

'Buried Between Factories': Bond Street Maternity Hospital 1905-1971

Shirley Aucott



Bond Street Maternity Hospital, labour ward. Date unknown. (The author's collection.)

February 1902 through Lord Cecil Manners, MP for the Melton Division of Leicestershire.

The Midwives Act came into force on 1st April 1903, but Leicester was not ready to implement it, as Dr Charles Killick Millard, the Leicester Medical Officer of Health, explained 'No provision has yet been made for the local training of midwives. Many of the larger towns are already moving in this direction'. (1) After approaching the Leicester Infirmary and the Poor Law Union, who declined to introduce a course of midwifery training, the N.U.W.W. turned to the Board

The Maternity Hospital, colloquially known as Bond Street, was situated on the corner of Causeway Lane and East Bond Street, Leicester, in what was a very deprived and industrialised area of the Town. In the early 1880s, Dr William Farr (chief statistician to the General Register Office) called for the better training of doctors and midwives in obstetric practice with the intention that it would reduce the high maternal mortality rate, which had raged throughout the nineteenth century. The establishment of the Maternity Hospital in 1905 was a response to this call. Taking up this cause in the 1880s was the Matron's Aid and Trained Midwives Registration Society who acted as a pressure group by lobbying Parliament to introduce a Midwives Registration Bill. Rosalind Paget (later Dame), the daughter of John and Elizabeth Paget, *née* Rathbone, was a trained midwife and an active member of the Society. She was also the second cousin of Agnes Mabel Bruce, daughter of Thomas and Agnes Fielding Johnson, *née* Paget. Together they brought the 'Midwife Question' to the attention of the Leicester branch of the National Union of Women Workers, who, in 1897, formed a special committee comprising of Isabel Ellis, Charlotte Ellis, Mary Coy, Fanny Fullagar, Emily Bosworth, Mrs Sanders and Mrs Peake, to actively take up the cause of the Midwives Registration Bill by bringing it before their local MP. After several attempts to get the Bill through Parliament, they succeeded on 26th

of the Leicester and Leicestershire Provident Dispensary who agreed to do so, if supported financially. An appeal was launched by Rachael Ellis, *née* Hutchinson, president of the N.U.W.W., and sufficient monies were raised by March 1905 when seven cottages, adjacent to the Provident Dispensary in Causeway Lane, were leased. Four of the cottages were converted into a small maternity teaching hospital which opened in July 1905. Its aims were to provide lying-in provision for working class women at a moderate fee, and the training of pupils for the examinations of the Central Midwives Board. Miss Mason was appointed matron, but was quickly replaced by Jeannie Gray. However, it soon became apparent that five beds were totally inadequate, and the three remaining cottages were converted and opened in 1909, although demand still exceeded supply.

On 1st July 1910 the Hospital separated from the Provident Dispensary and became an independent institution calling itself the Leicester and Leicestershire Maternity Hospital. Its governing Council was Thomas Cope, the president, and Agnes Fielding Johnson, Rachael Ellis. Sir Edward Wood and John E. Faire, were vice presidents. Dr Ernest Lewis Lilley became its medical officer and lecturer, with his general practice partner, Dr Clarence L. Somerville, joining him later in 1931. Jane Paget, *née* Clephan, became its honorary corresponding secretary up until her death in 1938.

An appeal to potential donors for specific help for the Hospital was made in Dr Lilley's 1910 report:

A notable feature which comes out in the records is the large number of premature births, a state of affairs due doubtless to the fact that the Hospital draws its patients largely from the workers in factories. The care of these premature babies is a very anxious problem. This work would be greatly helped if some kind donor would present an incubator to the institution. (2)

The need for expansion was constant, as was the need for voluntary funding prior to the introduction of the National Health Service in 1948. Like all voluntary hospitals, funding was totally dependent on its income from patient and pupil fees, subscriptions, donations, legacies, periodic appeals and fluctuating grants from the Local Authority and the Government. Donations, legacies and subscriptions came from many well known Leicester families, such as: Corah, Morley, Faire, Gimson, Ellis, Paget, Wykes and Pickard. One family that dedicated themselves to the Hospital was the Fielding Johnsons, and when Agnes died in 1917, she was seen as a major loss to the Hospital: 'The Hospital and Council have sustained an irreparable loss in the death of Mrs Fielding Johnson ... and the Council feels that her name should be perpetuated in connection with it.' (3) To achieve this, a bed was endowed in her memory and a ward was named after her. Many memorial gifts were also given in her memory, including '[a] beautiful Memorial Clock by Mr John E. Faire'. (4) Agnes's daughter, Agnes Wallace Bruce, took her mother's place as a vice president and later as president in 1932 after the death of her half brother, Thomas Fielding Johnson (jnr), who was president from 1925.



