BALLOCHMYLE HOSPITAL

MAUCHLINE



GOLDEN JUBILEE

1940 - 1990

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History Of Ballochmyle House

Ballochmyle was part of the barony of Kylesmure which King William the Lion granted in the year 1165 to the Cistercian monks of Melrose Abbey. By the sixteenth century Ballochmyle had become a separate estate, whose owner in 1615 was John Reid, possibly a younger son of Reid of Barskimming. The Reid family continued at Ballochmyle till about 1750 when it was acquired by Allan Whitefoord who had made his money in banking. The Reids had built and occupied an old tower house. Allan Whitefoord replaced it by what was described in 1760 as "a new House very neatly fitted up and finished", and possibly designed by the famous architect William Adam.

Allan's nephew, Sir John Whitefoord of Ballochmyle, was a friend and patron of Robert Burns. But impoverished by the collapse of the Ayr Bank in 1772, he had to dispose of Ballochmyle in 1785. It was then acquired by Claud Alexander, whose family home was in Ayr at Blackhouse (now Western House). Returning from India, where he had been paymaster general to the East India Company, he built on part of his Ballochmyle estate the new town of Catrine with its cotton works which were opened in 1787.

Burns wrote two songs in praise of Ballochmyle. "The Braes of Ballochmyle" was dedicated to Miss Maria Whitefoord. So was the better-known "Lass O' Ballochmyle", but when her father left Ballochmyle, Burns addressed it instead to Wilhelmina Alexander, sister of the new owner. Another famous literary character, James Boswell of Auchinleck, was frequently a guest at Ballochmyle, and after his wife's death seriously considered marriage to Wilhelmina Alexander.

Claud Alexander's grandson, also Claud, served in the war in Crimea in 1854. He became a Major-General and M.P. for South Ayrshire and was created a Baronet. To the 18th Century Ballochmyle House he added the new front portion. The architect was H.M. Wardrop and the building was executed in red "Ballochmyle stone" from the quarries in Mauchline. Wardrop was also architect of the Station Hotel in Ayr which is built of the same stone. The extension of the house was finished in 1886. More correctly the building was the work of Sir Claud's wife, who was born Eliza Speirs of Elderslie. She carried out the building in competition with her sister-in-law, who was at that time extending Houston House in Renfrewshire.

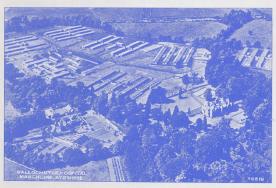
Sir Claud's son, the second Baronet, after his father's death in 1899 decided to live in Sussex. Ballochmyle House was let from then until 1937/8. In 1938 arrangements were made to sell the House and policies to the Department of Health for use as a hospital. Entry was tacitly permitted that year and the missives were finally completed in October 1939, a month after the outbreak of war.

Early Days

Ballochmyle House and grounds were purchased by the Secretary of State in 1939 as a suitable site for one of the "EMS" (Emergency Medical Services) hospitals being built at that time in anticipation of war-time requirements. It was built on the pavilion plan following the standard plan of EMS hospitals. Initially there were two blocks of eight wards, and a block containing the administrative office, the kitchen, laboratory, and pharmacy and this part of the construction was completed by the Autumn of 1940.

The mansion house was utilised as residential accommodation for the medical, nursing, administration and technical staff; but at the end of the year the nurses moved across to their new "Home", which had by that time been opened. The other two blocks of wards were completed in 1941, and also the "isolation" ward. In addition a second home for nurses was built in 1941—initially to be used by night staff. It was a very spartan building, heated only by three coal stoves in the corridor, and was christened "Siberia" by the staff.

Each of the 32 main wards had forty beds, which was the war-time allocation. There was an operating theatre in three of the blocks and an X-ray department in two. The hospital therefore, when completed, came well within the category of a "twelve-hundred bedded hospital".



Ballochmyle Hospital from the a

The Staff In Early Years

The first medical Superintendent was Dr. Gairdner, and the first Matron Miss Foster. Assistant Matrons were Miss McKinlay and Miss Buchanan, and the night Superintendent was Sister McKellar. The Chief Clerk was Miss Woods, and later Miss Murray and Miss Neil.

During the early years resident staff included Dr. and Mrs. Langston who were Canadians — he was Surgeon and she an Anaesthetist. Dr. Roy from New Zealand was a General Surgeon and also the first Plastic Surgeon. Dr. Paton, Physician, and Dr. Hillman, Surgeon, were among the first to arrive.

Dr. Gordon, who had come from the Channel Isles in 1940, was the first Radiologist and Miss Frances Le Gallais, also from the Channel Isles, was the first Radiographer.

Dr. Mackie succeeded Dr. Gordon in 1943. Dr. Agnew came in 1942, and was the much respected Senior Physician in Ballochmyle till his death in 1957. Dr. Mary Richmond came as Anaesthetist in 1943, and is well remembered for her work in the Plastic Surgery Unit. She was assisted by Dr. MacKenzie and later by Dr. Crawford. Mr Tough was appointed Chief Surgeon to the Plastic Surgery Unit in 1943, and became very well known for his work in this field. Walter Smith, who arrived in 1940, contributed much to this Unit in his capacity as Dental Mechanic.

