

# THE ALL SAINTS' SISTERHOOD AT UNIVERSITY COLLEGE HOSPITAL, 1862-99<sup>1</sup>

by

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I have always been brought up to believe [wrote a correspondent of the *Daily News* in June 1885] that if there was an unsectarian institution in the world it is University College, in Gower Street, and the institutions affiliated to it. One of these institutions is the hospital, which is situated on the opposite side of the road and bears its name.<sup>2</sup>

Yet, for nearly forty years, from 1862 to 1899, the nursing at University College Hospital was undertaken by an Anglican Sisterhood, which insisted, until as late as 1889, that all the nursing staff must be communicant members of the Church of England.<sup>3</sup> How did a community, founded on a strictly religious basis, come to serve in 'an institution ostentatiously professing to be unsectarian'?<sup>4</sup>

The Society of All Saints' Sisters of the Poor was founded in 1851 by Miss Harriet Brownlow Byron and the Rev. Upton Richards, Vicar of All Saints, Margaret Street.<sup>5</sup> It was essentially an Anglican nursing order: an offspring of the same movement which in 1848 had produced St. John's House, Fitzroy Square. The members of both institutions were taught 'to regard their work as a holy function; not as a mere trade, but as a dignified office'.<sup>6</sup> If the economic and social status of nursing were not yet high enough for it to be regarded as a profession, at least its vocational aspect could be emphasized.

The nursing activities of All Saints were at first confined to its private home for incurable women and children in Mortimer Street.<sup>7</sup> For several years this seemed an adequate and satisfying outlet for the religious enthusiasm of the Sisterhood; but as the membership of the Order grew, so did the need for an expansion of its activities. The problem of how best to obtain and keep up an adequate and efficient staff of nurses was a constant source of trouble and anxiety to the authorities of the great London hospitals. Here was a situation full of possibilities. If the Sisterhood could become associated with one or more of the famous Metropolitan hospitals, its members would have an opportunity not only to exercise their calling but, above all, to acquire experience and training. There was no better method of instruction for nurses than the practice of a large London hospital. Association with these great charitable establishments would, moreover, increase the fame and prestige of the Order.

By 1859 the virtue of being linked with a well-known hospital had become a necessity. In March 1856 St. John's House had taken over the entire nursing of King's College Hospital. This was not surprising: King's was an Anglican foundation, and St. John's had been created chiefly through the influence of

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R. B. Todd, William Bowman, and Lionel Beale, all members of the medical staff of King's College.<sup>8</sup> If All Saints' Sisterhood was not to be completely overshadowed by St. John's, it too had to expand its activities in like manner. What greater prize existed than the capture of the 'Godless' hospital in Gower Street? The prize was great, its winning difficult. If the Sisters were to take over the nursing department of University College Hospital, the process would necessarily be a slow one, the route to be followed devious. And so, from 1859 to 1862, Miss Brownlow Byron pursued an unremitting policy of infiltration.

The first move came in December 1859. Miss Byron wrote to the Hospital Committee requesting permission for two of the Sisters to attend the practice of the Hospital 'for the purpose of learning to nurse the sick and dress wounds'. The Lady Superior assured the Committee that no interference whatever with the religious opinions of the patients or officers of the hospital would be attempted.<sup>9</sup> The Sisterhood was quite willing to forgo the duty to preach the gospel in order to gain a foothold in the 'Godless' hospital. Gradually All Saints strengthened its position. In October 1860 it took over the whole of the nursing of Wards 5 and 6: at the same time five of the Sisters became residents of the hospital.<sup>10</sup> Miss Byron hastened to assure the Hospital Committee that her nurses would remain under the control of the Matron and 'would be quite willing to comply with any rules laid down by the Committee'.<sup>11</sup>

The number of All Saints' nurses working in U.C.H. steadily grew. In February 1861, on Miss Byron's initiative, three additional night nurses were engaged.<sup>12</sup> By April 1861 the Sisters constituted a significant group within the nursing department. Their number was large enough for their withdrawal to create much inconvenience to the hospital authorities. Strong though Miss Byron's position now was, it was not strong enough. The Sisterhood had not yet made itself indispensable. During the spring of 1861 the Lady Superior informed the Hospital Committee that the present arrangements were too expensive for her. Moreover, she had difficulty 'in bringing the working of her system into harmony with the existing arrangements'.<sup>13</sup> Consequently, she thought it better to withdraw her nurses from the hospital. This was little more than a thinly veiled challenge to the authority of the Matron. When the Hospital Committee replied that they were not prepared to make any change in the agreement of the previous October, there was no evacuation by the Sisters. Instead their number continued to increase. Miss Byron's attempt to gain control of the nursing section had been a little premature.