Agnes Fielding Johnson.
(The author's collection.)

Gifts given to the Hospital were generous and diverse including: a copper, firewood, concert tickets, newspapers, magazines, flowers, clocks, a rug for matron's room, baskets of Empire fruit, chests of tea, eggs, a wireless set, electric lamps, bales of flannel and flannelette, a floor polisher, an air cushion and a quantity of crockery from the Great Central railway station master. Every individual who

gave to the Hospital, was thanked in the annual report and special note was made of a particular gift: During the First World War there was a decline in donations, due to peoples' money probably being diverted to the war effort. However, there was one very welcome gift which helped to raise spirits: 'Mr J. E. Faire, who is a "friend indeed", presented a beautiful piano to the Hospital. This is a possession which has been ardently desired for a long time. It is, of course, a great pleasure to the Staff and even patients can enjoy it'. (5)

Nevertheless, a lack of donations and the rising cost of food put the Hospital Council under considerable financial strain. There was also an increased demand for admissions, which was an added pressure on the Hospital. An influx of Belgian refugees coupled with an increased demand for admission by soldiers' wives, drained resources and resulted in many applicants for admission having to be refused. The booking of local doctors for home births was also limited because they too were on active service. Consequently, more women sought hospital admissions. The Hospital's own medical officer, Dr Lilley, left for military service in Egypt in 1916 and did not return until early 1919. Whilst away, Dr E. C. Hadley, Superintendent of the Workhouse Infirmary, gave lectures to the pupils and Dr David W. Noble undertook a visiting role at the Hospital. Military demands also meant that there were fewer nurses, or pupil midwives.

Financial problems continued in the early post-war period due to a lack of admissions caused by influenza, and patients being admitted to Westcotes Maternity Hospital, which had been opened by the Local Authority in 1919. This new departure was deeply concerning for the Hospital Council:

The Council begs its subscribers and friends not to imagine that their support is less needed in consequence of this new departure by the Corporation. It would be a real loss to Leicester if this modest and comfortable institution were not enabled to carry on its existence. It is situated in a part of the City where it is most needed. (6)

However, admission numbers soon recovered with the demobilization of men. The number of pupil midwives increased too, their services no longer needed by the military. Bond Street also had a good reputation for training as evidenced in 1920 when an extract from *Nursing Notes* appeared in the Hospital Council report: 'Particular tribute was paid to the Leicester Maternity Hospital which not only trained pupils so successfully, but was also a happy home. One of the Association's pupils from there was specially commended by the Examiner – a rare occurrence'. (7) Three years later a similar comment was made. (8)

Even with the increased number of fees paid by pupils and the raising of patient's fees, the cost of new equipment and the pressing need for an extension meant the Hospital continued to struggle financially. By 1927 the Hospital Council became extremely anxious about the financial situation and decided to ask the Board of Governors of the Provident Dispensary to again take them under their wing. The Board agreed to do so and the Hospital Council was dissolved and an annually elected committee formed. Despite this action, financial problems continued, exacerbated by the Local Government Act of 1929, which reduced the number of grants they had previously received from the Ministry of Health.

Meanwhile the Hospital continued to be overcrowded, with nurses often having to be sent out to sleep in order to accommodate patients. Unlike their training, the nurses' accommodation was not of a high standard. In 1920 two rooms in the roof space were converted into bedrooms and in 1928 seven further cubicles were added above the Provident Dispensary. Dorothy Barker, who trained there in 1932, thought the accommodation very spartan 'We had sort of cubicles, not rooms. They were on the second floor and there was not much in the way of bathrooms'. (9)

When premises adjacent to the Hospital had become vacant, the Hospital Council negotiated with the City Tramways Department who were the owners, and successfully obtained a sixty year lease with reasonable terms. They hoped to build an extension on the land, but insufficient funds prevented them from doing so for many years. It was not until 1933 that the extension, containing a theatre, electric lifts, new wards, nurseries, a dining room, kitchen, a lecture hall and bedrooms, was officially opened by Sir Julien Cahn on 19th October 1933.