Various Consultants visited the hospital. Mr. Sangster was originally at the war-time General Hospital situated in Turnberry Hotel. He paid regular visits during 1940, and eventually moved full time to Ballochmyle in November 1941, when he got a house in the hospital grounds. For the rest of the War and up until 1948 he was Senior Surgeon and his name was a by-word in the community.

Sir Harold Gillies, the famous Plastic Surgeon, came frequently to spend a few days in Ballochmyle to operate and to advise on the management of patients requiring plastic surgery.

Visiting from Glasgow were Mr. Hutton, Surgeon; Dr. Middleton, Physician; Mr. MacLennan, Plastic Surgeon; Professor Cameron, Gynaecologist; Mr. Strang, Oto-laryngologist; Dr Tennant, Ophthalmologist; Dr Ferguson-Smith, Dermatologist; and Mr. Wilson, Mr. Richmond and Mr. Rankine, Dental Surgeons.

Dr. Agnes Scott was appointed the first Pathologist. At the request of Sir Harold Gillies she opened the laboratory in March 1941. At that time it was difficult to get laboratory assistants; and she persuaded her sister Alison, who was a Red Cross Nurse, to take a training course at Glasgow Western Infirmary, and thereafter to join her as her laboratory technician. Technicians appointed later included Miss Gibson (Biochemist), Miss Murray, Miss Stewart, Miss Ridley and Mr. Young. When Dr. Scott left to join the Royal Air Force, Dr. McDonald succeeded her and later Dr. Shearer.

Mr. Pullar was appointed Chief Pharmacist and arrived at Ballochmyle in June 1940. He was responsible for all medical supplies and equipment, not only in the main hospital but also in the numerous Convalescent Homes which had been established in mansion houses in the surrounding country districts, as far away as Strathaven and Newton Stewart. In addition he had initially an appointment in the laboratory, where he acted as Bio-chemist.

Mr. Johnston was the first Assistant Pharmacist and he was succeeded by Mr. Russell. The pharmacy in Ballochmyle also maintained a special store of anaesthetic agents, from which all the EMS hospitals were supplied.

Miss Black was in charge of the Physiotherapy Department and was joined by Mr. Begg after his demobilistaion.

The Department of Health was represented by Mr. Herbertson, Accounts

Officer, succeeded by Mr. Iones: and Mr. Scott, Hospital Steward, succeeded by Mr. Whittle, Mr. Bowie was Stores Officer, and Mr. Middleton was

Mr. McKinnon was Head Gardener and supplied fruit and vegetables to the hospital kitchen. Mr. McMillan was Head Porter and Miss Paul was the House-Keeper in the mansion house

There was a Detachment based in the grounds under the command of Major Wolfe. A guard was maintained at the main entrance and members of staff were issued with a pass to display on being challenged.

There was always a shortage of resident medical staff and when large numbers of patients were being admitted all doctors had to turn to and help whether in a medical or surgical capacity.



Copy of Identity Card issued to Staff

At every University holiday period a group of Medical Students came to live in the mansion house and helped in the wards.

The situation as regards hursing staff appeared to be satisfactory, each ward having a Sister and trained nurses, with auxiliaries and Red Cross nurses. By December 1940 there were seventy nurses in the hospital. The nursing service in the EMS was known as the Civil Nursing Reserve.

Medical Superintendents after Dr. Gairdner were Dr. Macewen, Colonel Foster, Colonel Hanafin, and Colonel Lindsay. Mr. Sangster occasionally acted as deputy. Finally, Dr. Scoular came in 1952 as the Area Medical Superintendent.

Miss Foster, the first Matron, returned to Glasgow after the War. Subsequent Matrons were Miss Gillanders, Miss Bowness, Miss Wilson, Miss Spence, Mrs. Turner and Miss Geddes. In the present staffing structure there is no appointment either of Medical Superintendent or of Matron.



War Time

The first patient, an 18 year old Private Soldier in the Argyll and Sutherland Highlanders was admitted on 20 October 1940. He was stationed at the Dam Park in Ayr (Infantry Training Unit) and he came to hospital to have his tonsils removed. The first civilian patient was a ward-maid in the hospital; she was suffering from appendicitis and was admitted on 6 November 1940 for appendicectomy.

In the early days admissions were mainly "routine" from Units stationed in the area; and from early 1941 civilians living locally were also being admitted. This saved them a journey to Ayr, Kilmarnock or even Glasgow.

It was noted in the admission register if the patient's admission was due to "enemy action", and nearly all so documented in the early days came from the Merchant Navy. The frequency and nature of these admissions demonstrates the vital part played by this service and the hardships they had to endure. The names of their ships were occasionally recorded and amongst those were some well known including the "Empress of Britain", "Empress of Canada", "City of Benares" and the "Vingaland". There were not many patients from the Royal Navy, who were presumably treated in Royal Naval hospitals.

