Introduction

Survey of Hospital Archives in Ireland
Funded by the Wellcome Trust
Undertaken by the National Archives
(sanctioned by the Office of the Director General of the Health Service Executive)

The National Survey of Hospital Archives (hereafter “the survey”) was undertaken by the National Archives between May 2014 and December 2015 with the objective of establishing the location, extent, content and condition of the archives of hospitals in the Republic of Ireland. The survey was made possible following a research resources in medical history award grant of €145,051 from the Wellcome Trust to the National Archives.

Academics and archivists had long expressed concerns with regard to the permanent preservation of medical and hospital records and their availability for research purposes. A limited survey of public hospital records was carried out in 1995 in the wider context of a survey of local authority archives and this survey confirmed the wealth of hospital records held by individual institutions. In 2012, a group consisting of representatives of the National Archives, University College Cork and the University of Limerick, with support from other academic institutions, sought to advance a mutual goal of archival preservation and access. In 2013, the National Archives submitted an application to the Wellcome Trust for funding to undertake a scoping survey of such records.

It was envisaged that the survey findings and recommendations would provide a basis for the development of policy on permanent preservation and access, and facilitate the formulation of a strategy to ensure the transfer of all records of permanent value to the custody of archival institutions. At present, the records of hospital and healthcare institutions are not protected by law. The National Archives Act, 1986, while making provision for preserving the records of central government, did not include hospital records within its scope. There is no obligation on the part of hospitals to transfer records to archival institutions and records are consequently vulnerable to loss or damage. There is no statutory provision permitting access for research purposes.

Approximately 200 locations where records were kept were initially identified by the project team and sanction granted by the Office of the Director General of the Health Service Executive to proceed with the work of surveying. A senior member of National Archives staff, Brian Donnelly; with extensive surveying experience, assisted by a project administrator, Hilary O’Callaghan, systematically visited each location in order to collect data for the report. These findings, including the survey methodology, are presented in summary form in chapters 3 and 4 of this report. A conservation professional visited a sample of 7 locations to undertake condition assessments of the records in their current storage and make recommendations for any remedial action required.

An academic advisory board was formed of interested and committed academics consisting of representatives of UCC, UL, UCD and Glasgow Caledonian University. This advisory group provided support and expertise from an academic users’ point of view and have compiled recommendations to accompany this report.

The survey project committee would like to acknowledge the support and co-operation of the Wellcome Trust, the Health Service Executive and the Academic Advisory Board.

The members of the Academic Advisory Board were;
Dr Ciara Breathnach, UL
Dr Catherine Cox, UCD
Dr Laurence M. Geary, UCC
Professor Oonagh Walsh, Glasgow Caledonian University
Ms Harriet Wheelock, Keeper of Collections, RCPI

The successful completion of this survey would not have been possible without the staff in the hospitals and healthcare institutions, archives and libraries who gave generously of their time and knowledge. It is appropriate that they receive due acknowledgement, not only for their contribution to the survey work, but also for their dedication to the preservation of the records in their care.

Brian Donnelly, Surveyor
Tom Quinlan, Keeper National Archives
Hilary O’Callaghan, Survey Administrator
Helen Hewson, Keeper, National Archives
Introduction
The records generated by an organisation in the course of its operation contain information. This information serves as evidence of decisions made and functions and activities performed, facilitating good governance and accountability, preserving corporate memory and fulfilling the need for organisational knowledge.

The records of hospitals and healthcare institutions comprise those generated by the discharge of administrative functions and the provision of medical care. As such they are not only of value to their creating organisations in answering corporate information needs and enabling legal compliance, but are of direct relevance to meeting the information needs of medical staff in the delivery of health care and also to the individuals in receipt of medical care.

Given the nature of the functions of hospital and healthcare institutions, there are therefore compelling arguments from a corporate and medical perspective for managing and preserving records, but also from the perspective of the individuals who avail of medical care.

An integral element in the management of records is the identification and retention of records of historic value for permanent preservation as archives. Preserving historic records ensures ongoing availability

- to the creating organisation or successor/s as a source of corporate information and evidence;
- to medical professionals as a source of clinical information and to serve medical research purposes; and
- to the wider community as a means of safeguarding individual information needs and for historical research.