Gifts in this period included the following from Queen Mary: 'During the autumn of 1932 Mrs Morley laid before Her Majesty Queen Mary, the special needs of the Hospital and received from the Queen a gift of "Old Wedgwood" to be sold for the benefit of the Extension fund. (10) The following year special thanks were given to 'Messrs John Foster and Sons Ltd, of Queensbury, Bradford, for arranging the famous 'Black Dyke Mills Band' to give two concerts in the De Montfort Gardens on 3 September 1933'. (11)

Cramped and inadequate conditions did not prevent the Hospital from advancing its obstetric practice, particularly its ante-natal care. The spring of 1918 saw the Leicester Sanitary Committee open its first ante-natal clinic, attended by its Medical Officer, Dr Mary Weston, who co-operated with Dr Lilley by holding a weekly clinic in the Hospital. However, in 1925 a new ruling by the Central Midwives Board stipulated that maternity hospitals should run their own ante-natal clinics. Consequently, the Hospital opened its own clinic in the Provident Dispensary in October 1925.

During the 1920s and 1930s maternal mortality was still extremely high, but Bond Street figures reflected a much more favourable picture. In his 1927 report Dr Lilley believed that the ante-natal work being done at the Hospital '... serve[d] a very valuable purpose in the prevention of disease and death during and after labour'. (12) His following report gave statistics for the Hospital's



The staff of Bond Street Maternity Hospital in the early 1930s. Matron Jeannie Gray is seated centre with Dr Ernest Lilley next to her and Sister Heggs, the clinic sister, next to him. The names of the other staff are unknown. The dog, called Scottie, belonged to the Matron. This photograph was used to raise funds for the 1933 Hospital extension. (The author's collection.)

previous seven years:

During that time 3,611 patients have been admitted to the Hospital, an average of 516 per year. In 1929 the figure was 534. During these seven years the number of maternal deaths was 5, being 1.38 per thousand births, which compares with the National figure for England and Wales of 3.81 per thousand. Of these five deaths, one was due to pneumonia ... which was concomitant with labour. (13)

Dorothy Barker, who had been a ward sister at the Leicester Infirmary before doing her midwifery training at Bond Street, explained why she thought maternal deaths were low: 'The mothers had single rooms and they were delivered in their own beds. This helped to prevent the spread of infection. (14) Improved instrument sterilization also prevented the spread of infection, and this was improved, in 1920 when a grant from the Ministry of Health paid for the conversion of the drying shed into a sterilising room equipped with a steriliser and fittings. Irene Bailey, *née* Snow, who trained at Bond Street in 1936 and then became a staff nurse, thought infection a rare occurrence: 'We got very little infection of any sort. It was A1, it really was a marvellous Hospital. I mean when you consider what it stood in. It was absolutely buried between factories. I don't remember any infant mortality ... mind you we had to work really hard'. (15)

The sterilization of equipment may have improved, but the age of the property and its location attracted vermin, which was a large and constant problem. Dorothy Barker did not enjoy breakfast time very much as: 'The cockroaches [were] in with the bacon, on the dish, in the morning.' (16)

Olive Wagstaff, who trained three years later, had very clear memories of incidents with rats: 'I was collecting all the patients' trays when I was on night duty and to my horror there was a large rat trying to negotiate the polished corridor before me. I had to mark time to give it time to scamper out of the door and get away'. (17) On another occasion she recalled: 'One senior nurse called Scottie did a toreador act when dealing with a rat. It was reported by one of the mothers who said she was sure a big mouse ran over her pillow during the night. We thought she had imagined it ... We removed her and baby from the room and Scottie, with a bucket and poker, managed to nobble it'. (18) Irene Bailey, also had similar memories 'They would get onto the table to take bread and sometimes placentas out of the bin, if the lid had not been replaced properly'. (19)

Not only was the Hospital troubled by vermin, but so, too, were the surrounding houses, as Dorothy Barker explained when doing her district training:

On the district they were the most terrible houses ... The beds were terrible, they were sagged, of course, from long use and there were people all about while you were busy ... They hadn't got room to tip them out ... There were no kettles. Saucepans we had and I mean things use to drop off the ceiling into the saucepans ... While we were waiting for the woman to get delivered we use to sit outside on the pavement and the policeman would go by ... and have a little chat with us. (20)

