

History of Highland Hospitals

Inverness Poorhouse (Muirfield Institution / Hilton Hospital) Old Edinburgh Road 1861



By the mid-1850s, Dunbar's Hospital was becoming increasingly unsatisfactory as a poorhouse and, in late 1858, the Inverness Parochial Board feued an 8-acre site at Muirfield on the southern outskirts of the town. A new Inverness Poorhouse was designed by James Matthews and

William Lawrieⁱ who were chosen over local architects Alexander Ross and George Rhind. In 1859, the tradesmen, who were mostly local, were selected as shown on the left. The date on the building (photograph above) is 1860 which presumably marks its physical completion since it was not occupied until the following year.

Trade	Firm	Cost
Mason	Cumming	£2,470
Carpenter	Duff	£2,097
Plasterer	Hogg (Montrose)	£333
Ironwork	Smith & Mackay	£103
Slater	Russell	£337
Plumber	Black	£333
Glazier	Macleod	£93
	Total	£5,766

ⁱ An Aberdeen firm. Lawrie ran the Inverness office - the main one after 1877.

History of Highland Hospitals



The 6 inch Ordnance Survey map (left) from 1870¹ shows the Poorhouse site with its grounds (outlined) lying to the south. The design was typical of the time and strongly influenced by the Board of Supervision in Edinburgh. At the

entrance was the separate gatehouse which contained porter's lodge and probationary wards with hot and cold baths which all new admissions had to endure. Here, new entrants' clothes were fumigated and stored and they were re-clad in Poorhouse clothes. The separate gatehouse can be seen clearly on the map above but it is now mostly demolished (photograph on page 1). Flanking the main entrance were the governor's quarters and committee room. The more infirm residents occupied the rest of the ground floor (males on the right and females on the left). The first floor housed the more robust residents including large day/work rooms and also a school room and dormitories for children. The attics were used as large wards. The main dining room was central at the rear of the main building and was also used as a chapel. Further back and parallel with the main block was a single storey block containing kitchens, stores, mortuary and confinement cell. Most of the building survives.

In 1861, a further £2,000 was spent on completing the building and out-houses and the whole cost was financed by a bank loan to be repaid over 30 years. The new Poorhouse opened on 21st November 1861 with 61 residentsⁱ who transferred from Dunbar's Hospital.² Dunbar's matron

ⁱ By December 1861, there were 12 men 30 women and 17 children. Initially, female residents dominated (around 60% at the 1871 and 1881 censuses) but this predominance later reduced. In 1903, 55% of the accommodation was female.

History of Highland Hospitals

did not transfer to the new Poorhouse and Mr and Mrs D MacFieⁱ were appointed governor and matron at a combined salary of £120 p. a. There was also a nurse and servant. The Poorhouse was administered by a committee to whom the governor reported every three months. Poorhouses have been described as being run like prisons and the governor had substantial authority over the residents whose lives were strictly controlled. Residents were allowed out of the Poorhouse only one day per month for a maximum of six hours but males and females could not go out on the same day. Mothers of illegitimate children and all women under 35 years old were not allowed out at all. Only after 1905 could husband and wife occupy the same apartment but this was subject to the discretion of the governor. Discipline was strictly enforced and the Poorhouse had male and female punishment cells which seem to have been regularly used. In 1903, the annual Board of Supervision inspection noted that the cells were dark, unventilated, had no seat or bed and would not be licensed for a criminal. The inspector doubted if the committee realised the severity of placing residents there - for up to 12 hours in winter in unheated conditions. The committee's response was to install a seat and assure the inspector that a bed was available if required.

Restrictions also applied to the staff. The governor and his wife each had 3 weeks annual leave but they could not go off together because one of them had to be in charge.³ As elsewhere, nurses' lives were strictly controlled. In 1860, there was little differentiation between the role of nurse and servant but, by the 1880s, there was a national drive to establish trained nurses in poorhouses. At first, the Poorhouse committee resisted but it had appointed one by 1889. Initially, a high turnover was blamed on the job being too hard and, in 1900, a domestic servant was employed to assist and hot water was brought closer to the sick wards. However, turnover was still quite high and it was difficult to fill posts. Nurses earned £30 per year with board and lodging and 21 days annual leave and, by January 1905, there were *Rules for Trained Nurses* which set a strict

ⁱ Married on 24/11/1861, 3 days after the Poorhouse opened.