The Railway Disaster at Oak Village Fields, near Kentish Town, in September 1861, may well have radically changed the position of the All Saints' Sisterhood in the eyes of the hospital authorities.<sup>14</sup> A large number of casualties was speedily accommodated in U.C.H., and All Saints promptly offered to supply the extra nursing required. It was not merely the efficient manner in which the Sisterhood carried out its task which impressed the Committee.<sup>15</sup> What significantly tilted the scales in favour of All Saints was the revelation that a closer connexion with the Sisterhood would enable the hospital to tap a reservoir of nurses whenever an emergency occurred. Railway accidents might

be few and far between, but outbreaks of cholera, erysipelas, pyaemia, and typhoid fever were all too frequent. As early as 1853, the hospital authorities had been concerned about the supply and expense of additional nurses, which were costing the hospital an average of £2 17s. a week, nearly one-half the total weekly payment for regular day and night nursing.<sup>16</sup> It was by no means easy to find suitable part-time nurses at short notice. But in the All Saints' Sisterhood there existed a reserve of nurses whose character and capabilities were known and who could be transferred promptly from their headquarters or from St. Elizabeth's in Mortimer Street.

In view of this the Hospital Committee were more ready to listen to the proposal made by Miss Byron in January 1862, that All Saints should assume control of the nursing department.<sup>17</sup> The Sisters had already given proof of their devotion and efficiency in the past two years. St. John's House appeared to have made a success of their venture at King's College Hospital. Furthermore there was a general opinion throughout the London hospitals that the nursing systems needed improving: Florence Nightingale's influence was beginning to be felt.

It cannot be denied that the nursing at U.C.H. left much to be desired. Although the 'Sairey Gamp' tradition has been exaggerated, it remains true that there was much room for improvement even by the standards of mid-Victorian England. Hospital Minutes, of course, record only the instances of exceptionally good or notoriously bad conduct. The nurse who daily performed her duties competently left few memorials. Her work was taken for granted. But when due allowance is made for this fact, the picture drawn by Professor Hearnshaw is hardly open to dispute.

Too many women of inadequate skill, coarse manners, low character, and bibulous tendencies, found their way into the wards, to the distress of the patients, the despair of the doctors, and the demoralization of the medical students.<sup>18</sup>

If the nursing staff was frequently inadequate, the hospital authorities had only themselves to blame: neither the conditions of work nor the wages offered were likely to attract any but the lower class of women. The University College Hospital Minutes contain frequent references to insubordinate nurses. In 1845 Mrs. Dewar, the head nurse of Ward 7, was discharged for drunkenness,<sup>19</sup> and three years later, the head nurse of Ward 4 was removed for ill-treating the patients.<sup>20</sup> In 1850 a night nurse was charged at Bow Street for pawning sheets belonging to the hospital.<sup>21</sup> Nurse Rosaire was dismissed, in 1852, for stealing 'two mattresses, a table, and a set of fire-irons',<sup>22</sup> and two years afterwards Nurse Turner was discovered selling morphia to patients.<sup>23</sup>

Although it was clear that an improvement in the nursing was desirable the Hospital Committee was deeply divided on whether it was wise to surrender 'the interior arrangements of the Hospital into the hands of a body holding peculiar religious views'.<sup>24</sup> At length, the Hospital Committee decided to refer the question to the College Council, which expressed itself in favour of

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transferring the nursing to the All Saints' Sisterhood. The Agreement of 23 April 1862 was the direct result.<sup>25</sup> By this agreement,

the entire arrangements of the Hospital as far as they apply to the nurses and female servants of the establishment (were) committed to the charge of All Saints' Home.<sup>26</sup>