The Hospital's district midwives and pupils certainly had their eyes opened to the appalling housing conditions experienced by their patients and their families. They also met ignorance and the unwillingness of doctors to inform their patients about birth control techniques available at that

time. Mrs G. Matthews, a pupil midwife at Bond Street in 1932, remembered a particularly harrowing case:

It was mostly night work ... and we had to walk everywhere and when we went to Caroline Street, which was my first case [the qualified midwife] said we must keep an eye on the husband because we shan't find it otherwise because there were no street lights, only here and there ... The children were disturbed because the mother had been so ill before we got there and they were all looking on in the door way ... My patient was very ill and it was a big brass bed and we had to put the bed on kitchen chairs because she was haemorrhaging so badly and nurse was giving her an injection which wasn't a lot in those days ... and we had to send for the doctor three times. Dad had to go on his bike ... Nevertheless she didn't die and the baby was beautiful. Eleventh baby and eleven and a quarter pounds ... I remember clearly Dr Porchas on Humberstone Road. He gave the father such a wiggling. He told him that she wasn't to have any more children. It was dangerous. This was before she had the eleventh. But he never told him what to do. (21)

Two years after the Hospital was extended, in 1933, Jeannie Gray, who had been matron almost since its inception, retired. Throughout those years she received constant praise, culminating in her being awarded an MBE in 1931 for her services to midwifery and the Hospital: 'It is impossible to express adequately the gratitude which the committee feels towards this valued Matron, who has for so long devoted herself so splendidly to the cause of the Hospital'. (22)

Although she received official recognition for her services to the Hospital, there are aspects of her kindness that do not appear in the official records. One example came in 1919 when a recently widowed woman, whose husband had died of war wounds, was admitted to the Hospital suffering from pneumonia and pleurisy, resulting in a premature birth. Too weak to return to agricultural work, Matron Gray offered her a maid's job, and mother and daughter lived in the Hospital for the next six years. The matron and Sister Heggs were the baby's godmothers giving her the name Dorothy. Dr Lilley was her godfather giving her the name Avis and her mother named her Joyce. Joyce's memories of Dr Lilley are of a kind and caring person: 'Whenever he came into the Hospital I seemed to sense he was there ... I'd come down and through the kitchen and go and sit in Matron's room ... he used to use quill pens ... and I always had to have my foot tickled with the feather and he used to get the quill pen and rub under my foot and then take me back to bed'. (23)



The staff of Bond Street Maternity Hospital in 1920. Matron Jeannie Gray is seated in the centre with Mrs Parker (a maid at the Hospital) and her baby, Joyce, next to her. The names of the other staff are uncertain. Front row, extreme right, Sister Else (the district midwife employed by the Hospital). Back row, extreme left, Nurse Worthington, next to her is Nurse Hoskins and on the extreme right is Sister Willet. (The author's collection.)

The matron who replaced Jeannie Gray, within hours of her leaving, was Miss M. Bennett Johns who came from the Haig Memorial Hospital, Hawick. Like all 'new brooms' she swept away the old and brought in new systems, which Dr Lilley recorded in his 1935/36 report: 'As was to be expected, the new Matron has made sweeping changes and, ably backed up by the Committee, the whole Hospital has been reorganised ... and all-round efficiency has been increased as a result'. (24)

Just like at the end of the 1920s, a financial crisis arose again at the end of the 1930s, caused largely by a decline in subscriptions, donations and legacies: 'Several old friends of the Hospital, who for many years gave their time and money in aid of work which they considered of prime importance ... have passed away'. (25)



The senior nursing staff of Bond Street Maternity Hospital in the early 1950s. Matron Violet Sim is in the centre, wearing a dark dress, and Sister Margaret Noble, who was in charge of the Special Care Baby Unit, is on the far right. The names of the other staff are unknown. (The author's collection.)