History of Highland Hospitals

daily timetableⁱ (below). In 1903, there was still only one nurse and none at night and the annual inspection noted that, although there were only officially nine sick residents, there were actually 35 when infirm patients were included. The inspector could see no real distinction between the

Nurse's daily timetable 1905

Cup of tea	7.00am
On duty	7.00am - 8.45am
Breakfast	8.45am - 9.30am
On duty	9.30am - 12.45pm
Dinner	12.45pm - 1.30pm
On duty	1.30pm - 4.45pm
Tea	4.45pm - 5.15pm
On duty in ward	5.15pm - 8.30pm

apart from matron until 1926 and, by then, there were around 40 sick beds. The numbers of sick in the table opposite, therefore, underestimate the number of ill people in the Poorhouse. The spikes in numbers e.g. 1886 possibly represent fever outbreaks

two groups in nursing terms and recommended that the state nursing grant be stopped until there was more adequate nursing including appointing a night nurse. The latter happened in 1911 but there was still just one nurse on duty

The Parochial Board employed two medical officersⁱⁱ one of whom visited daily. They examined all new residents on arrival and attested to their fitness for work. New arrivals had their immediate medical needs met such as eradicating head lice and ensuring that they did not suffer from any infectious disease but it was not until 1904 that the smallpox vaccination of all new entrants was mandatory.ⁱⁱⁱ

ⁱ Infirmity nurses worked a similar pattern.

ⁱⁱ In December 1864, one of the medical officers, 'in the interest of science,' removed the head of a 4-year-old 'idiot child' who had died after living in the Poorhouse for about a year. The head was sent to his house apparently in collusion with a Depute Commissioner in Lunacy. Although the 1832 Anatomy Act allowed unclaimed bodies of the poor to be used for dissection, such action underlined the fear many had of the poor being used for medical experimentation and this kept medical students out of poorhouses for many years (Hamilton *The Healers*).

ⁱⁱⁱ Vaccination had been generally available from the 1860s.

History of Highland Hospitals

Unlike other Highland poorhouses, Inverness had a high occupancy. Accommodation was initially planned for 200 residents but it became clear that this was too high and subsequent figures are lower. By 1905, it had been reduced to 150 and, in 1906, attic conversion increased capacity by only 10 beds including 27 sick beds. Correspondence at the time indicates the restraints put on the local authority by the Local Government Boardⁱ in Edinburgh as, through increasing regulation, it tried to ensure adequate living space for residents.⁴ Fortunately, actual occupancy was well short of official capacity as shown in the table below.

Residents & sick 1870-1910 at mid-November

Year	Total residents	Sick
1870	77	9
1874	88	23
1878	83	12
1882	87	10
1886	86	26
1890	65	6
1894	101	8
1898	86	7
1902	86	10
1906	77	22
1910	83	24

There was much emphasis on austerity and economy. Craft and trade skills of residents were utilised, for example, boots and clothes were made in-house, unless the only resident tailor died, as happened at one point. In 1864, ‘strong scotch tweed’ was substituted for moleskinⁱⁱ and residents evidently were identified by their ‘uniform’. If a resident absconded wearing house clothes, it was treated as theft and the police informed. Diet was basic consisting of porridge twice a day with buttermilk or treacle, soup with potatoes or bap (roll) and 1.5 ounces of meat three times a week⁵ although there was extra food on New Year’s Day and a Christmas dinner of mutton donated by a town solicitor.

Residents were allowed to ‘attend divine service on Sundays’ and a chaplain was also appointed, initially at £15 p.a. but later raised to £30 p.a. and, by 1863, the sick and bed ridden received additional spiritual instruction on Wednesday afternoons.

ⁱ In 1894, this succeeded, with extra powers, the Board of Supervision.

ⁱⁱ It is said that men originally wore white moleskin suits with large pearl buttons but this does not seem likely.

