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Chapter 11

THE HOSPITAL COMMUNITY

A new institution often presents opportunities of various sorts which are less apparent in those that are established and settled in their ways. The completion of what was described at the time as Australia's most modern hospital coincided with a period of general optimism and expansion throughout the country, and this was reflected in the development and expansion of The Queen Elizabeth Hospital. As the general hospital opened and staff was appointed a spirit of enthusiastic commitment was rapidly generated. There were at least two sides to this. Among some members of the medical profession The Queen Elizabeth Hospital out at Woodville was spoken of as 'the bush', and the young honoraries who went to the bush were, in these terms, regarded as having impaired their hopes of achieving top status. Those who had gone to the bush were therefore the more determined to make a success of the hospital with which they had thrown in their lot. On the more positive side, most of the new staff members were relatively young and were reaching the peak of their powers, and the best years of their lives were devoted to the development of the hospital. Many were contemporaries, or nearly contemporaries, during their university and Royal Adelaide Hospital days, and they carried their camaraderie into the new hospital. The architecture and size of The Queen Elizabeth Hospital helped to spread it. The buildings were compact and it was a relatively small institution; the small staff was not dispersed over a sprawling campus, and it quickly formed friendships which spread across units and departments.

Possibly foremost amongst the factors responsible for the distinctive ethos of the new hospital was the sense of freedom from the traditions of older institutions and the opportunity for the staff to establish its own traditions. An honorary staff member of those days recalled that the new hospital was determined to ruffle the skirts of the matriarchal and perhaps complacent Royal Adelaide Hospital from which many of the staff had graduated. There was a widespread agreement that the more rigid hierarchies in vogue elsewhere would not be imported into the new hospital. Consequently duties were equally shared within units. The most senior, as well as the more junior, staff attended outpatients as well as inpatients, and this not only reflected an egalitarian cohesion amongst the staff but also benefited the patients. The surgeon, for example, who first saw the patient in the outpatient department attended the patient through surgery to the post-operative stages of treatment, and a

continuity of treatment was ensured. The younger members of the medical staff who had recently been overseas had seen such a system working elsewhere and believed it to be a model worth adopting. Free consultation between clinics was established instead of the more formalised system elsewhere in the state at the time, and this gave rise to some of the interesting cooperative initiatives which developed at the hospital. To one physician who was on the staff for many years the cooperation between staff was epitomised in the spectacle of the professor of medicine and the hospital's two senior physicians in consultation around the bed of one patient, an event he regarded as most unlikely in other hospitals in the state at the time. One of the former medical students of early days remembered the hospital as a place where the students could actually approach honorary staff members and talk to them. The determination to make it the best hospital in the state was apparent also in other ways. Entitlement to beds in the hospital was more equally shared between the more senior and more junior staff, a novelty at the time. A young and vigorous staff had reason to believe that there was ample opportunity to make its own contribution and assume a responsible role in the hospital.

Those opportunities were not confined to professional matters. The opening of the general hospital brought numbers of additional staff with a variety of backgrounds, interests and talents. The hospital's potential for a full social life was consequently augmented, and in October 1959 a staff social club was formed. The first chairman of the club was a physiotherapist, Miss C.M.R. Southam, who died on 6 September 1960 at the early age of 27 after a tragic illness. Her work was carried on by others, and the social club flourished and provided a varied diet of social recreation to suit all tastes.

In its first year the social club diversified its offerings to cater for the interests of the members of the time. These included a bush walking club, a music club, a geographical society and a dramatic club, and the more vigorous women members found some outlet for their energy in a women's basketball team. As interest in one or other of these clubs waned they went into recess or disappeared, and others took their place. By 1962 a photography club and a table tennis club were going strong, and other pastimes were organised. April 1961 saw the first of several car trials and barbecues, in December 1962 the members forsook dry land in favour of a showboat river cruise, and in March 1963 the first hospital picnic was held. Balls, cabarets and other social functions made up the complement. Further, in its first year the social club commenced the practice of holding a Christmas party in the nurses' home and on the hospital lawns. To this was soon added an afternoon Christmas party for the children of staff members. These were often colourful events which occasionally caught the attention of the press as, for example, in December 1960 when Father Christmas arrived on a fire engine, rather than on the traditional sleigh, bringing a bag of presents.