Fearing closure, the Hospital Committee approached the Local Authority with a view to them taking it over. They were keen to do so, not wanting to lose forty-five maternity beds, but the cost proved prohibitive, as under the rules laid down by the Charity Commission they would have to purchase the land and buildings. The only authority allowed to take over the Hospital as a going concern, was another voluntary hospital. Consequently, the Leicester Royal Infirmary was approached and they agreed to, on condition that there was a financial contribution from the City and County Councils. The official takeover took place on 1st April 1940 with Violet Sim being made sister-in-charge with responsibility to the Matron of the Infirmary, Mildred Hughes, followed by Clara Bell. This arrangement came to an end about 1950 when Violet Sim was appointed matron in her own right. Unfortunately, she died whilst in office, as reported to the Infirmary Board on 2nd July 1952. According to Patricia Law, who trained at Bond Street in 1956 and later became assistant matron 'We did not have a

great deal to do with the LRI and did not like to be called the Infirmary Maternity Hospital. We liked to be called Bond Street – this was our little domain'. (26)

Although there had been an extension to the Hospital in 1933, the ante-natal clinic still remained in the same place in rather cramped conditions when Elsie Aldwinkle became clinic sister in 1946. Ante-natal care had progressed to a degree, but the procedures carried out would be seen as very rudimentary today:

Ante-natal care was very simple ... We tested urine as a routine and we weighed patients as a routine. A physical exam was routine, but a blood test was only done if necessary. Urine was tested for sugar and albumen ... You had a Bunsen burner and you put the urine in a test tube and dropped some chemicals in and then you had to hold the test tube over the Bunsen burner. It spluttered terribly. It was very long winded and took about seven minutes. Very time consuming and frightening when it spluttered. (27)

By the 1940s the accommodation for nurses had not improved a great deal. The cubicles were still in existence, and according to Staff Nurse Marie Philip, they were called 'horse boxes'. (28) In 1942, when accommodation for the nurses became critical, the vicar of All Saints Church offered accommodation for some nurses at the vicarage. Margaret Bramley, a pupil midwife at this time, experienced sleeping there: 'When we were on night duty we slept in the vicarage of All Saints Church. There was a bachelor vicar there and when we went there he would carry our case up to the first floor ... Of course the drawback was when it was bell ringing practice, or Sunday, you just could not sleep'. (29) Unfortunately, when the vicar died in 1945, the arrangement ceased and the vicarage was put up for sale. The situation was resolved in 1948 when the Infirmary Management Board bought the property to use as a permanent nurses home.

Patient overcrowding continued to be a problem in the 1940s, particularly after the introduction of the National Health Service in 1948, as remembered by Stanley Tipton, who succeeded Mr F. A. Alexander as secretary of Bond Street:

With nationalisation everyone wanted beds and we couldn't cope with the demand ... The health visitors had to interview applicants to see what home conditions were like and whether home confinements could take place. One of the priorities was medical grounds ... and I think it was the first child, if the patient was over thirty... Also I think it was after five births ... a hospital confinement then qualified ... I really think two things were responsible. One was a baby boom and it was also free. (30)



Bond Street Maternity Hospital in the 1950s. The Hospital corner building was the ante-natal clinic, which had previously been the Leicester and Leicestershire Provident Dispensary. Adjacent to it are the Hospital cottages and at the other end is the 1933 extension and part of what had previously been the John E. Faire Hospital. (The author's collection.)