On 14 March 1941, the first civilians from Glasgow were admitted — being transferred mainly from the Victoria Infirmary. Between 14 March 1941 and 18 March 1941 there were 79 admissions — 24 of these described as due to enemy action. This followed the Clydebank Blitz, 13 and 14 March 1941.

In May 1941, between 6 and 10 May 1941 there were 112 admitted from Greenock Royal Infirmary, and of these 72 were due to enemy action. This was at the time of the Greenock Blitz.

On 24 April 1943, the first large "convoy" of servicemen arrived in Mauchline railway station, and on that day 292 patients were admitted to Ballochmyle. They had come mainly from the Mediterranean Zone, and many had been battle casualties. Others were suffering from medical conditions such as malaria, amoebic dysenterty, acute rheumatism, acute nephritis, duodenal ulcer, bronchitis, asthma, etc.

From July 1943, Italian soldiers were among those being admitted, coming from the Prisoner of War Camps in the area.

Following the Allied invasion of North West Europe in June 1944, this became the busiest period for the hospital. From July 1944 to July 1945, 300 to 500 patients were being admitted every month; in July 1944 there were 596 admissions; and in August 1944 no fewer than 962! Not all of these were servicemen or women, some being civilians evacuated from hospitals in London, Surrey and Hampshire; and in fact these civilians comprised 264 of those admitted in August. Many of these were elderly and some remained in Ballochmyle for a period of up to one year.

The ability of the hospital to cope with patients is demonstrated by observing that on some occasions a single ward did actually admit 40 patients in one day!

By August 1944, German Prisoners of War were being admitted in large numbers. On 23 July 1944, three casualties were admitted from Mauchline — members of Mauchline Home Guard — having been wounded in a grenade accident.

Up till late 1946 and early 1947 many service patients were still being admitted, but later in 1947 the hospital had largely taken on a civilian role. It remained under the control of the Department of Health for Scotland till the inauguration of the National Health Service on 5 July 1948 then coming under the Western Regional Hospital Board (Board of Management for Southern Ayrshire Hospitals).

By this time certain alterations had been made to convert the hospital to its peace-time use. The number of beds were reduced to 690 in 1948 (and further reduced to 380 by 1950) and an out-patient department was established, comprising a wide range of specialist clinics.

In 1948 there were 24 doctors and 103 nurses in the hospital, 55 in administrative and technical roles and 270 in manual and domestic work. In that year 3,600 patients were admitted to the wards.

Among the ex-service doctors to join the senior staff in the early post-war years were Mr Cleland, Surgeon; Dr Paterson, Physician; Dr de Soldenhoff, Gynaecologist; and Mr Gibson and Mr Mustarde, Plastic Surgeons.

In 1974, on the re-organisation of the NHS, Ballochmyle came under the Ayrshire and Arran Health Board (South Ayrshire District), as it remains today.

Admission of Patients

Many patients were admitted individually from local service units, or at the request of civilian doctors. Large numbers at one time, usually being transferred from the South, came by train to Mauchline railway station and were taken from there to the hospital by a fleet of ambulances or trucks.

One patient, who had been wounded in Northwest Europe, recalls arriving at Mauchline station with three other servicemen, and being met by two hospital porters with a van. On the way to the hospital they stopped at a local hostelry and the porters bought them a welcome pint of beer.

A mobile surgical unit was formed in the hospital and a team from the hospital staff was always on call ready to proceed to any major incident in the area.

In addition, the emergency services included a hospital train, which stood in a siding in Ayr railway station. It was under the care of Mr Donaldson, deputy steward; and it was Ballochmyle's responsibility to maintain the equipment, and to arrange for staffing on a stand-by basis.

Social Life

Many social functions were held in the hospital during war time, the most successful being the many dances held in the nurses' home when the music was supplied by Mr Pullar, with his record player and amplifier. Guests were frequently invited to the dances especially members of the Forces from nearby units. There were concerts, and the appearance of artistes such as Sir Harry Lauder and Robert Wilson, arranged by R D Hunter of Cunmock. There were film shows, and competitions such as beetle drives, housey-housey, etc. There were fetes and Field Days, and the hospital had a football team, badminton team and a tennis club. There was also a dramatic club.

Church services were held in the canteen on Sunday mornings for staff and patients; and clergymen from the area were at all times prepared to offer help and comfort.

Many local people visited the hospital and volunteers came to speak to the patients and write letters for them, while others organised library trolleys. It is said that the prestige of the hospital in the community was very high.

The idyllic setting of Ballochmyle was a perfect background for romance and affairs of the heart did blossom leading to several marriages between members of staff.

Plastic Surgery and Facio-Maxillary Unit

A unit specialising in Plastic Surgery and Jaw Injuries was planned for Ballochmyle and it became operational in December 1940. The surgeons in the hospital were joined by a team of dental surgeons; and they worked together under the surveillance of Sir Harold Gillies, who paid regular visits. In 1943, Mr Tough was appointed Surgeon in charge, and he took over control of the unit.