History of Highland Hospitals

The Poorhouse gradually became less austere. In 1900, the Committee agreed to 'charitable entertainments' and residents had regular visits, gifts and entertainment from local organisations and individuals. In December 1927, the governor noted that 'treats' included special Christmas and New Yearⁱ meals and a concert and choir performance. By 1914, there was the beginning of a library and copies of local papers were donated. From 1919, tea as well as porridge was served for breakfast. In 1911, Inverness Poorhouse was the first in Scotland to have 40ⁱⁱ Old Edinburgh Road rather than Inverness Poorhouse recorded on birth certificates 'thus eliminating any taint of pauperism which in later life might be a hindrance to the person concerned'. Although in this aim it was singularly unsuccessful.⁶

Poorhouses aimed to be as self-sufficient as possible. The grounds had a six acre garden and, in 1862, a gardening sub committee was formed, the land ploughed and the foreman of Howden Nurseries asked to select suitable trees and plants. A gardener was employed and a piggery built. It is likely that a cow was kept for milk as happened elsewhere. The land continued to be worked into the 1950s.ⁱⁱⁱ Apart from work in the grounds, the main tasks were chopping firewood, the sale of which brought income, and household tasks although, by the 1870s, there were often insufficient able bodied residents and domestic servants had to be employed. Interestingly, it was seldom possible to persuade outside paupers to take up such employment even when they lost their allowance as a result of their refusal to work.

There was always a number of children and their welfare was an ongoing issue. In 1910, there were 110 children accommodated over the year.

ⁱ There was a tradition of celebrating the old New Year (12 January) at Muirfield. In 1934, 61 prominent (male) Inverness citizens were invited. A former nurse remembers it included lots of doctors (Inverness Our Story Bk1). It seems unlikely that the residents were involved.

ⁱⁱ Street numbers changed and it became 80 Old Edinburgh Road in 1934.

ⁱⁱⁱ It was important in the 1940s to the extent that a new tractor was purchased.

History of Highland Hospitals

Most were eventually removed by their parents but 11 were boarded out, three adopted, three sent to an Industrial Schoolⁱ and five, who had been convicted of theft and placed in the Poorhouse by the police, were sent to a reformatory. Eight were still resident at the end of the year. Numbers continued at a high level. In 1915, 58 children were admitted and this rose to 73 in 1917.⁷

Initial plans for a resident to teach the children foundered when he left and the children went to Raining's Schoolⁱⁱ run by the Society for the Promotion of Christian Knowledge. However, the Society later refused to have them and, by 1871, the children were attending Culcabock School to the east. The Poorhouse committee regularly examined the children in reading, spelling and arithmetic and, by 1869, the precentor of the High Church was teaching them singing. From 1863, children were boarded out locally over the summer and autumn, essentially as domestic labour, for £1 payment to the Parochial Board and there was later much concern about their welfare and treatment while boarded out. In 1869, the Board of Supervision ruled that children could not be separated from their mothers and sent out of the Poorhouse.⁸

Staff had to cope with ongoing change and uncertainty. In 1915, Oldmill Poorhouseⁱⁱⁱ in Aberdeen was converted to a wartime hospital and 60 of its residents were sent to Inverness until after the war. In 1916, two wards were temporarily set aside for phthisis (pulmonary tuberculosis) cases because the Citadel Hospital was required for an outbreak of cerebrospinal meningitis. In the mid-1920s, the economic depression and the prospect of work on the Inverness-Glasgow road brought many itinerant workers to the area. Many of them arrived exhausted and

ⁱ Run by the Royal Society for the Prevention of Cruelty to Children. Like ragged schools they took destitute children and gave them education and a trade. The first was in Aberdeen in 1846. Initially voluntary, they were later legalised by act of parliament. They differed from reformatories in that their pupils had not committed a serious crime.

ⁱⁱ Now demolished, it was situated at the top of Raining's Stair in Inverness.

ⁱⁱⁱ Later part of Woodend Hospital (Glenburn Wing).

History of Highland Hospitals

homeless and required temporary accommodation in the Poorhouse and this continued into the 1930s.ⁱ In 1932, there were 524 admissions and 476 discharges both of which reduced considerably the following year when the road work had finished. Vagrants who often came and went daily were accommodated in the separate porter's lodge. The three maternity beds were often occupied by mothers who were in some distress so that their arrival was usually a sudden rather than planned event. All this work of checking in and out fell upon the matron and nurses who were already struggling with oversubscribed sick wards. Administrative staff were then unheard of.