Another aspect of the activities of the staff social club also deservedly drew press comment. Within the club's first year it became the practice to present monthly screenings in the hospital lecture theatre of recent feature films. The Reverend Frank Hansen, the Methodist chaplain, arranged the programme and publicity, and even occasionally acted as projectionist. Almost immediately members of the staff social club saw the film night not only as entertainment for the club but also as a service to the patients. Men from the various sections of the

hospital staff volunteered to wheel patients from and to their wards for a sociable evening at the pictures, and the families of some of the patients joined the audience, where they were treated free of charge to a highly professional entertainment. As at the cinema, supporting films made up the first half, with an interval during which refreshments were taken in the foyer, followed by the feature film. The journalist Helen Caterer noted the sociably informal atmosphere at such occasions. No barriers were apparent between the porter and the doctor serving lemonade to the family of a patient with a broken leg; and in various ways, as the administrator reported, the scheme brought the personal touch into the hospital organisation.¹ For over ten years, until television became prevalent and affected the pattern of public entertainment, the monthly film evenings played their part in demonstrating the talent for friendship for which the hospital was known.

The talents of the staff were also demonstrated in other ways. For Christmas 1959, his first in Australia, the Administrator Mr Treagus suggested to the Reverend Frank Hansen that the traditional English service of lessons and carols be performed. Mr Hansen therefore arranged the service, which became part of the tradition of The Queen Elizabeth Hospital. Volunteers from the various sections of the staff formed a hospital choir, of which the chief pharmacist, Mr P.L. Jeffs, was choirmaster and the hospital secretary, Mr F.J. Rowett, organist. Several programmes of Christmas carols were recorded in the hospital chapel and broadcast to patients for twenty minutes each morning of Christmas week. A large Christmas tree was set up in the hospital quadrangle, and shortly before Christmas an evening service of carols and lessons was held in the chapel, members of the hospital staff reading the lessons to a capacity congregation. The service was followed by a procession around the quadrangle, colourfully led by the hospital sisters in their red cloaks, and by the singing of carols under the light of lamps held aloft on improvised holders. During Easter week in 1961 the activities of the hospital staff choir were extended to provide a service similar to that held at Christmas; members of the staff read appropriate lessons and the choir performed a suitable cantata. When Mr Jeffs left the hospital in the late 1960s the conductor's baton was wielded by the Anglican chaplain, Father Stanley Judge, who performed this office to good effect until he retired in 1983. On one occasion, Mr Hansen wryly recalled, the eccentricities of modern electronics produced the unexpected. For the first Christmas service after the completion of the north wing extra speakers were installed to relay the service around the new building. While the service was in progress in the chapel the additional speakers fed back into the public address system in the chapel a description of the trotting in Sydney, which was broadcast by a local radio station. The problem was rectified, and the annual Christmas service continues to be observed without repetition of such mishaps.

Patients who have the misfortune to be hospitalised over Christmas have also shared in the festive spirit in other ways. Children from nearby schools occasionally visited the hospital shortly before Christmas to sing carols, and members of the senior staff visited the wards. The hospital kitchen has played the traditional role in the festive season. The menu has included turkey, and

¹ *The Sunday Mail*, 14 October 1961, p. 32.



The Hospital Staff Choir at practice. Mr P.L. Jeffs at left, Mr F.J. Rowett at the organ.

Christmas pudding has been in ample evidence. In 1964 the press reported that the head chef, Mr Schild, produced a quarter of a ton of old style Christmas pudding which was steamed in basins for eight hours. Some twenty or thirty Christmas cakes were also prepared in the hospital kitchen for afternoon tea. The front foyer of the hospital was graced by a Christmas crib, a practice which started with the loan of a structure and figures by Mr Jack Ellis, who was a prominent member of the Woodville Rotary Club. The permanent figures were, at the request of the Anglican chaplain, presented by the Friends of The Queen Elizabeth Hospital. The crib was erected by Father Stan Judge who, attired in overalls liberally spattered with paint, avoided union demarcation disputes by claiming membership in 'the heavenly workers union'.