The unit was highly commended for its work, and in 1942 it was designated by the Royal Army Dental Corps as a centre of instruction for Officers in the Corps in Scottish and in Northern Commands. Each course, which lasted for two weeks, was attended by eight officers; and certain officers were then selected to undertake further training. Members of the hospital staff and visiting surgeons acted as lecturers; and instruction was given in the treatment of jaw injuries and in the making of splints for this purpose. During the years 1942 to 1945 a total of 200 officers attended the courses.

The unit continued to function in Ballochmyle for several years after the war, but eventually it was transferred to Canniesburn Hospital in 1967.

It is noteworthy that this unit gained for Ballochmyle an international reputation; as many doctors, who had trained here, were later to become plastic surgeons in numerous British and overseas centres.

Major Incidents

- 1. Crash of KLM Lockheed Constellation at Auchinweet Farm near Tarbolton in October 1948. Thirty-four bodies were recovered in the field and all were taken to the mortuary at Ballochmyle. Four surviving patients were admitted to Ballochmyle with horrific burns and all died within 24 hours.
- 2. Disaster at Knockshinnock Colliery, New Cumnock in September 1950. Thirteen were missing, and of the remaining 129, 98 were admitted to Ballochmyle suffering from contact with black damp and the effects of general exposure.
- 3. Crash of BOAC Stratocruiser at Prestwick Airport on Christmas Eve 1954. There were 28 dead, and all were taken to Ballochmyle mortuary. As in the KLM crash, identification of the victims was a major problem.
- 4. Explosion at Kames Colliery, Muirkirk in November 1957. The hospital staff was alerted and a ward was set aside and specially prepared for the reception of casualties. In the event only three of the survivors required to be admitted; and the bodies of the 17 miners killed were taken to the mortuary.
- 5. Blow-out of gas at Killoch Colliery, Ochiltree in March 1976. Twenty three were treated in the Casualty Department at Ballochmyle for various minor injuries and exposure to fire damp.



CASTLE COLLIERY Thirteen Men Presumed Dead.

116 SURVIVE 50 HOURS ENTOMBMENT

"One of the Greatest Rescue Operations in Mining History."

EPIC STORY OF SWIPT DECISIONS, UNSWERVING VALOUR AND TRADITIONAL FORTITUDE

NATIONAL DISASTER RELIEF FUND TO BE LAUNCHED.

TELEGRAM FROM THE KING AND QUEEN.

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We sell the full story in paragraph, and picture throughout this appropriate will go down for all time in the annals of our Second Court

Polish Unit

At the end of the second World War the demobilisation of the Polish Armed Forces in Britain commenced. Poland's borders were opened and two alternatives faced the Poles who found themselves in Britain — returning to Poland or putting down roots in their host country.

Repatriation and resettlement camps were established with many such camps is Scotland — Auchinleck, Doonfoot, Stewarton, Mauchline and Haddington were just a few. In addition there were many Poles living in Glasgow and the surrounding area.

The Department of Health decided to open a Polish Unit in Ballochmyle Hospital with the assistance of certain influential Poles. The Unit was to provide hospital treatment, mainly for Poles who were experiencing language difficulties elsewhere. The Unit was accommodated in Blocks C and D in Ballochmyle.

The wards in general were up to standard and well equipped. There were however, two exceptions. The heating system in Block D consisted of coal-fired stoves in the centre of the ward and were kept fuelled by an attendant. The other disadvantage was experienced by the surgical patients in cold and rainy weather when they had endure a trip on trolleys in the open air to the operating theatre in Block C. Otherwise the conditions were as good as could be desired.

Ten Polish doctors formed the medical staff, seven of whom were permanent and lived in the annexe of the mansion house, while the remaining three travelled weekly or as required from Edinburgh and acted in a Consultant capacity. All the doctors, apart from two, came from the former Paderewski Hospital in Edinburgh. Dr. Kraszewski and Dr. Janikiewicz came from England having recently returned to the UK from service in the Polish Corps in Italy.

The nursing staff was organised by Mrs. Dobranska, a lady actively involved in polish welfare. She had the task of recruiting staff from the repatriation and resettlement camps, and Miss Gillanders, Matron at Ballochmyle, ultimately selected those to be employed in the Unit.

The Unit was opened in April 1947 and was under the control of Colonel Hanafin and Miss Gillanders. All ancillary tests such as x-ray, laboratory investigations, etc., were carried out by existing departments in the main hospital, which also provided medical and surgical supplies.

With the passage of time the camps diminished in number. Many Poles found employment and as a result communicating in English became easier

for them. Consequently, the number of wards was reduced from four to two, one male surgical/medical ward, and one female medical/surgical/gynaecology ward. Eventually, this was further reduced to one male ward, in what is presently Ward 6 in the main hospital, and the Polish Unit was finally closed in January 1952.

The Polish staff gradually became smaller in number due to these changes and some emigrated to USA, Canada and Africa. One of the doctors, Dr. Mensehik, became a lecturer in Canada and later received the Professorial Chair in Anatomy in Washington University. Others remained in Britain, many becoming general practitioners. Two of the doctors remained in employment in Scottish hospitals, Dr. Kraszewski as a Urologist in Hairmyres Hospital, and Dr. Janikiewicz as a Physician in Ballochmyle. One of the theatre assistants, Michael Kent, transferred to the theatre in the main hospital, and later became a Technologist in the field of surgical appliances.