As the table on page 5 shows, numbers of sick varied but began to increase steadily in the 20th century and accommodation for them became insufficient. By 1910, the 24 sick beds were full and there were often sick in the ordinary wards. It was impossible to segregate infectious cases such as phthisis although 'itch and offensive cases' were isolated in the probationer wards in the gatehouse. In 1911, attic space was converted to dormitories which allowed expansion to 43 sick beds which the governor considered ample although, by 1917, sick beds had again increased to 26 male, 19 female and 5 children.⁹ By then, all the sick wards, a maternity ward, nursery and staff accommodation were contained on the first floor and, apparently, a male and female ward were reserved for 'the respectable sick poor'.¹⁰ Medical officers continued to visit the sick daily and the other residents monthly but, despite rising numbers of sick, nursing staff did not increase until the 1920s.¹¹

Facilities were slow to improve and there was no hot water system until 1901.¹² In 1908, central heating was installed, it being noted that it was impossible to maintain temperatures in the sick wards in winter. However, there was still a shortage of water so that the recommended one bath per week for residents was instead one per fortnight. There was no heating in the attic rooms until 1919 when gas radiators were installed and, in 1921, electric light was introduced. In 1926, a new

ⁱ Local authorities had to accommodate homeless which they did at the Poorhouse.

History of Highland Hospitals

governor's house was opened and the redundant governor's family quarters in the main building provided space for accommodation for two nurses and a medical inspection room. The 1920s saw a steady rise in the numbers of sick (table below) as well as the infirm but little change in staffing despite the increasing workload.

Muirfield selected statistics 1920 - 1926¹³

Numbers at the end of	1920	1922	1924	1926
Total residents	67	72	98	121
Sick	26	23	34	36
Resident children ⁱ	7	4	5	5
Matron	1	1	1	1
Day nurse	1	1	1	1
Night nurse	0	0	0	1

In the 1920s, there were administrative changes to the Poorhouse but little evidence of a change in conditions. In 1921, it was renamed Muirfield Institutionⁱⁱ but greater changes were to come. The 1929 Local Government Act swept away much of the old Poor Law and poorhouse sick wards, like all other public health, became the responsibility of counties and burghs. From 1930, the new Inverness Joint Hospital Board administered the sick wards (as well as Culduthel and Citadel hospitals) and Mr Bewglass, Muirfield's governor, also became Clerk to the Board. The official capacity was 40 sick beds but there was continual overcrowding, a fact highlighted strongly in annual reports from the governor and medical officer. They also stressed that little had changed under the new administration. There was no hot water at night, heating was mainly by open fire and the laundry machine which had been installed in 1907 was worn out. Basic aspects were lacking such as bedside lockers but, more importantly, sanitary facilities were outdated and inadequate for hospital cases. In 1934, the governor noted that the

ⁱ Resident children were those who could not be boarded out due to sickness or special needs. They had their own ward and were looked after by a nurse.

ⁱⁱ This is earlier than most in Highland. All did eventually change names but the latest - Nairn Poorhouse - did not become Balblair Home until 1934.

History of Highland Hospitals

delay in rectifying the situation could no longer be attributed to local government reorganisation but the problem seems to have been that there was no obvious in-house solution.

In the early 1930s, the Department for Health agreed that it was not cost effective to upgrade the outdated building and a new build at Culduthel would also remove patients from the stigma of the poorhouse which still pervaded Muirfield. However, plans for this were only finalised in 1939, delayed by the Second World War and then overtaken by the new hospital at Raigmore. Meanwhile, the uncertain future of the institution prevented any strategic planning of facilities or staffing and, indeed, no substantial refurbishment was done until the 1950s.

In 1935, the Burgh MOH (Medical Officer of Health) reported that Muirfield was ‘totally unsatisfactory for the patients for which it has to cater’ and the following year was more expansive calling it ‘unsuitable in every way’, ‘wards badly ventilated’ and ‘laundry and kitchen arrangement entirely unsatisfactory’. There were only four baths in the whole building – two male and two female. In 1938, the governor noted that there had been no structural alteration to the wards since it opened in 1860 when no thought had been given to medical care.

In 1938, a government survey described Muirfield as a building with narrow central corridors and poorly lit but well-ventilated wards although the latter point is at variance with the earlier views of the medical officer. Its accommodation included 54 beds for the chronic sick, a nursery ward for six children and places for certified mental patients.ⁱ The recommendation was for chronic sick to continue until the planned (but never built) provision at Culduthel was ready and thereafter Muirfield would have ‘chronic sick mental cases’.¹⁴

ⁱ Despite provision being available at the Northern District Asylum.

