes the same.

"SECT. 8. They shall see constantly that all persons employed under them, perform faithfully the duties required of them, and, from time to time, they shall give them such instructions as may be deemed necessary to secure the exact and thorough performance of their respective duties.

"SECT. 9. They shall be authorized to discharge from service any of the attendants appointed by them, as aforesaid, whenever they shall cease to be satisfied in respect to the performance of their duties, and report the same to the Board at its next meeting, for their approval or disapproval.

"SECT. 10. They shall prepare a code of rules and regulations for the government of their employees, which shall be printed, and a copy furnished each employee."

Dr. Alice Bennett (State Hospital for Insane, Norristown) says:

“I have full power to dismiss an attendant for any cause which seems to me sufficient, and to make the discharge prompt and final.

“It then becomes my duty to report the discharge to the Trustees and to the Lunacy Committee, with cause of discharge, etc.

“I cannot conceive of holding my position under any other circumstances than these.

“The most unworthy attendants are those who are apt to try to appeal to the Trustees; and if the latter listened to their stories we would be involved in endless complications, and my authority and discipline would be greatly weakened.

“Perhaps, I should say that I aim never to act hastily, and of course my assistant, in similar circumstances, tries to do justly by all.

“Yours, very respectfully,

“ALICE BENNETT.”

Dr. Curwen, of Dixmont, writes that he has full power to dismiss for drunkenness, misconduct, or dereliction of duty.

Ancient evil usage in the Philadelphia City Lunatic Hospital has left the appointment and discharge of nurses, etc., in the hands of a lay committee, and so made the physician responsible for so-called subordinates, whose insubordination he cannot punish, and who look beyond him for an appeal to his superiors.

Cruelty, oppression, and great wrong to the feeble and mindless must have come out of this in the past, and there is no day when it will cease to be productive of disgraceful consequences.

We earnestly advise that the power to appoint and dismiss employees be lodged with the Physician in chief, and that some such rule as that which governs the matter at the Norristown

Hospital be adopted by your Board. This power having been given, the physician should be held to strict accountability for his subordinates.

It is to be desired that in time the work of the Training School for Nurses be extended to the Insane Department of the Philadelphia City Hospital.

In conclusion, we would most earnestly and respectfully call your attention to the need there is for more provision for escape in case of fire.

The women's side of the building we conceive to be much better prepared than the men, in that it is provided with two fire escapes; nevertheless, much of that which we shall say in detail in regard to locks, etc., of the male wards, applies to the female department.

We would also point out for your consideration that the exposed portions of the front fire escape of the women's building are only protected by a low railing, over which, in case of a rush, persons would certainly be precipitated into the arena below. We are informed that already one death has been caused by falling or jumping over this railing, and think that the slight expense of putting up stout wire nettings to prevent further accident should be at once incurred.

On the men's side the wards, so far as concern escape from fire, are essentially the same on each of the three floors. In order to get to the fire escape from the large general sleeping rooms, it would be necessary to pass through four doors, each of them always kept locked. Several of these doors are not sufficiently large to allow two large men to pass easily at a time, and three of them open into corridors, so that should an uncontrollable rush be made towards the point of escape, the whole mass of sixty panic stricken lunatics would jam against the first door, which would have to be opened against them.

If this door were opened through, the patients would then be joined by the inhabitants of the ward, or so many of the latter as could get out of their cells, and at each successive

door the jamming and difficulty of passage would be increased by the continual augmentation of numbers.

More than this, in the second ward, 20 of the lunatics are locked up at night in as many cells, the heavy doors of which are further secured by stout iron latches that can only be opened from the outside.

As stated previously, there is but one night watchman for the whole building, and there is no means by which he, without leaving the building, could raise a general alarm in case of his finding a fire, and when it is remembered that the process of liberation above described would have to be done upon three floors that are separated by locked doors, it is plain that the old man who acts as watchman during the night would have his hands full to awaken the nine attendants on these three floors, and these attendants would require to be remarkably cool headed to control the 260 lunatics, and unlock the 12 corridor doors and the 60 cell doors. We find that the locks require several keys, and are from long usage difficult to open, and require several minutes when there is no cause for a panic. We believe that in case of such a panic as ought to be expected if a fire occur, the attendants would be practically powerless, and a large proportion of the inmates would be burned to death.