Ballochmyle Hospital Nursing Service 1940 - 1990

MATRONS IN THE HOSPITAL:

Miss A. Foster	(1940-1946),	Miss J. Gillanders	(1946-1959)
Miss J. Bowness	(1959-1961),	Miss M. Wilson	(1961-1963)
Miss A. Spence	(1963-1970)	Mrs. M. Turner	(1970-1982).
	Mice A Caddas	(1002 1007)	

ASSISTANT MATRONS:

Miss M. MacKinlay, Miss A. Buchanan, Miss E. McFarlane, Miss L. Gordon, Mrs. V. Coleman, Mr. H. Stevenson.

Miss Bowness and Miss Spence, prior to appointment as Matron, were Principal Nurse Tutors to the Ballochmyle Training School. Miss Spence became the first Chief Nursing Officer in South Ayrshire when radical changes in nurse management were implemented in keeping with the recommendations of the Salmon Report in 1970. Miss Spence was also the last of the traditional Matrons of the hospital.

From 1970, the title of Matron became that of Senior Nursing Officer and latterly Assistant Director of Nursing Services, with sole responsibility (supported by 7 senior nurses — Nursing Officers, now known as Clinical Nurse Managers) for the management of the nursing services of the hospital.

Ward Sisters/Charge Nurses continue to be responsible for ensuring a high standard of patient care is maintained over a 24-hour period. They continue to participate in student nurse education at ward level. Trends in patient care have changed from being task orientated to total patient care. Each patient on admission is allocated to a "Primary Nurse", who following discussion with the patient arranges a care plan which covers the patient's stay in hospital. The "Primary Nurse" has staff allocated to her who help with the delivery of the agreed care plan.

On-going education of qualified staff is encouraged by the Clinical Nurse Managers up to diploma/degree level.



Opening of Training School

School of Nursing

After the War a nursing school was set up and the first classes started on I February 1947 with an intake of 55 students. Of these, 22 students did an intensive one-year course, the remainder doing the conventional three-year training. The first tutor was Miss Peterkin. Many students came from within the area of the hospital, but through the years there were others from overseas including some from Germany, St. Helena, Seychelles, Mauritius, the West India, Pakistan, Malaysia and Zambia. The training programme was that laid down by the General Nursing Council for Scotland, later to become the National Board for Scotland. No formal educational qualifications were necessary, entrants to nurse training being selected by the Matron and Principal Tutor.

Senior medical staff participated in the senior student lecture programme and were equally interested in the outcome of the final examination results. All practical experience was gained within the wards and departments in the hospital, and attendance at lectures was compulsory. Initially students attended lectures in their off-duty time, even if they were on night-duty. This system was eventually replaced by the block system of lectures, the students attending during working hours. Success in the block and state examinations was essential for the student to progress to the next stage of training and be presented for the next appropriate state examination. Prizegiving and the presentation of the hospital certificate and badge was an annual event, and these were awarded only to students who had successfully completed the training programme. The first prizegiving ceremony was held in 1948.

The Ballochmyle Training School was disbanded in 1970 when there was an amalgamation of the three training schools in south Ayrshire, which became the South Ayrshire School of Nursing, based in Ayr. This later moved to the new Area College of Nursing and Midwifery at Crosshouse Hospital. Student nurses are still being trained at Ballochmyle for part of their clinical experience, but 26 weeks of the training programme are spent outwith the hospital.

The Classroom in the school has also been used by the medical staff for educational meetings. The meetings are normally conducted by members of staff, who give updates on their speciality. Guest speakers are occasionally invited and their contributions have also been much appreciated. A lively discussion is always provoked, and it has always been the duty of the Chairman to act as hatchet-man in order to bring the meeting to a close on time.

The hospital has also played its part in hosting post-graduate meetings for General Practitioners. These meetings have been very popular and have proved to be of immense value; not only from an educational point of view but also in fostering the excellent relationship which exists between local practitioners and the hospital staff.



First Intake of Student Nurses

The National Health Service Arrives ...

The historic date of 5 July 1948 and the formal inception of the National Health Service brought no remarkable transformation in the work of the hospital and its staff.

In the 1946 Scottish Hospital Survey on the Western Region, Professor C.F.W. Illingworth and Professor J.M. Mackintosh had commented that the EMS hutted hospitals at Ballochmyle, Killearn and Law Junction would be expected to take a permanent place in the regional hospital service. Indeed, their valuable part in the hospital care of the civilian population was already noted. In particular, these hospitals were providing accommodation for certain key services which could not readily be housed in the city hospitals. The specific instance of the unit for plastic surgery at Ballochmyle was noted.

At that time there was a notional complement of 1268 beds, which it is recorded equated to 888 beds by peace-time standards. This assumed 40 beds to each ward — double the present bed allocations of 20!! The hospital currently has 330 beds.