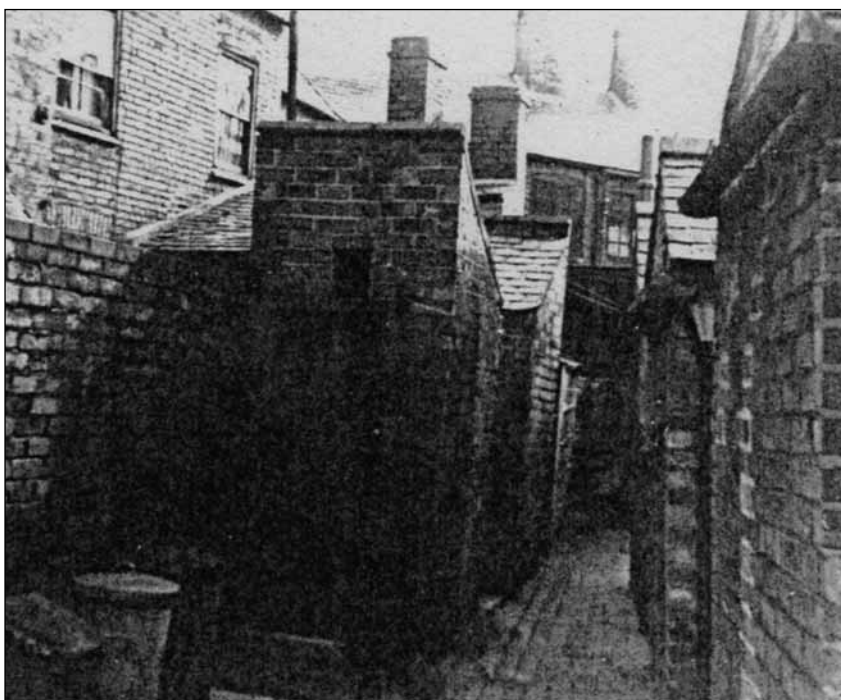
Consequently, it was again realised that further expansion was necessary but this did not happen until 9th October 1957 when the John Faire Hospital, in Countess Street, was taken over and joined to Bond Street by a connecting corridor. The Faire Hospital, opened by the Provident Dispensary, had been closed with the introduction of the National Health Service. Elsie Aldwinkle remembered the opening day of the extension for an ironic reason 'We had a celebration when the new wing was opened and on that very day, they began to talk about a new hospital, which was years ahead'. (31) The day following the opening, Gertrud Traub, who had been appointed matron after the death of Violet Sim, wrote in her scrapbook: 'October 10th Anti-Climax – no sterilizer boiling, humidifier not working, the fan out of action, pipes leaking, plugs not pulling, terrazzo floors cleaned by machine – clouds of dust raised, equipment missing, list could be continued ad infinitum'. (32)

The extension was one of many new innovations in the 1950s. The beginning of the decade saw the introduction of a breast milk bank that not only served the Hospital, but also poorly and premature babies in the city, county and elsewhere. Mary Snee, a telephonist / administrator who joined the Hospital in 1954, remembered the importance of it: 'There were people who were employed to sterilize and bottle it ... It was very special, other hospitals would ring up and beg, borrow and steal breast milk for prem babies, or babies who were allergic to

ordinary milk. The milk kitchen was a hive of activity'. (33) Patricia Law also recalled how well the service was used: 'We had a milk round and an ambulance would come and collect the milk that was going out and go to the homes of Mums ... Occasionally you would tootle off to London Road Station with [the milk], in dry ice, and it would go off to Great Ormond Street, or Birmingham. Kirby and West had nothing on Bond Street'. (34) Increasing transport problems and a movement towards formula feeding brought the outdoor service to an end in 1963.

Two other important innovations were Mothercraft classes, which began in 1953, and on 17th January 1956 classes for fathers were introduced, with the first childbirth film being shown later in the year. However, it was not until 1961 that husbands were allowed to be present at a birth, and only then if they had attended all of the classes. It would probably not have happened then had it not been for an article in the *British Medical Journal*, by Dr H. B. Kidd, the medical superintendent and consultant psychiatrist of the Towers Hospital and chairperson of the Leicester and Leicestershire Branch of the Association for The Improvement of the Maternity Services:

If ... a mother wishes her husband to be present at the birth of their child because it is his as well as hers, this wish should be granted gladly. To refuse is cruel and may cause considerable psychological suffering. [He also believed] A mother should only be confined in hospital if it is absolutely necessary for valid social or obstetric reasons ... a mother who has her baby at home is in a much better psychological climate. (35)



The Bond Street Maternity Hospital backyards in the late 1950s. This photograph appears in Matron Gertrud Traub's Scrapbook, Leicester Royal Infirmary Archive.



Bond Street Maternity Hospital in the early 1960s. This shows the 1933 extension and what had previously been the John E. Faire Hospital. (The author's collection.)

This was a very different attitude to that prevailing at the Hospital in the 1930s when 'Husbands were banished. They were never even thought of.' (36) This was still the case in the 1950s and afterwards 'Husbands were not allowed to go into labour ward. They could leave the case at the desk and ring up in x number of hours to find out [if the baby had been born]'. (37)

The 1960s brought with it a raft of challenges for Matron Traub and her staff, although one major structural problem that had caused a great deal of inconvenience since the inception of the Hospital was finally solved. Because part of the Hospital was situated in a row of old cottages, floors were at different levels and this made life very difficult:

If you needed to take Mum to ward two from labour ward we had a very old fashioned wheelchair which had enormous wooden wheels ... So you had to say to Mum now don't worry because this was a terrific slope down. So you put your foot on the back of the wheelchair and went straight down on a wing and a prayer ... The first half of ward two we kept for newly delivered Mums. When they were up, after a few days ... you transferred them to the second half of the ward, which you went down three steps, along a bit, and then up three steps ... So that was known as you had transferred Mrs Bloggs over 'Jordan' ... You hoped you didn't have to do swabbings over 'Jordan' because getting trolleys over there was not terribly easy. (38)

Even though one problem was solved, there were many more to face. Early in the decade the bitterly cold winter of 1962/3 wreaked havoc with the Hospital: 'Arctic winter. Low gas pressure – nearly without dinner one day. Cottages, cold and grim. Electricity failure. Hospital in the dark and six incubators getting cold. Pipe bursts in the cottages and the vicarage [the nurses' home]. Just when it was coldest the roof was 'done''. (39) There was also the continuing problem of vermin to deal with. Cockroaches were ever present in the staff changing rooms, and mice were a constant problem in the kitchen which was in the cellar. Equipment in some areas of the Hospital was also inadequate and slow to be replaced, as was the case in 1960 'At long last sterilizer installed in Ward 1 – fish kettle to the Museum'. (40)

Patient overcrowding had not gone away either, despite the John Faire Hospital becoming part of Bond Street. St Mary's ward which had opened at the Infirmary in the mid 1930s to take abnormal maternity cases, closed on 18th March 1960, putting further pressure on beds and resulted in the introduction of early discharges. Under such pressure, Christmas 1964 saw the formation of a planning committee for a new purpose-built maternity hospital some fifty years after it had been first proposed in 1914: 'Structurally ... [this is] in no sense a hospital [and that] efforts are being made to

raise a fund to purchase the freehold, and should they prove successful we presume that in due course plans will be invited, and a modern up-to-date hospital will eventually be built'. (41)

Mr Rupert (Ralph) Lodge, who had replaced Mr Thomas Clare as the consultant obstetrician and gynaecologist, explained his involvement with the planning for a new hospital 'The pressure [to build a new hospital] came from people like myself. I was on the special committee of the Regional Hospital Board and spent hours and hours with them'. (42)

However, despite poor conditions and over-worked staff, there was apparently a good working atmosphere and team spirit: 'It was a family hospital, rather lovely. The cooking was done downstairs in the kitchens and everybody knew everybody's favourite dish. If you were working late and you liked sausages, then someone saved you the sausages. It was really a lovely atmosphere. Very hard work and primitive working conditions, but there was team spirit.' (43)

Matron Traub seems to have generated this sense of team spirit: 'She ruled with an iron rod, but loving care ... Everyone respected her from the top to the bottom. She earned respect, she didn't command it ... Your job was as vital to the running of the Hospital as the matron's job. You were a cog in a great big wheel and if you didn't make that wheel go round then everything stopped'. (44) Patricia Law

remembered Matron Traub in a similar way: 'She set a very high standard and she wouldn't really expect you to do anything that she wouldn't. For example: one night we were so busy ... this must have been about 2 o'clock in the morning and we suddenly realised that there was someone in the sluice. Miss Traub had realised how busy we were and had got up ... and she was cleaning the instruments'. (45)

Team spirit and hard work was probably the glue that kept the Hospital functioning while planning discussions for the new hospital dawdled on. The need for a new hospital had been stated in the 1945 Ministry of Health Survey Report, but it was not until the summer of 1957 that the Sheffield Regional Hospital Board agreed that a purpose built hospital should be built on land adjoining the Infirmary at the junction of New Bridge Street and Jarrom Street. However, it was 1965 before the Infirmary Management Board finally succeeded in persuading the Regional Board of the desperate situation and that a new hospital was urgently needed. It was also team spirit that helped the staff to weather a storm that was brewing. A statement written in Matron Traub's scrapbook in 1966, described what happened:

Suddenly the storm broke! And of all the unexpected people it was Mr Elliott who stepped into the limelight and dragged Bond Street into it, though unintentional, his letter was not meant for the press. Our first reactions – horror and depression! How can any patient ever come to Bond Street again with confidence? Why should any nurse wish to train here and domestic wish to work here? But the patients came to our rescue, spoke up for us and what could have been a disaster became a moral victory! (46)