All the existing nursing staff, including the Matron, Miss Robotom, was told that its services would no longer be required. All Saints were obliged to maintain a minimum staff of one head sister, one sister for each pair of the six main wards and one for Ward 7, two nurses for each ward, a housekeeper, and a staff of female servants. The head sister was responsible for the good conduct of the nurses and servants, and was expected to make a fortnightly report on the state of each ward. The All Saints community was to receive an annual sum of £1,000 but had to refund the cost of the board of the sisters, nurses and female servants. Finally, in return for securing the control of the entire nursing and domestic arrangements of the hospital, the Sisterhood surrendered the right to influence the religious opinions of the patients 'in any way, by word or deed, or by the distribution or withholding of books'.<sup>27</sup>

The authorities of U.C.H., then, had contracted with a separate establishment to provide for a specified sum all the female labour the hospital might require. The nurses were placed beyond the immediate control of the Hospital Board, and were engaged and paid by the Sisterhood, which held itself responsible to the Board for the efficient performance of the duties it had undertaken. The Lady Superintendent was directly responsible to the Mother Superior of All Saints, and only secondarily to the Hospital Committee. The Governing Body of U.C.H. had no power directly either to approve of or to censure any of the nursing staff. It is for this reason that the Hospital Committee Minutes contain no references to insubordinate nurses after 1862. It does not necessarily follow that such cases no longer occurred: merely that the jurisdiction in such matters had been transferred from the Hospital Committee to the Lady Superintendent. The silence of the Minute Books does not, therefore, necessarily warrant the conclusion drawn by the Matron of U.C.H. in 1933

that from the time the Sisters came into the Hospital the complaints concerning the nurses' misconduct and unkindness to patients completely died out. . . . From then onwards a reign of peace seems to have begun in the nursing department.<sup>28</sup>

How well did the Agreement of 1862 work in practice? What were its advantages and disadvantages? These questions may best be examined in the light of a contemporary appraisal of the 'contract system of nursing', written in 1871 by Dr. J. C. Steele, the Superintendent of Guy's Hospital. Dr. Steele began by pointing out some of the system's advantages. He first emphasized the improved quality of the Ward Superintendents.

The presence of ladies in each department secures a sense of decorum and propriety among the patients and attendants which are not always to be found in other establishments; and . . . the sick are indulged in many little comforts and pleasures which they would be less likely to receive from attendants selected from their own class of life.<sup>29</sup>

The Sisters gave 'their valuable services gratuitously'; they came to nursing not out of necessity but from choice. A correspondent of the *British Medical Journal* in 1874 added that both nurses and patients more readily obey a lady sister; she generally possesses more tact in management; and since she is not likely to hold such a post unless she has a real love for the work, she is more likely to perform it zealously than a nurse who might only be actuated by 'mercenary motives'.<sup>30</sup>

The All Saints' Sisters were of superior education and came from a higher social class than their predecessors. It was stated in 1867 that out of twenty nurses at the Birmingham General Hospital, seven including three head nurses could neither read nor write.<sup>31</sup> The state of affairs at most of the London hospitals at mid-century was not very different.<sup>32</sup> The Sisters were also likely to be more efficient. The All Saints' Home was an institution with special knowledge and experience of nursing: it possessed a reserve of members from which to select its working staff: the general standard of efficiency should, therefore, have been rather higher than when recruits were obtained by chance means. Moreover, the strong *esprit de corps* of the Sisterhood ensured harmonious working among its members.

Dr. Steele next referred to the number of nurses employed. The Sisters, he wrote,

are aided by a larger staff of nurses in proportion to the number of patients than are usually employed in other establishments, and . . . they again are exempted from the greater part of the cleaning and menial work of the wards.<sup>33</sup>

In 1873 there was one nurse to every 4.3 beds in University College Hospital. At St. George's the proportion was one to 5.2 beds, at St. Mary's one to 6.3 and at Guy's one to 6.7 beds. The cost of nursing at these hospitals varied according to the wages and perquisites of the nurses as well as to the number of staff employed.<sup>34</sup> At University College Hospital the annual cost of nursing per bed was £10. At St. George's it was £10 6s. 9d., at St. Mary's £9 4s. 3d., and at Guy's only £7 6s.<sup>35</sup> In this connexion Dr. Steele rightly explained that the sum paid to the All Saints' Home for the

nursing, cleaning, and even the cooking done in the hospital, cannot be considered excessive, when we keep in view the number of persons employed; in fact it is difficult to see how the communities . . . are reimbursed their necessary expenses without other aid.<sup>36</sup>