The Administrative Block contained the Laboratory and the Dispensary. There were 4 ward blocks (now A,B,C,D), each of 8 wards with 26 beds per ward. In 3 of the blocks were operating theatres, 2 of which contained X-ray units. All equipment was recorded as modern and adequate.

It was the clear intention to regard Ballochmyle as the central country hospital for Ayrshire for the admission of general cases which would benefit by treatment in country surroundings. It would work in conjunction with Kilmarnock Infirmary and Ayr County Hospital. It was regarded as fit for general hospital purposes for at least 15 years. There can be no denying it has more than surpassed its identified role in this its 50th year.

In 1948 the hospital was transferred from the Department of Health in Edinburgh to the Western Regional Hospital Board in Glasgow as one of the 7 Scottish territorial hospitals. Accommodation was provided for 692 patients, with the four clinical blocks being used as follows:—

Surgery and Medicine

Orthopaedics

Physiotherapy and Remedial

4 wards for Polish patients for Surgery and Medicine

Special Units included Plastic Surgery and Jaw Injuries, Ear Nose and Throat, Ophthalmic and Gynaecology.

By January 1950 the hospital had been rationalised to 388 beds, with all inpatients being accommodated in A and B Blocks. The present situation reflects this original pattern, although in the intervening years C block has been utilised for patient care.



students from Overseas

ADMISSIONS

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The 50s and the Years Roll On

The advance of medical and pharmacological science, and its harnessing by the National Health Service, had important consequences for the hospital. Within a remarkably short period of years the very large hospital provision designated for infectious disease, tuberculosis and fevers became to a significant extent surplus to requirements. Most of these institutions were situated in or near the larger towns of the county — Kilmarnock (Kirklandside and Torrance House), Ayr (Heathfield) and Irvine (Ayrshire Central). Given the ready ease of access by patients and relatives, this vacant accommodation was adapted and used to support the general hospitals in Ayr and Kilmarnock — thus supplanting the role envisaged for Ballochmyle. Significantly, the developments in chest and respiratory/medicine, which could have been easily incorporated in a "county general hospital", were concentrated in Ayrshire Central and Heathfield Hospitals.

The recognition of the needs of the elderly and their requirements for hospital care was signalled in December 1957 when the first geriatric wards were brought into use. Ballochmyle's reputation for caring was already well established and would be enhanced over the years in this worthwhile but demanding specialty. The development of geriatric care was further enhanced in 1967 following the transfer of the Plastic Surgery Unit to Canniesburn Hospital, Glasgow, when further wards were opened in the vacated accommodation. At this time significant development also took place in the Urology Service, which has continued to provide its Area-wide service.

This contraction was accompanied by a rationalisation of the estate. Over successive years significant disposals were made to neighbouring landowners and Ballochmyle Golf Club, and in 1964 an Appropriation Order in favour of the Forestry Commission of 60 acres of woodland was implemented.

The popularity of the motor car and the difficulties of access and safety were recognised in 1957 when the main access to the hospital via the West Drive was replaced by the existing roadway. The West Drive was finally closed in 1959.

The rural nature of the district continued to be reflected in the business of the governing authority. In 1968, at the request of the Sorn Parish Association, approval was given to patrols being manned at the East Lodge and drive to prevent unauthorised (non-paying!!) access to the Show Field where the highlight of the farming year, the Catrine Agricultural Show, was held. Again in 1975 a plague of rabbits was visiting the estate. The solution?? Not pesticides, but the traditional engagement of a man, his dogs and his ferrets.

The retrenchment in direct patient care was largely compensated for in the 60s and 70s by the rapid expansion of the clinical support services. The Laboratory was expanded to provide a wide range of pathology, haematology and bio-chemistry services to the whole of the Area including the county's General Practitioners.

These Laboratory service were transferred in 1982 to Crosshouse Hospital, Kilmarnock, with the only remaining local provision in the former Biochemistry Block.

Similarly, the pharmacy was developed to support all the hospitals in South Ayrshire in both procurement and manufacturing activity. It continues this vital role in clinical pharmacy, occuping more than half of D Block.

The decision in the mid-60s by the Scottish Home and Health Department to develop the concept of District General Hospitals in both north and south Ayrshire meant inevitably a residual role for Ballochmyle. The well-documented delays in the completion of the North Ayrshire District General Hospital (Crosshouse) meant it was 1982 before the full impact was felt. In addition to medical and general surgical transfers, the entire provision for the Ear, Nose and Throat service was removed. This had followed the closure of

the Ophthalmology Unit in 1974, when inpatient eye services were finally concentrated at Heathfield Hospital, Ayr.

The restriction of the Accident and Emergency service in 1982 recognised the new situation, although it took until 1987 for formal closure of the Casualty Unit to be publicly declared.

With the space made available by transfers, the opportunity was taken to upgrade patient amenities and staff environment.

Bed numbers in wards were reduced, day rooms provided and sanitary and treatment facilities improved. Despite these improvements the end of the 80s saw doubt as to the hospital's future.