Recommendation 1
Legal Protection and Mandate to Preserve Hospital and Healthcare Records

Government must ensure that full legal protection is afforded to the records of hospitals and healthcare institutions by means of primary legislation to provide for the preservation of records of historic value, for transfer to archival custody after a designated period and for access to meet the information needs of individuals and for historical research.

Such legislative provision must assign responsibility and confer the necessary mandate for

- the development of a preservation policy to give effect to this legal protection of historic records;
- the development of a strategic plan for the transfer to archival custody of historic records worthy of preservation; and
- the formulation of a policy on access to historic records transferred to archival custody.

Opportunity should be taken in the drafting of the Health Information and Patient Safety Bill to include specific provision for preservation of historic records.

Recommendation 2
Urgent strategic measures required

Given the generally vulnerable position and fragile condition of surviving historic hospital and healthcare records, measures must be taken as soon as possible to secure their preservation. Measures must include

- the assignment of responsibility at national level for the function of preserving historic records;
- as a practical interim measure, the adoption of a voluntary code of practice by hospitals and archival institutions governing transfer, preservation and access;
- the allocation of appropriate facilities for the proper accommodation of historic records; and
- the allocation of dedicated resources, both financial and human, to support the function of preserving historic records.

Recommendations of the Survey
Recommendation 3
Immediate Practical Actions

The task of preserving historic records must commence initially with ensuring the proper management of records pre-dating 1970. Actions in support of this should be carried out in three phases:

1. Issuing of circular letter to all hospital and healthcare institutions to
   a. alert them to the importance of historic records,
   b. prohibit destruction of any pre-1970 records; and
   c. ensure that professional archival appraisal is undertaken on records created after 1970 before destruction.

2. Engaging the services of a recognised archival professional in the field of healthcare records to work with the Health Service Executive’s National Healthcare Records Management Advisory Group in revision of the current National Hospital’s Office Code of Practice for Healthcare Records Management, Part 5: Retention and Disposal Schedule.

3. Implementing arrangements for the accommodation of historic records (pre-1970) where there is no provision at present. The use of temporary accommodation can be considered pending the provision of permanent accommodation. Archives should not remain in conditions which present an immediate threat to their survival.

4. Addressing the preservation and conservation needs of specific series as identified by the survey.

5. Implementing arrangements for the preservation of records post-dating 1970 to ensure that records worthy of permanent preservation are identified for transfer to archival custody.

Recommendation 4
Permanent Accommodation

Appropriate permanent accommodation must be provided for historic records. This accommodation must meet internationally recognised standards for the administration and storage of archives.

Recommendation 5
Custody and Access

1. Hospital archives should be in the permanent custody of designated professional archival institutions as these are the only bodies which can provide the sustainable conditions needed for permanent preservation, security and intellectual control. The archival institution can be local or national, but must be administered in conformity with accepted standards, including standards for storage and archival description.

2. A national policy on access to hospital archives must be developed, derived from primary legislation and based on internationally accepted best practice models.

Recommendation 6
Role for National Archives and National Archives Advisory Council

The National Archives and National Archives Advisory Council should, as far as resources permit, provide guidance to the responsible authorities in relation to the implementation of a planned approach to the retention, storage and protection of records of hospital and healthcare institutions and the management of access.
The Academic Advisory Board to the Survey of Hospital Records in Ireland

1. The Significance of Hospital Records and those of other Healthcare Institutions

The history of medicine in Ireland, which was a relatively neglected subject in the past, has attracted increased scholarly interest in recent years, and is now a vibrant research area, one that intersects with other lines of historical inquiry, including social history and welfare history. The subject embraces and directly underpins the history of nursing, of insanity and the insane, of institutions, including the evolution and development of hospitals and medical facilities in workhouses. It also includes the professionalisation of medicine, from the traditional tripartite division of physicians, surgeons and apothecaries to the medical specialisms that began to emerge at the end of the nineteenth century and increasingly thereafter.

The records generated by hospitals and other healthcare institutions constitute the building blocks that scholars need and use to compile their histories, to give context, nuance and substance to their work. These records are historians’ primary sources, and are of enormous historical value. Without the historical record, there is no history.