August 1966 marked the beginning of another annual event in the life of the hospital which became a further important factor in strengthening staff relationships, bringing together members of all sectors of the hospital staff, and contributing to the distinctive ethos of the hospital. For two evenings in August 1966 some staff temporarily forsook the hospital precincts for theatre of a different kind. People from every section of the hospital came together to stage their first hospital revue in the Arts Theatre in Angas Street. The idea was born during a conversation between Father Stan Judge and three of the resident medical officers concerning ways in which the community spirit in the hospital might be fostered and developed. One of the three, Dr Lindsay Barratt, was an

accomplished musician, and the outcome of the discussion was the revue 'Skullduggery', a combination of skits on various aspects of current hospital and city affairs. The operation was highly successful, and the proceeds were donated to the Friends of The Queen Elizabeth Hospital. Once the staff had savoured success and the smell of greasepaint there was no looking back. Father Stan became the business manager of a highly competent and professional society which performed annually from that time. The title for the revue in 1967 was suggested by a spate of official notices on the hospital notice boards from the administrator; and so 'It has come to our notice . . .' was staged for three nights and, as in subsequent years, the profits were donated to the Friends. In 1969, when the revue society played 'In the Q', the season was extended to four nights. Topicality was usually a feature of the productions. In 1970 'Strikes Us' made humorous comment on industrial unrest, and 'Medibang' in 1975 had obvious reference to the government health scheme. 'Decadence' in 1976 was not a critical survey of community morals but an allusion to the tenth anniversary of the revue society. In 1978, the society's last show under the patronage of the Administrator, Mr Treagus, the press described The Queen Elizabeth Revue Society as the oldest hospital revue society in Australia. It did a great deal for the hospital and involved many more than those who appeared before the footlights, and the friendships it engendered amongst staff members was kept alive throughout the year by the social events it organised in preparation for the following season. It was a matter for great regret when changing circumstances brought the annual revue to an end.

Since the hospital staff has occasionally included notable sporting personalities it is not surprising that their less talented colleagues should have sought to emulate them on the playing fields. On 3 September 1961, for example, what was described as an historic event occurred on the university oval. At the instigation of The Queen Elizabeth Hospital a team from the hospital met one from the Royal Adelaide Hospital to play rugby. The match was refereed by a dermatologist who was a Scottish international; but from comments in the hospital paper it may be surmised that, not only was it the first inter-hospital rugby match played in South Australia, but also that it was the first time that rugby union rules suffered such stress. Football of another sort was played at Reynella oval on 4 August 1963, when 22 women staff played 18 male staff and the women triumphed with some positive support from the umpire. The football field has been graced by more serious inter-hospital matches from time to time. With the advent of summer staff high spirits found an outlet on the cricket field. What was to become an annual event made its debut on Sunday 23 March 1975. Umpired by the administrator and his deputy the hospital renal unit played the gastroenterology unit. Billed as 'Fluids versus Solids' the contest was fought for a golden urinal trophy rather than for the Ashes. Other sporting events also sometimes avoided the traditional sense of occasion associated with their first class counterparts.