Dr. Steele's comments are borne out by the facts. In the year 1877–8 the cost of maintaining the staff required by the 1862 Agreement was £2,175 14s. To meet this expenditure the All Saints' Sisterhood received a total of only £1,760, leaving them a deficit of £415 14s.<sup>37</sup> The Hospital Committee agreed to increase the payment for the nursing department to £1,820 a year; and the wages of the female servants were in future to be paid to the Sisterhood separately.<sup>38</sup>



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The disadvantages of the contract system for Dr. Steele, however, decisively outweighed its advantages. In his view,

there must necessarily be a duality of government, with all its inconveniences, in administering the internal affairs of a charity, when the larger number of those employed are not officially responsible to the governing body, but are ruled and controlled by a superior agency outside. It appears impossible but that misunderstanding should arise from time to time with reference to many questions of domestic economy, involving considerable expenditure of money, which under a single system of administration would be at once decided in a way more in keeping with the limited resources of a voluntary charity than irresponsible agents are likely to follow.<sup>39</sup>

How far are Dr. Steele's strictures applicable to the system of nursing at U.C.H.?

The difficulties and misunderstandings which Dr. Steele considered inevitable were not so seriously felt in U.C.H. as might have been expected. At various intervals the original agreement was revised; the number of nurses had to be increased as the hospital expanded; the grant to All Saints was adjusted to meet the additional expenditure involved.<sup>40</sup> Questions of discipline, in rare instances, were brought to the fore, and inefficient nurses were removed; but these matters were invariably settled on the spot by the Lady Superintendent on the informal representations of the Resident Medical Officer or of the members of the honorary staff.<sup>41</sup> The Sister in charge was empowered by the Home to act according to her own discretion in all ordinary matters, and the head of the community was only consulted on affairs involving a change of principle or of system.<sup>42</sup> It is a remarkable fact that the arrangement between University College Hospital and the All Saints' Home worked infinitely more smoothly than the almost identical agreement between King's College Hospital and St. John's House. There is nothing in the history of U.C.H. comparable to the embittered quarrel which broke out in 1874 between the Committee of King's College Hospital and St. John's.<sup>43</sup> Indeed, when All Saints was attacked in the press for refusing to engage nurses who were not members of the Church of England, the authorities of University College Hospital declined to intervene, even though this decision lost the hospital several donations.<sup>44</sup>

Friction between the University College Hospital Committee and All Saints was generated not from a clash of principle but from the mundane working of the system. The problem of increasing the grant to All Saints has already been noted. Another difficulty was the question of accommodating the nursing staff. The hospital was overcrowded, and the nurses were housed in nearby Huntley Street and Grafton Street. The frequent outbreaks of typhoid fever among them were the result of the overcrowded and insanitary condition of their living quarters.<sup>45</sup> The most serious cause of friction between the two institutions centred on the composition of the nursing staff. The All Saints' community did not enter University College Hospital solely or even primarily for philanthropic purposes. All Saints was a nursing association devoting its attention first and foremost to the supply of nurses for private cases. The maintenance of the staff at U.C.H. was a secondary matter: indeed

the hospital was used as a training ground. Nurses were drafted off as they became efficient, and their places were filled with fresh probationers. Within certain limits this was unobjectionable. The majority of nurses were not willing to stay longer than necessary at hospital work; if they had not been transferred to private nursing by the Sisters, they would have taken to it on their own account. What the Hospital Board complained of was the practice of drafting off nurses too rapidly, leaving an undue proportion of young nurses and learners to carry on the service of the hospital. Thus, when the All Saints' Home requested an increase in their grant in 1878, the Hospital Committee obliged it to accept a new clause in the Agreement, which was intended to stop this practice. The new clause laid it down that the Sisterhood must maintain within the hospital twenty-seven nurses 'of whom 20 at least shall be of more than one year standing as a Hospital nurse'.<sup>46</sup> The Sister Superior had to make periodic returns to the Committee specifying the number of nurses of more, and less, than one year's standing in the hospital, as well as the number of probationers.<sup>47</sup>