2. Concerns

As historians, we are concerned about the preservation of, and provision of access to historic records. Freedom of Information legislation is often currently deployed on an ad hoc basis by the relevant authority to govern access to historic hospital records. In some cases there is restricted access to these records, in others it is entirely prohibited. As research-active scholars working and publishing on the history of medicine, we are particularly perturbed about

- The absence of statutory provision for the preservation of the records of hospitals and other healthcare institutions in Ireland, which threatens the survival of many collections in the long term.
- The fragility of surviving historic records, many of which are unique and irreplaceable, and the need to ensure that they are ultimately preserved in proper archival conditions.
- The absence of clear legal guidelines surrounding research access to hospital and other health-related records.

3. Recommendations

- Legislation is urgently required for the protection, preservation, and conservation of historic medical and health-related records under the auspices of the National Archives of Ireland. Within that legislation, provision should be made for proper storage, adequate resources in terms of finance and personnel, and access by scholars and the wider public for research purposes.
- We note that intervention will be needed in the short term to assist in the preservation of hospital records which are in immediate danger. We hope that this intervention, which has been mainly conducted in the past by the National Archives of Ireland and has ensured the preservation of many collections which might otherwise have been destroyed, will continue for the present.
- As historians, we are acutely aware of the importance of safeguarding and treasuring the unique records of our past, and, accordingly, the Academic Advisory Group endorses unreservedly the recommendations made in the report of the Wellcome Trust-National Archives of Ireland Survey of Irish Hospital Records.

Dr Ciara Breathnach, University of Limerick
Dr Laurence Geary, University College Cork, Chair, Academic Advisory Board.
The early 18th century saw the establishment of voluntary hospitals by philanthropists, mainly in Dublin but also in the larger provincial towns. Jervis Street hospital (the Charitable Infirmary), founded in 1718, was the first voluntary hospital in Ireland, and would, like Dr. Steeven’s Hospital (founded in 1733) and Mercer’s (founded 1734), survive into the late 20th century.

The 18th century also saw the establishment of specialist hospitals, most of them voluntary, such as the Rotunda Lying-In Hospital, founded in 1745, St. Patrick’s Hospital for mental illness, founded in 1746, Simpson’s Hospital, erected in 1779 for patients with gout or blindness, and the Westmoreland Lock Hospital, for the treatment of venereal disease, which opened in 1792. A modern public health service at county level began in 1765 when a parliamentary enactment provided for the erection and support of an infirmary for each county in Ireland and also permitted support for several existing hospitals, mainly in Dublin and Cork, out of public funds. The county infirmaries were to be maintained by grand jury presentments, parliamentary grants and local subscriptions. The grand juries were groups of landowners who were called together by the High Sheriff in each county twice a year to perform legal and local administrative functions. While initially many of these infirmaries were crude and ill managed, they represented the genesis of a public health service at county level.

In 1772 legislation was introduced to establish houses of industry in every county and county borough in Ireland to provide “an asylum for the aged, infirm, and industrious, and a bridewell for the profligate, idle and refractory”. Such institutions were eventually constructed in Clonmel, Cork, Dublin, Ennis, Kilkenny, Limerick, Waterford and Wexford. The Dublin House of Industry, a precursor of the workhouses of the 19th century, was founded in 1772. This institution became in time a vast concern, providing hospitals for the sick, an asylum for children, bridewells, penitentiaries for women and young criminals, a house of industry for vagrants, and cells for lunatics. From it evolved the house of industry hospitals – the Richmond, Whitworth and Hardwicke - and it played a major role in establishing the first and largest of the public lunatic asylums – the Richmond Lunatic Asylum – which opened for patients in 1814. Following the report of the Committee on the Lunatic Poor in 1817, the Lord Lieutenant was enabled by statute to build asylums where he considered necessary and, over the next half century, a well-developed mental health infrastructure was in place. By 1871, twenty two asylums were being financially supported by the grand juries. In 1850 a central asylum “for insane persons charged with offences in Ireland” was opened in Dundrum. This institution, the first criminal lunatic asylum in these islands, was under the direct control of the Lord Lieutenant who appointed the staff and made regulations for its management.