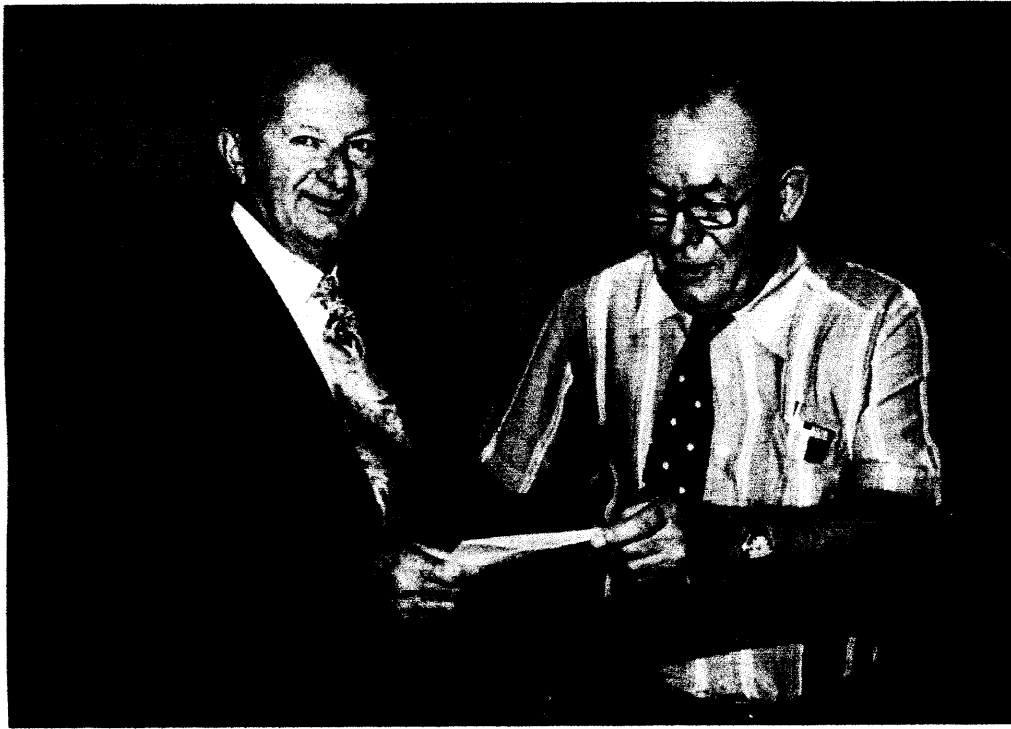
The more customary round of social fixtures provided adequate occasion for the formality sometimes missing from the sporting arena. The annual medical staff society dinner was one such function. It made its first appearance on 23 November 1960 at the Highway Inn, and varied its venue in following years. Another such function was the annual party given by the Board of Management for members of the honorary, later visiting, staff and for heads of university and government departments which had been associated with the hospital during the

year. For some years the Queen Elizabeth and Royal Adelaide hospitals combined for this function, since the boards of both hospitals had identical membership, but on 19 December 1960 The Queen Elizabeth Hospital for the first time held its own function in the medical staff refectory.

The hospital's provision for the total needs of those associated with it has been effected in other basic appointments and facilities. The hospital planners included a chapel at the southern end of the ground floor of the new section of the nurses' home, and this has proved to be a most suitable venue for many of the activities of the chaplains appointed by their respective churches to the hospital. A steel grille at the entrance to the chapel, with a pattern of crosses worked into it, set an appropriate tone, and the interior of the chapel was tastefully designed with subdued lighting and polished panels of South Australian timber. The chapel was to be for the use of all denominations and, at the suggestion of the lay superintendent, Father Stanley Judge and Monsignor Russell consulted to devise modifications to the altar which would permit its adaptation for use by the participating churches. The chapel was officially opened on Sunday 6 September 1959. A late afternoon combined Church of England, Methodist and Presbyterian service was held, conducted by Father Stanley Judge, the Reverend F.V. Hansen and the Reverend W.G. Cowley. The Administrator read the lesson and the Reader in Medicine, Dr B.S. Hetzel, gave the address. The combined service was followed in the evening by Mass celebrated by the Roman Catholic Coadjutor Bishop of Adelaide, Dr J.W. Gleeson. At a short service conducted by the Church of England, Free Church and Roman Catholic chaplains on 17 April 1963 a new electronic organ was dedicated, consecrated and blessed.

The appointment and upkeep of the hospital chaplains was the responsibility of the churches, but the hospital gave its full support and important pioneering developments were the result. From early days the churches appointed chaplains to visit their parishioners in the hospital on a part time basis, but Dr Hetzel and Mr Treagus had more comprehensive designs. Dr Hetzel, on his return from overseas, had been a leading figure in forming the Adelaide medico-clerical group to bring together interested doctors and clergy in ways already developed in Melbourne, where the appointment of full time trained chaplains had ensued. Dr Hetzel's view that, to treat the entire person, the hospital needed a full time chaplain as part of the healing team was an innovation in Adelaide, and it had the complete support of the hospital administrator. The Queen Elizabeth Hospital was seen as the obvious place in which to initiate appointments of this nature. The chaplain could become involved in the growth of the new integrated hospital from the outset rather than being obliged to go through the more difficult process of integrating himself into an older and established hospital elsewhere. The Methodist Home Mission Department was prepared to consider such an appointment, the Reverend Frank Hansen had been a member of the Adelaide medico-clerical group since 1956 and a part time chaplain to the hospital from about that time, and consequently on 16 October 1959 the Methodist Conference appointed Mr Hansen as the first full time chaplain to a South Australian hospital. The appointment was effective from 1 January 1960.²