Dr. Steele's principal criticism of the 'contract system' was that it led to unnecessary expenditure. In his paper he suggested that

recommendations for alterations, additions, and improvements in ward furnishings, in diet, and in the numerous requirements of a hospital, must necessarily be received with a considerable weight of authority from those who have voluntarily devoted their time and services to the great work; and it is not likely that any committee of management would strongly oppose innovations suggested by individuals to whom at the same time they would be willing to concede better judgment if not experience. It is only by admitting these and similar obstacles to an economical administration that we can account for the great disparity which exists in the expenditure of such hospitals as have been nursed on the new principle compared with those in which the old system still obtains—a disparity, it will be seen, scarcely warranted by the results, as far as the patients are collectively concerned.<sup>48</sup>

Dr. Steele was not the only person to draw attention to this point: it had already been noticed by two of his contemporaries, Mr. Joseph G. Wilkinson, the Secretary of St. Mary's Hospital, and Mr. Fowke of the Birmingham General Hospital.<sup>49</sup> Moreover, there is no lack of evidence to support it.

At University College Hospital the total cost of maintenance per bed rose 67 per cent the first year after the All Saints' Sisterhood took charge,<sup>50</sup> and continued to increase steadily, until in 1869 it was over three times the amount at which it stood ten years before.<sup>51</sup> While the expenditure had thus increased 300 per cent, the number of patients relieved had increased by less than 20 per cent.<sup>52</sup> The general rise in wholesale prices during the same period accounts for less than 3 per cent of this increase.<sup>53</sup> It cost as much as £77 4s. 10d. to maintain each bed occupied continuously at U.C.H. in 1868; while at St. Mary's and the Westminster hospitals, which were about equal to the former both as regards the total number of beds and the daily average of patients, but which were nursed on the old system, the cost per bed was respectively £57 11s. 1d. and £39 19s. 1d.<sup>54</sup> In 1873 the cost at U.C.H. had been reduced to £74 15s., but at St. Mary's it was only £60 10s. and at the Westminster

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£57 7s.<sup>55</sup> The position had not altered fifteen years later. The average cost of each bed occupied during the three years, 1887, 1888, and 1889, was £93 9s. 5d. at U.C.H., £77 9s. 10d. at St. Mary's, and £65 16s. 1d. at the Westminster.<sup>56</sup>

How can these differences be explained? A careful comparison of the accounts of the different institutions shows how the excess is spread over several items. The standard of neatness and cleanliness of the Sisters was probably higher than that of the old-type nurses. This involved more frequent scrubbing of wards and changing of bed-linen, with increased charges for wear and tear and washing. The expenditure on the patients' diet varied considerably from hospital to hospital. The cost of the weekly diet per patient at U.C.H. was 6s. 11d. in 1871, while at the Westminster and St. Mary's it was only 5s. 10d.<sup>57</sup> It is difficult to disagree with Dr. Steele when he concludes that

it would certainly require very strong arguments to prove that a patient in the North London [i.e. University College] Hospital had double the advantages of a patient resident in the Westminster Hospital, or that it was a greater charity to maintain 100 beds at the former institution at the same outlay as sufficed to provide for 200 beds at the latter.<sup>58</sup>

Why did the All Saints' Sisterhood leave University College Hospital in 1899? In order to answer this question it is not sufficient merely to examine the history of the two institutions: it is essential to consider the general development of nursing. During the period 1862 to 1899 nursing completely changed its character: in 1862 it was a trade, by 1899 it was a profession. In 1887 the British Nurses' Association, the first professional organization of nurses, was founded. The *Nursing Mirror* was started in January 1888, and the Matrons' Council of Great Britain was set up in 1894.<sup>59</sup> Many factors contributed to this development: the doctrines and influence of Florence Nightingale, the general movement towards the emancipation of women, the advance in education following Forster's Act of 1870, and the progress in the living standards of both the working and middle classes. Whatever the causes, by 1899 there was an adequate and increasing supply of systematically trained and well-educated lay nurses. If University College Hospital was not to be excluded from the exciting adventure of training the new generation of nurses, and from benefiting from the progress already achieved, it was vital that a change in the nursing department should be made. Moreover, a revolution had occurred in medical practice which required the active co-operation of the nursing staff if it was to be successful. The All Saints' Sisters were reluctant to change the methods in which they were steeped: not until 1898 did they consent to wearing white dresses instead of their traditional black habits.<sup>60</sup> All Saints had outlived its usefulness at U.C.H. The time was ripe for a change. The St. John's Sisters had left King's College Hospital in 1885 and Charing Cross Hospital in 1889. Plans for an entirely new University College Hospital were now well advanced.<sup>61</sup> 'A new nursing system for a new hospital' became the policy of the hospital authorities.