History of Highland Hospitals

Muirfield selected statistics 1933 - 1937¹⁵

	1933	1934	1935	1936	1937
Cases treated	243	231	254	244	290
Ordinary at 31 st Dec	27	30	23	23	21
% Ordinary	22%	23%	23%	24%	18%
Infirm at 31 st Dec	22	24	22	22	20
Chronic Sick at 31 st Dec	65	65	50	48	67
Children at 31 st Dec	8	13	6	3	10
Total resident at 31 st Dec	114	119	101	98	113
Births pa	14	15	15	14	14

Ordinary residents were fit but were unable to support themselves.

The Infirm could not work and needed care but not intensive nursing.

The Chronic Sick were bed ridden.

As the table above shows, the initial capacity of 40 sick beds now had to accommodate well over 60 at times and, in addition, the children and infirm also required care. This amounted to around 80% of the total residents. The throughput of cases also increased being 112 p.a. in 1921, 196 p.a. in 1930 and, as the table above shows, approaching 300 p.a. by the late 1930s. In July 1932, Inverness Burgh boarded out able-bodied residents to the underused Ness House in Fortrose to increase accommodation for infirm, sick and maternity but this appears to have ceased by 1935.¹⁶

The table on page 12 shows the classification of ailments recorded by the medical officer. It seems that many residents at Muirfield suffered from unspecified conditions associated with old age and debility which may have defied closer diagnosis or perhaps a closer diagnosis was not sought. Certainly the generality of the description of cases contrasts with contemporary RNI reports and makes year on year comparisons difficult. Note the regular number of maternity cases (births) which later went to Rosedene Hospital.¹⁷

As well as pressure on facilities, financial pressure on Muirfield also increased because, with better social welfare, there were fewer fit

History of Highland Hospitals

residents and few former tradesmen so that the hospital had to pay for maintenance jobs which previously would have been carried out by its own residents. This was particularly the case in 1937 when the Government's Unemployment Assistance Board took over support for able bodied cases. Also, as the economy recovered in the 1930s, there were more jobs so that the more active residents found work.

Muirfield classification of sick cases¹⁸

	1934	1935	1937	1938
Diseases of the nervous system	40	45	29	42
Diseases of the circulatory system	29	34	52	51
Diseases of the respiratory system	20	23	24	26
Diseases of the digestive system	16	8	7	12
Diseases of the genito-urinary system	13	6	10	12
Accidents	13	11	22	26
Senility	8	10	20	22
Ante and post-natal	24	36	28	21
General condition e.g. rheumatism	64	43	48	69

In 1938, nursing staff consisted of three fully trained and five trainees (probationers). The shortage of nurses was regularly reported but apparently could not be increased due to insufficient nurses' accommodation. A nurse remembers that, in 1939, patients were mainly those who could not live on their own and that the small maternity unit dealt with many births by unmarried mothers. She remembers the hard work and being on night shift on her own.¹⁹

During the Second World War, three downstairs rooms were set aside as an ARPⁱ station and First Aid post. Muirfield also had to accommodate the families of some armed forces personnel, posted to the area, whose wives and children had followed them and turned up homeless on the doorstep. The porter still stayed in one half of the gatehouse and still locked the gates each night. The other half of the gatehouse stored

ⁱ Air Raid Precautions - later Civil Defence.

History of Highland Hospitals

patients' clothes and housed two old men. The number of children was concerning and particularly high at over 20 in 1943 thus increasing the pressure for a children's home.²⁰

The contrast between Muirfield's sick wards and those in Culduthel Hospital is interesting. Both were run by the same local authority board but their staffing and accommodation levels were quite different. There were approximately three patients per nurse at Culduthel and this level of staffing was maintained - if numbers of in-patients increased, staff numbers seemed to rise accordingly. By contrast, there were at least twice as many patients per nurse at Muirfield and staffing levels were fixed so that they just had to cope when numbers increased.