There are in addition to the fire escapes, four interior stair cases in the building. One of these stair cases is boarded over and may be left out of consideration, the second is in the centre building, and would probably be found more serviceable in case of a fire than the fire escapes, because more easily gotten at. Only one locked door is between it and the lunatics in the large wards. That is a majority of all the patients. To get at the third stair case, two habitually locked doors must be opened, the fourth stair case is very narrow, and is habitually kept locked at the bottom.

The probabilities of the destruction of life in case of fire is further manifest, when it is remembered that upon the fourth floor are lodged between 20 and 30 paralytics, who could not

help themselves easily; that the whole building is very combustible and not at all fire proof; that the single watchman would, like enough, be in the beginning paralysed in deciding to choose whether to attempt to get out the people or to put out the fire; that there is not a fire plug, a foot of hose, or a fire extinguisher, in the whole building, and that in the upper stories there is no certain supply of water. To sum up, in a very combustible building with 260 lunatics and 30 disabled paralytics on the fourth floor, controlled by 75 locks with various keys, besides numerous latches; there is but one night watchman, and he is said to be infirm, to discover the fire and alarm the people, and there is no means provided to raise a general alarm. There are only nine attendants to control the patients and open the doors, no apparatus to extinguish the fires, and no one to use such an apparatus unless it be the lunatics themselves and some untutored employees, who, we believe, mainly sleep away from the wards.

We believe that a second fire escape might be very well erected in connection with the men's department, but it is perhaps not essential if certain precautions which can be readily taken are now carried out. We would respectfully suggest the following:

That the number of watchmen be increased.

That the employees be so distributed through the wards as to be available in case of fire.

That fire apparatus, both in the form of plugs and hose and fire extinguishers, be distributed throughout the building.

That a bell be so placed that a watchman could, if necessary, raise the alarm without leaving the floor on which the fire was discovered.

That new locks be placed upon all the corridor doors to be opened by the one key, so that the latter should give access to either any ward, in either the male or the female department.

That no patient should be locked in a cell at night, as these cells are provided with latches which cannot be opened from



the inside, it must be a very rare lunatic who requires further security.

often as may be necessary, both patients, attendants, and employees be thoroughly drilled in the art of escaping buildings rapidly and quietly. We believe that such a system could be very readily made a source of amusement to the patients.

S. WEIR MITCHELL,  
H. C. WOOD,  
CHAS. K. MILLS.





Occupation, when admitted, of male patients in this department,  
January 23, 1885.

Laborer.....	129	Stone mason.....	or to put
Clerk.....	10	Ship joiner.....	hose, or a
Weaver.....	9	Type finisher.....	upper
Baker.....	5	Teamster.....	1
Carpenter.....	5	Tanner.....	1
Cooper.....	4	Teacher.....	1
Moulder.....	4	Upholsterer.....	1
Shoemaker.....	4	Marble polisher.....	2
Barber.....	3	Peddler.....	2
Cigar maker.....	3	Sailor.....	2
Dyer.....	3	Stone cutter.....	2
Machinist.....	3	Varnisher.....	2
Tailor.....	3	Butcher.....	1
Blacksmith.....	2	Broom maker (blind).....	1
Brick maker.....	2	Boiler maker.....	1
Bartender.....	2	Basket maker.....	1
Cabinet maker.....	2	Bricklayer.....	1
Engineer.....	2	Cutler.....	1
Farmer.....	2	Confectioner.....	1
Fireman.....	2	Coachman.....	1
Gardener.....	2	Comb maker.....	1
Hatter.....	1	Compositor.....	1
Hostler.....	1	Druggist.....	1
Janitor.....	1	Dentist.....	1
Messenger.....	1	Fondryman.....	1
Mill-hand.....	1	File maker.....	1
Newsboy.....	1	Gilder.....	1
Printer.....	1	Huckster.....	1
Piano tuner.....	1	Wheelwright.....	1
Puddler.....	1	Waiter.....	1
Physician.....	1	Wool grader.....	1
Plasterer.....	1	Watchman.....	1
Rag picker.....	1	Wood carver.....	1
Skin dresser.....	1	No occupation.....	62
Shoe fitter.....	1	Unknown.....	14
Soldier.....	1		
Storekeeper.....	1	Total.....	331











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