² Vide Hansen, Frank V. *Christian Presence in Medical Care*, Uniting Church Historical Society, 1991



The Reverend Frank Hansen Farewelled by Father Stanley Judge.

Mr Hansen's practical and undogmatic presence made him a most effective member of the hospital healing team, and his time was fully occupied with the personal and social problems characteristic of the new housing developments which the hospital served. He was aware that the chaplain's function needed to operate from a practical basis and so, for example, he persuaded the administrator to order overhead mirrors to be fitted above the beds of teenage boys who had sustained injuries which kept them immobilised on their backs. The patients in this way could gain respite from their tedium by watching the nurses moving about in the corridors. Of far greater concern was the high incidence of attempted suicide. Dr Hetzel, Mr Hansen and Mr Treagus were actively involved in the early 1960s in the investigation of this problem which was partly responsible for the establishment of the Life Line counselling service associated with what was then the Central Methodist Mission.

The full time Methodist chaplain was not, of course, the official chaplain of The Queen Elizabeth Hospital. Hospital policy, the board stated, was that all churches were welcome to appoint either full time or part time chaplains in the same capacity as those already appointed. In keeping with this policy the Anglican Church in due course followed the appointment of the first Methodist chaplain by installing at The Queen Elizabeth Hospital the first full time Anglican chaplain to a South Australian hospital.

Originally from County Mayo in Ireland, Father Stanley Judge came from Western Australia in 1958 to St Margaret's Church of England in Woodville. On 2

March 1959 the hospital board received advice from the Bishop of Adelaide that Mr Judge had been appointed part time chaplain to the Church of England staff and patients, and at a service in the hospital chapel on 3 April 1959 he received a licence from the bishop authorising him to exercise his ministry there. This he did most effectively on a part time basis for five years. During this period, however, the Anglican Church in South Australia followed the direction it had taken elsewhere in the matter of chaplaincies; and on 17 December 1963 the Bishop of Adelaide, the Right Reverend Dr T.T. Reed, wrote to the hospital advising that the Reverend Stanley Judge had been appointed full time Anglican chaplain to the hospital and was to be commissioned at the hospital chapel on 1 April 1964. The appointment proved an unqualified success, and Father Stanley Judge remained in office until his retirement at the age of 69 on 25 February 1983, a period in all of 24 years.

A pattern for the chaplaincy was established at The Queen Elizabeth Hospital which has become influential in other states. The administrator integrated the chaplaincy into the services provided by the hospital, and chaired regular chaplains' meetings designed to maintain and develop this aspect of hospital life. The chaplains received unreserved support from the hospital administration and staff in various ways. In return for their undertaking to observe the normal professional requirements of confidentiality the chaplains were given access to patients' case notes, to which they were free to add their own observations as they saw fit. Access to these notes, the administrator and medical staff believed, was necessary if the chaplains were to share effectively in the healing work of the hospital. The chaplains similarly participated in staff conferences about the condition of the patients, and firm professional ties were established between the chaplains and other hospital staff. In the late 1960s Father Stan Judge visited hospitals in Victoria, the Australian Capital Territory and New South Wales to assess hospital chaplaincy interstate in comparison with developments at The Queen Elizabeth Hospital. He found that at that time the standard of professional communication established at The Queen Elizabeth Hospital far surpassed anything he saw at the institutions he visited.