In 1948,ⁱ Muirfield transferred to the new Health Board and, in 1951, the official capacity of 114 was split equally between the Board and the local authorities. At the 1951 census, it had 87 patients and 12 resident staff. By mid-1953, the Burgh had moved out its infirm to its recently acquired 'old people's homes' at Ach an Eas and Rossal. The County took much longer to act and although it had acquired Aigas House, it thought Muirfield patients were 'unsuitable' for it. Eventually, in 1958, after some considerable pressure from the Health Board which was trying to cope with the rising demand for chronic sick beds, County patients were moved out to Burgh housing while their new Home at Burn Road (Burnside) was constructed. Until 1956, when separate lodging houses were provided, both Burgh and County retained the gatehouse for male vagrants - women and child vagrants were still accommodated in the main building. Numbers of patients in Muirfield continued at around 90.

In 1955, there were substantial alterations and the top floor was converted into nurses' accommodation. In 1960, the hospital was extensively modernised.²¹ This included new central heating, demolition

ⁱ After 1948, former poorhouses with a majority of bed-ridden residents transferred to the new health boards otherwise they remained with the local authority. In Highland, only Muirfield and Swordale (Migdale) transferred to the health board.

History of Highland Hospitals

of the gatehouse and porter's lodge, a day room for patients, new ward kitchens and additional bathrooms and toilets/sluices. On 8th November 1961, it was officially re-opened as Hilton Hospitalⁱ with 80 beds. During the refurbishment, 40 female patients were accommodated at Culduthel and 20 male at Invergordon. In 1963, the former governor's house was converted to nurses' accommodation.²² However, the hospital's facilities were still outdated and, after being considered as a possible Health Board headquarters, it closed in August 1987 and patients were transferred to the new long-stay geriatric wards at the RNI.²³ The building has now been converted to residential use.

Governors and Matrons

1861- 1904	Mr & Mrs D MacFie	Mrs MacFie assistant matron until Mr MacFie's death in August 1910.
1904-44	Mr & Mrs Bewglass	Appointed from 17 applicants. Mrs Bewglass retired in 1935. ²⁴
1944	Thomas Allison	
1935-51	Miss Joan Mackenzie	Initially acting matron then matron from 1939. Died suddenly. ²⁵
1951-57	Miss A Chisholm	
1957-65	Miss CG Bain	Retired.
1965 -	Miss I O Mackay ²⁶	

ⁱ This name had been suggested in 1950 by the Council of Social Services, Inverness.

History of Highland Hospitals

References

- ¹ Surveyed 1868-70, published 1874. National Library of Scotland
- ² Inspector of Poor Report: Parish Council Minutes 1911: Inverness Courier 5 June 1862
- ³ *Development of Poor Law Institutions*. Unsigned, undated document Highland Archives
- ⁴ Inverness Poorhouse Accommodation and Alterations file Highland Archives
- ⁵ *Development of Poor Law Institutions op.cit.*
- ⁶ Inverness Inspector of the Poor Report 1911: Inverness Poorhouse Governor Annual Report
- ⁷ Inverness Courier 28 February 1917
- ⁸ Inverness Poorhouse Management Committee Minute
- ⁹ *Report on the Hospital Services of Scotland* 1920 *op.cit.* p37
- ¹⁰ *Development of Poor Law Institutions op.cit.*
- ¹¹ Inverness Poorhouse Governor's Annual Report 1942
- ¹² Inverness Courier 15 March 1901
- ¹³ Inverness Poor House Minutes
- ¹⁴ Scottish Hospital Survey 1946 *Report on Northern Region*. Edinburgh
- ¹⁵ Governor and Medical Officer Annual Report
- ¹⁶ Inverness Poorhouse Governor Annual Report in Inverness Town Council Minutes
- ¹⁷ Inverness Public Health Committee 23 December 1939
- ¹⁸ Muirfield Medical Officer Annual Reports
- ¹⁹ Mackay, Sheila OBE (Ed) *Inverness Our Story* Bk 2 Inverness 2007
- ²⁰ *ibid*
- ²¹ Northern Region Health Board General Purposes Committee 6 September 1956; Muirfield Hospital Department of Health Miscellaneous file National Records of Scotland
- ²² Northern Region Health Board Minutes Vol. 15 p71, p108: Vol. 17 p29, p132
- ²³ Highland Health Board Minutes 17 October 1984, 15 August 1987
- ²⁴ Muirfield Institution Annual Report 1934, 1935 and 1938
- ²⁵ Inverness Hospitals Board of Management 12 November 1951
- ²⁶ Northern Region Health Board Medical Committee 3 January 1957