TODAY AND FUTURE

In 1987 the Board undertook a strategic review of its services, and in particular the future pattern of its acute and general hospital provision. Its conclusion the Ballochmyle Hospital was assured a life of not less than ten years was warmly welcomed by staff and the local community. This decision allowed the immediate commencement of a number of major schemes of improvement which the continuing uncertainty had kept in abeyance. These projects included.

1. Rationalisation of Administrative Accommodation

£47,000 April 1987

2. Improvement to Theatre II for Urology and Orthopaedic Surgery

£60,000 August 1987

3. Renovation and Re-Equipping of X-Ray I

£380,000 March 1988

4. Creation of Endoscopy Unit, Ward 2

£71,000 (including equipment) June 1988

5. Rationalisation of Laboratory Suite and Mortuary

£20,000 April 1989

6. Redevelopment of Theatre I for general, vascular, oral and plastic surgery

£420,000 October 1989

7. Relocation of Gamma Camera/Nuclear Medicine

£50,000 December 1989

8. Extension and Upgrading of Urology Wards, etc.

£413,000 June 1990 In addition, over the last three years a massive investment of £450,000 has been made to upgrade the building fabric, engineering and electrical services. These major upgradings have included environmental works, road widening, etc., and have transformed the appearance of the whole estate. It is a matter of great regret that no practical use can be found for the original Mansion House, and regretably steps are under way to obtain permission from the Secretary of State for its demolition. It is estimated that a sum in excess of £1 million would need to be spent to secure the "Big Hoose". The staff generally feel that if choices have to be made, investment should be targeted at patient services. From the activity previously referred to, this has been achieved.

It is satisfying to note that a hoped-for benefit of the securing of the hospital's future has been realised. Recruitment, particularly of medical, nursing and para-medical staff, has improved tremendously. There are now few vacancies. Combined with the impetus of additional specialists in general medicine, orthopaedics, urology, general medicine, radiology and anaesthesia, and the improved facilities, the future at least in the medium term is bright.

Planned developments in rehabilitation and out-patient services underline this optimism.

Ballochmyle will continue to make a major contribution to hospital and specialist services in Ayrshire and beyond, and most importantly maintain that great tradition of caring established 50 years ago.



Vascular Surgery

APPENDIX I

Previous Members of Staff In Post War Years

Medicine

Dr A Agnew, Dr H Paterson, Dr D Birrell, Dr I Wilson, Dr S Janikiewicz, Dr G Provan, Dr A Slessor, Dr H May, Dr R Murdoch, Dr J Morrow, Dr B Groden.

Surgery

Mr Å Sangster, Mr G Cleland, Mr G Mackay, Mr J Morton, Mr A Murison, Mr N MacMillan, Mr W Young, Mr G Smillie, Mr J Moore, Mr J Thomson, Mr T Hasan, Mr J Gallowav.

Plastic Surgery

Mr J Tough, Mr T Gibson, Mr J Mustarde, Mr I MacIntyre, Mr I McGregor, Mr M Webster.

Oral Surgery

Mr S Dobbie, Mr I Allan, Mr T Kennedy, Dr S Plumpton, Mr W Smith, Mr W Telfer.

Gynaecology

Dr R de Soldenhoff, Dr G Forsyth, Dr A Ross, Dr D Smith, Dr D MacKay, Dr E Campbell, Dr M Smith, Dr E McDonald, Dr E Melrose, Dr C Baird.

Urology

Mr W Kraszewski, Mr Chapman, Mr W McIntyre, Mr I MacLaughlin.

Orthopaedic Surgery

Mr R Traquair, Mr R Simpson, Mr G Watt, Mr J McCardel.

Ophthalmology

Dr J Tennant, Dr J Lindsay, Dr W Kinnear, Dr Harrington, Dr H Cameron, Dr D Nixseaman.

E.N.T.

Dr F Walker, Dr C Donaldson, Dr A Stewart, Dr M Gibb.

Geriatrics

Dr D Grant, Dr M Richmond, Dr W MacDermid, Dr H Buchanan, Dr H Mackie.

Radiology

Dr A Mackie, Dr A Reed, Dr J Nelson, Mrs B Campbell.

Anaesthetics

Dr M Richmond, Dr J Crawford, Dr R Kelly, Dr M Blackwood, Dr D McAlpin,

Dr J Turner, Dr A Kitchen, Dr H Ramsay, Dr G McLellan, Dr J Duthie, Dr K Schofflin, Dr N Peterkin, Dr T Baillie, Dr W Norris, Dr H Walter

Dr K Schofflin, Dr N Peterkin, Dr I Baillie, Dr W Norris, Dr H Walter, Dr T McComb, Dr G Wilson, Dr L Walker, Dr R Lewis, Dr J Burgovne,

Dr T McComb, Dr G Wilson, Dr L Walker, Dr R Lewis, Dr J Burgoyne
Dr S Menon, Dr E France, Dr S Kothari, Dr L Smith.

Laboratory Departments

Dr Shearer, Dr Begbie, Dr Potts, Dr J Milne, Dr G Roberts, Dr J Stewart, Dr W Wallace, Dr N Cunningham, Dr W Nicoll, Dr C Nisbet, Dr G Erskine,

Dr P Vosylius, Dr H Auld.