Chaplaincy appointments to The Queen Elizabeth Hospital have increased. On 1 May 1971 Father Julian May was appointed full time Roman Catholic chaplain to the hospital, and in due course Father Peter de Vries took his place. Thereafter for a time Father Marco Battaglia headed the Catholic chaplaincy team with assistant chaplains Sr Bernadette Roche and Mrs Bizz Jelly, Father Marco and Sister Bernadette leaving at the end of 1992. Father Ron Herde succeeded as the Catholic chaplain. When the Reverend Frank Hansen retired on 31 December 1978 his place as Uniting Church chaplain was taken by the Reverend Dean Brook, who retired in 1989 after some eleven years. The Reverend Richard Miller became the new Uniting Church chaplain from the beginning of 1991, and when he retired in 1994 the Reverend Garth Nelson filled the position with the help of a team of visitors. Father Stan Judge retired on 25 February 1983 and his place was taken by the Reverend Peter Anson until he resigned in 1989 to take up another appointment and Brother Noel Allen became the Anglican Chaplain in March 1990.

A newspaper columnist found food for amused reflection in the two signs, one above the other, near the emergency entrance to the hospital and jointly

conveying the message 'Chaplain Way Out'.³ The chaplains may not be as trendy as the columnist facetiously suggested, but they have taken the religious dimension of life into the wards and total life of the hospital. As a social worker put it, their brief extends from maternity to eternity. Their task, as they understand it, ranges beyond the sacramental and theological essentials of Christianity to embrace the total needs and concerns of the hospital community. For some years, for example, Father Stan Judge was president of the hospital wine committee. The chaplains were involved in discussion and counselling concerning the ethical implications of the renal transplantation programme before it received wider acceptance. The social, marital and personal problems of patients are treated confidentially and sympathetically in the context of concern for the total health of those who come to the hospital for treatment and care.

The hospital chaplains have left their mark on the life of the hospital in numerous ways, and the hospital in turn has fully cooperated in the use and development of the role of the hospital chaplaincy. The Methodist — later Uniting Church — chaplain, for instance, organised Schools of Pastoral Care to give ministers and theological students a deeper understanding of the work of the modern hospital. These have been arranged at the hospital, with the consent and cooperation of the board and senior staff, some of whom have taken part in the lecture programme. These Schools of Pastoral Care, the Methodist church paper wrote in 1961, had become an accepted part of the teaching function of The Queen Elizabeth Hospital.⁴ The influence of the hospital chaplaincy even extended overseas. In 1966 the senior chaplain in charge of the Christian Medical Centre at Vellore, South India, spent some weeks working at the hospital.

As the hospital services became divisionalised the chaplains at The Queen Elizabeth Hospital formed themselves into a new Department of Pastoral Care. The first director was the Reverend Dean Brook; the deputy, Mrs Bizz Jelly, became director when Mr Brook left in 1989. Brother Noel Allen succeeded her as manager a year or two later. The department, comprising nearly twenty full-time or part-time chaplains representing the major denominations, devotes most of its time to patient care which includes pastoral care to all patients, sacramental ministry and counselling. It conducts weekly public worship services, the Carol Service at Christmas, Returned Nurses League Service and weddings. A Clinical Pastoral Education course was commenced in 1979 by the Reverend Dean Brook and, when he left, was continued by Mrs Bizz Jelly. The Queen Elizabeth Hospital remains the only hospital in South Australia to have such a programme, which is designed for ministers, theological students and lay people wishing to develop their pastoral skills, and in recent years some twenty students have been accredited for pastoral ministry under the programme.

The hospital community provides extra-medical care for its patients in yet another way. In the year that the general hospital opened provision for the paramedical care of patients was formalised by the appointment of social workers, or almoners as they were still called at the time. The hospital board decided on 28 July 1958 to recommend the creation of the posts of senior

³ *The Sunday Mail*, 8 April 1979, p. 176.

⁴ *The South Australian Methodist*, 8 September 1961, p. 1.

almoner and three other almoners, and later that year Miss Helen McGlaughlin was interviewed for the senior position. Miss McGlaughlin had worked at the Royal Adelaide Hospital and, in addition, had recently returned from valuable experience at two geriatric units in England which gave her intimate knowledge of the home care of even seriously disabled patients. Her appointment as senior almoner at The Queen Elizabeth Hospital was gazetted on 19 February 1959, and with it the subsequent Department of Social Work was born at The Queen Elizabeth Hospital. Further appointments followed to give the department a fuller staff complement.