The statement refers to a letter sent by Mr Thomas Elliott, consultant obstetrician at Bond Street, to the Minister of Health, Mr Kenneth Robinson, with copies to eight MPs for the city and county. The letter described the appalling conditions and progressive dilapidation of Bond Street and that a proposed delay in building the new maternity hospital would be criminal. On 3rd February 1966, the contents of the leaked letter appeared in a damning article in the *Leicester Mercury*. It warned its readers that its exposure revealed '... a state of Dickensian neglect that makes frightful viewing and reading. (47) It then went on to describe some of the conditions and stated that the Hospital was working beyond the limits of safety:

... a maternity hospital has been developed with a sanitary system, for our present needs, so inadequate that not infrequently drains overflow; with corridors so narrow and so uneven that two people cannot, in comfort, pass shoulder to shoulder, where rubbish collection, rubbish disposal and incineration stand side by side with the main sterilising plant of the Hospital ... where nursing staff live in damp and cramped quarters and where domestic staff sleep in

circumstances which in this day and age, are frankly appalling.(48)

Pauline Payne who went to work as a secretary at Bond Street three weeks before they moved to the new hospital, remembered the state of dilapidation. 'Everything was decrepit and the typewriters were antiquated. (49)

In trying to boost the morale of Matron Traub and her staff, the editor of the *Leicester Mercury*, J. Fortune, wrote her a letter, enclosing a letter they had received at the newspaper:

... I think it will cheer you up. We have had many more letters than we can hope to publish which have praised the Matron and the staff of Bond Street to the skies and this particular letter is no more typical of a score, or two of letters that have been received. (50)

Extract from the enclosed letter

... all Bond Street lacks in comfort and amenities is replaced by the kindness of Matron, the doctors, nurses and domestic staff. They work wonders under abominable conditions, and were it not for their cheerfulness the morale of the patients would be much lower. Grateful Mum. (51)



Miss E. E. Taylor (chairperson of the Maternity Hospital Committee) presenting Matron Gertrud Traub (right) with a typewriter on her retirement in September 1968. Mr Thomas Elliott, consulting obstetrician and gynaecologist, is looking on. (The author's collection.)

Enraged and frustrated by delays with the Regional Board and the Ministry's proposed delay in putting back the building start date to 1968, Mr Elliott broke with tradition and complained directly to the Minister of Health and local MPs, instead of leaving it to the No. 1 Hospital Management Committee of the Infirmary. Despite Ministry officials visiting Bond Street and pleas in the House of Commons from MPs, Mr John Farr and Sir Barnett Janner for an earlier starting date, they were turned down and told that building would not begin until the end of 1967, or early 1968. The foundation stone was eventually laid on 17th October 1968, but there was another storm to weather in January 1970, when it was revealed that there was a deficit of £48,000 needed for furnishing the Hospital. It was a further year before the long awaited new hospital opened its doors for business at 8 am, Monday 1st February 1971.

From the opening of Bond Street Hospital, its Council/Committee faced a continuous uphill financial struggle until it was taken over by the Leicester Royal Infirmary. They were never able to achieve the purpose built hospital they had hoped for in 1914. Indeed, even after the introduction of the National Health Service it was another 23 years before the Sheffield Regional Hospital Board and the various governments saw fit to lay aside money for a new build, and even then it was not achieved without a fight. Evidently they did not hold the same values as the Hospital Council had held as far back as 1916, when they made the following statement:

Maternity and Child Welfare are much talked of in these days, surely an Institution such as the Maternity Hospital lies at the foundation of any good that can be done for these causes, and should be adequately supported by those who have them at heart. (52)

Successful training, low maternal mortality rates and innovations coupled with a dedicated and long-serving staff, hard work and team spirit seem to have compensated for appalling conditions and an inappropriate location for a hospital. Not only were the staff dedicated, but so too was the Hospital Council/Committee, its founding members and the wider community of Leicester who gave their time, subscribed, donated money and gave multiple gifts. One such gift taken to the new hospital was the clock given by John E. Faire in memory of Agnes Fielding Johnson, in 1918. Sadly it was stolen and most probably the knowledge that Agnes was a founding member of Leicester's first maternity hospital disappeared with it:

At the new hospital [the clock] used to sit in the Senior Nursing Officer's office. We didn't notice when it went missing, but we suddenly realised it wasn't there. The big grandfather clock in the foyer of the Infirmary was stolen, but they got that back. But the other one was a carriage clock and easily transportable. (53)

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