Miss K MacKay, Mrs I Chisholm, Mr J Fitzpatrick, Dr J Emslie, Dr C Ross Mr P Norris, Mr A Smith, Mr H Caldwell, Mr J Park, Mr L Marcantonio, Mr J Robertson.

Chest Clinic

Dr J Boýd, Dr J Duerdin, Dr L Hardie, Dr W MacDermid, Dr B Stewart.

Dermatology Clinic

Dr Ferguson Smith, Dr T Cochrane, Dr A Tullet

Neurology Clinic

Dr J Gaylor, Dr I Melville, Dr M Thomas

Psychiatry Clinic

Dr J Buchanan, Dr H Wallace, Dr M Inglis, Dr R de Zoysa

Radio-therapy Clinic

Dr Morrison, Dr J Glennie, Dr H Yosef.

Staff Medical Officer

Dr D Rawson.

Administration

Dr G Scoular, Dr M Scott.

Pharmacist

Mr J Pullar, Mr K Haughan

Physiotherapy

Mr J Begg

Welfare Officer

Miss F Russell, Miss I Chapman

(Apologies if some names are not included — list compiled from memory)

APPENDIX II

Senior Staff - 1990 — Ballochmyle Hospital

Division of Surgery

Mr A L Forster Mr C J Simpson Mr G Stewart Mr A V Krishnan Mr B Ghosh

Division of Urology

Mr G H Foster Mr G S Watson Mr S P Bramwell

Division of Orthopaedics

Mr J D Brown Mr P McNally Mr P S Rae Mr A Muirhead

Division of Medicine
Dr J C Ferguson
Dr P M G Reynolds

Dr J A Elliott Dr I D R Rose

Division of Geriatric Medicine

Dr L Martin Dr G Duncan

Division of Anaesthesia

Dr W H Duthie
Dr D J Eveleigh
Dr I R MacDiarmid
Dr P Wilson
Dr J E Howie
Dr T Miller
Dr A Michie
Dr K MacKenzie
Dr C Thompson

Oral Surgery
Mr N Merchant

Plastic Surgery Mr I Boorman

Psychiatry Clinic Dr K Murray

Dr C Aryiku Dr K Phillips <u>E.N.T.</u> Mr R Singh

Mr R Singh Mr I McClure Consultant Surgeon Consultant Surgeon Consultant Surgeon Associate Specialist Associate Specialist

Consultant Urologist Consultant Urologist Consultant Urologist

Consultant Orthopaedic Surgeon Consultant Orthopaedic Surgeon Consultant Orthopaedic Surgeon

Consultant Orthopaedic Surgeon

Consultant Physician Consultant Physician Consultant Physician Consultant Physician

Consultant Geriatrician Consultant Geriatrician

Consultant Anaesthetist Consultant Anaesthetist

Consultant Oral Surgeon

Consultant Plastic Surgeon

Consultant Psychiatrist Consultant Psychiatrist Consultant Psychiatrist

Consultant E.N.T. Surgeon Consultant E.N.T. Surgeon Gynaecological & Ante Natal Clinic

Dr D H Gibson Consultant Gynaecologist

Opthalmology Clinic
Dr R W W Paterson Consultant Opthamo

Dr R W W Paterson Consultant Opthamologist
Dr P Shah Consultant Opthalmologist

Radiotherapy Clinic
Dr A Harnett Consultant Radiotherapist

Cardiac Clinic

Dr J Reid Consultant Cardiologist

Renal Clinic
Dr D McKay Consultant Renal Physician

Nursing

Mr A Graham Clinical Nurse Manager, Medical Unit

Mrs M Lyons Clinical Nurse Manager, Surgical Unit
Pharmacy

Mrs M S Caldwell Principal Pharmacist

Remedial and Rehabilitation

Mrs C M Erskine Head Occupational Therapist
Mrs S McFadzean Superintendent Physiotherap
Mrs N Nicoletti Chief Speech Therapist
Mr A Smith Chief Chiropodist

Mrs K Thomson Senior Dietitian

Diagnostic Radiology

Dr M D Greenhill Consultant Radiologist
Dr J D Russell Consultant Radiologist
Dr G McLaughlin Consultant Radiologist
Dr C R Murch Consultant Radiologist
Dr D Rawlings Consultant Radiologist

Miss M Mundell Superintendent Radiographe
Nuclear Medicine

Dr J C Ferguson Consultant Physician Dr M J Sik Principal Physicist

Cardiology
Mrs C A MacGregor
Senior Chief Physiological Measurement
Technician

 Management
 Unit General Manager

 Mr D McNeill
 Unit General Manager

 Mr G McLachlan
 Assistant Unit General Manager

 Mr J K Brown
 Patient Services Manager

 Mrs M Geddes
 Hotel Services Manger

 Estates and Works

 Mr P McGlone
 Unit Works Manger

 Mr D Houliston
 Senior Works Officer

 Mr D McPherson
 Senior Works Officer

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