In addition to the problems normally associated with the establishment of a new department Miss McGlaughlin met some that were peculiar to the hospital. One was the absence of funds similar to the Da Costa Samaritan Fund at the Royal Adelaide Hospital on which to draw. The work of the Friends of The Queen Elizabeth Hospital, to which reference is made elsewhere, helped to relieve this need, and Miss McGlaughlin was actively involved in the birth of this organisation. A further difficulty arose from the patterns of public transport operating in the metropolitan area. Bus routes radiated to and from the city, but they were not connected in the Woodville area by cross metropolitan routes. Many walking patients needing to attend the hospital for physiotherapy or outpatient treatment were therefore obliged to make the double trip in to town and then out again on the appropriate route. Negotiations between Miss McGlaughlin and the manager of St John Ambulance Association resulted in the commencement of the now normal practice of the St John service being available for the transport of walking patients in need of hospital care as well as of stretcher cases. St John drivers also assisted with the return of soiled linen to the hospital for the early domiciliary care service which the almoners department provided in association with the Friends and which preceded the official domiciliary care service which was later established for the region.

Miss McGlaughlin resigned at the end of 1960 to marry Mr C.R. Lawton and, although other less senior appointments were made, it was not until the beginning of 1963 that Miss Goodwin replaced her as head almoner. In the intervening period the department had languished for want of leadership, and Miss Goodwin took a firm hand to the restoration of its powers. When she resigned early in 1965 to return to England the hospital News Sheet observed that the department had been built up to become a virile and efficient part of the hospital. Her work was capably continued by Miss Elizabeth Wordie, who was appointed to the maternity section in March 1965 and became chief almoner on 28 November 1966.

Before Miss Wordie left early in 1971 a change in nomenclature more aptly reflected the professional nature of the role of the erstwhile almoners. Following practice overseas and elsewhere in Australia, in May 1969 almoners at The Queen Elizabeth Hospital became known as social workers and their department the Department of Social Work. The range of paramedical health services delivered by the department, and the nature of the work involved, at a large modern hospital such as The Queen Elizabeth Hospital extends far beyond the duties of the hospital almoner as they were understood in earlier times, although these have been by no means abandoned.

Miss Lorna Bull, Miss Wordie's successor, joined the hospital staff as chief social worker on 2 August 1971. Prior to her appointment she had been a social

worker at the Adelaide Children's Hospital and had then worked with the Commonwealth Department of Social Services in Adelaide. Her period in office at The Queen Elizabeth Hospital coincided with a marked growth in the size and operation of the department. From a staff complement of five or six it grew to fourteen staff members, with a chief social worker, a senior social worker and two assistant seniors. The two assistant seniors gave their service in special units at the hospital; one in the Sexual Assault Referral Centre and the other with the department of psychiatry where, with additional training, she and those who worked with her were primary therapists in the family therapy service. The work of the trained social workers is complemented in various ways by others who assist in accessing patients to social security benefits and other allowances, and by an accommodation officer who deals with the placement of patients in suitable nursing homes. The department was actively involved in developing the provision of accommodation for country patients at the Tenterden House complex and thereby considerably easing the lot of those who need to attend the hospital on an outpatient basis. The service of the department is greatly assisted by the close working relationship with the Friends organisation which has continued since its inception, and informal links are firmly established with the regional domiciliary care service. The department of social work is an important part of the service which the hospital delivers to the community within which it is placed.

When she officially opened the hospital in March 1958 Queen Elizabeth the Queen Mother said that perhaps the most important thing was that the staff had done everything possible to reduce the frightening and rather impersonal feeling of a large hospital. The atmosphere created in the hospital has been kept alive in some of the ways already mentioned. It has also been nurtured in another modest but effective way. To keep the staff informed about developments in the hospital the administrator in August 1960 published the first issue of the hospital News Sheet. From an unassuming seven-page production it grew within the first year to about twenty pages, and for many years it provided the staff with a wide range of information about the institution within which they worked, from personal and social items to serious descriptions of the hospital's medical and scientific work and its institutional and material growth. This little publication played its part in keeping alive a personal interest in the hospital during a time of expansion which could easily have dispelled the human touch.