The end came when, in March 1898, a report of a sub-committee appointed by the Hospital Board to consider the cost of the nursing revealed the total



inability of the Sisterhood to keep their hospital expenditure within reasonable limits. During the years 1893 to 1897 the Sisterhood had incurred debts, including a butcher's bill of £662 16s. 8d., which it was unable to pay. The Hospital Committee was obliged to grant the Sister Superior £500 to enable her to discharge the liabilities incurred, 'so that the Hospital should be in no danger of discredit owing to the indebtedness of its Nursing Staff'. The report also made clear the inefficiency and incompetence of the Sister Superior in financial matters. Her accounts were misleading and inaccurate: whereas they indicated a balance in hand of over £550, the actual amount available was a mere £26. During the period 1894-7 the hospital should have received £3,148 from paying probationers: the sum received in fact was only £2,884.<sup>62</sup> It is not surprising, therefore, that when the Hospital Committee determined, in October 1898, to terminate the agreement with All Saints, only one member of the Committee dissented.<sup>63</sup>

In December 1898 a Nursing Committee was appointed which devised rules for the nursing of the hospital under a secular Matron and Sisters.<sup>64</sup> Not until July 1899 did the Hospital Committee take over once more the control of the nursing and domestic arrangements.<sup>65</sup> But the appointment in March 1899 of Miss H. E. G. Hamilton, a nurse trained at the famous Nightingale School at St. Thomas's, as Matron, marks the beginning of a new era in the history of nursing at University College Hospital.<sup>66</sup>

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1. The following abbreviations have been used throughout these references:  
*U.C.H.G.C.* = University College Hospital, General Committee Minutes.  
*U.C.H.M.C.* = University College Hospital, Medical Committee Minutes.  
*U.C.H.H.F.C.* = University College Hospital, House and Finance Committee Minutes.  
*U.C.H.N.C.* = University College Hospital, Nursing Committee Minutes.  
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50. *B.M.J.*, 1874, vol. I, 4 April 1874, p. 461.
51. *Ibid.*, p. 462. In 1859 the total expenditure was £4,511, in 1869 it was £14,015.
52. *Ibid.* The number of inpatients was 1,285, of outpatients 19,381 in 1859: the figures for 1869 were respectively 1,535 and 25,791.
53. This figure has been calculated from the Index of Wholesale Prices in W. T. LAYTON and G. CROWTHER, *The Study of Prices* (London, 1935), p. 229.
54. WILKINSON, *op. cit.*, pp. 2-3.
55. *B.M.J.*, 1874, vol. I, 4 April 1874, p. 462.
56. Second Report from the Select Committee of the House of Lords on Metropolitan Hospitals, 1890-1 (457), xiii, Appendix L, p. 799.
57. *B.M.J.*, 1874, vol. I, 4 April 1874, p. 462.
58. STEELE, *op. cit.*, p. 548.
59. SEYMER, *op. cit.*, pp. 241, 253, 230.
60. *U.C.H.M.C.*, 1886-1900: 12 January 1898, p. 451.
61. *U.C.H.M.C.*, 1886-1900: 10 October 1894, p. 320 (printed insert).
62. *U.C.H.G.C.*, 1896-1900: 30 March 1898, pp. 270 (printed insert), 271, 275.
63. *U.C.H.G.C.*, 1896-1900: 26 October 1898, p. 354.
64. *U.C.H.G.C.*, 1896-1900: 21 December 1898, p. 381.
65. *U.C.H.G.C.*, 1896-1900: 10 May 1899, p. 443.
66. *U.C.H.N.C.*, 1899-1914: 22 March 1899, pp. 9-10.