A few dispensaries were supported by voluntary subscriptions in several of the larger towns and cities from the late 18th century, but it was not until 1805 that grand juries were authorised to give grants to dispensaries in rural areas. By the early 1830s, there were 450 dispensaries throughout the country, administered by committees of management and supported partly by subscriptions and partly by grand jury grants. There were fewer dispensaries in poorer areas, where voluntary contributions were wanting, and where it was difficult to raise enough money to start them. Inadequate as many of these dispensaries were, they represented the first steps towards domiciliary medical treatment of the rural population.

Epidemic disease was a major impetus in the development of a medical infrastructure. Typhus was a major scourge in Ireland in the early 19th century and, while several fever hospitals had been established in the larger towns in the late 18th century, it was not until 1807 that legislation was
passed to encourage their construction throughout the country. A fever epidemic of unprecedented proportions raged in Ireland between 1816 and 1819. As a response to this, under an 1818 Act, local boards of health could be established, supported partly by grand juries, which had extensive powers to combat disease. Grand juries were empowered to make presentments equal to twice the amount raised by private subscription to build fever hospitals. In 1819, legislation enabled officers of health to be appointed in parishes and a parish health tax could be levied. The establishment of the Central Board of Health in 1820 marked a major step in the centralisation of medical relief and local boards of health were to play a major role in combating epidemics over the following decades. The Central Board of Health collected statistics about local health conditions, advised where local boards of health should be established and when grants to hospitals should be made. When cholera broke out in Ireland in March 1832, the Central Board of Health, renamed the Cholera Board for the duration of the epidemic, supervised measures to combat the disease which included the establishment of local boards of health. Dublin hospitals like the Meath were at the forefront of the fight against infectious disease from the 1820s and introduced new methods of bedside clinical training to the English speaking world. The Meath Hospital received international recognition in the early 19th century due to the innovative teaching methods and research carried out by its physicians, Robert Graves and William Stokes. The latter had survived an attack of typhus in 1827 and identified the first case of cholera in Ireland in 1832. This new approach to clinical training had originated on the continent and its introduction into the Meath Hospital heralded what has been described as the heroic age of the Irish School of Medicine. The voluntary hospital infrastructure continued to expand during the 19th century and in the decades following Catholic Emancipation in 1829 many Catholic religious orders became involved in founding hospitals. By the late 1830s there were in existence five city or town infirmaries, thirty-one county infirmaries and thirty eight fever hospitals.

The enactment of the Irish Poor Law of 1838 was to have a dramatic effect on the provision of public health services for the rest of the 19th century. The country was divided into around one hundred and fifty poor law unions, each with a workhouse at its centre. The majority of these buildings were commenced between 1839 and 1840 and completed within three or four years, a remarkable achievement in the early 19th century. The workhouses were established to provide shelter and food for the poor and destitute. Famine conditions resulted in outbreaks of infectious diseases, particularly cholera and typhus, and the workhouses were forced to devote part of their accommodation to the sick poor.

The structure of the poor law system, being modern and efficient and more easily subject to central control, was adapted on nearly all occasions where a new local function was created or an old one modified. The Medical Charities Act of 1851 led to the modernisation and extension of the old grand jury dispensary network under the poor law boards of guardians, who ran the workhouses, and made a domiciliary medical service available to large sections of the population for the first time. By 1852, every poor law union had been divided into a number of dispensary districts, each with a dispensary and medical officer. Patients had to apply to a poor law guardian for a ticket every time they wanted to attend a dispensary free of charge. Committees of management were responsible to the boards of guardians for the management of the dispensaries and appointing the dispensary doctors. In 1863, the dispensary doctors were
made registrars of births and deaths and of Roman Catholic marriages and the practice of registering births, marriages and deaths was standardised on the 1st of January 1864. When registering deaths, the dispensary doctors were required to note the cause of death and duration of illness, thus enabling accurate statistics of mortality to be compiled for the first time. The registration of births enabled such measures as the compulsory vaccination of children against smallpox to be carried out effectively and by the end of the 19th century this scourge had, to a great extent, been eliminated.

While many boards of guardians had allowed the non-destitute to enter workhouse hospitals for treatment during the 1850s, the 1862 Poor Law (Amendment) Act officially opened the workhouse hospitals to the non-destitute sick. By 1871 poor law medical officers comprised 50% of the medical profession. In 1861, the Sisters of Mercy were first allowed to act as nurses in a workhouse setting in Limerick Union workhouse. By 1903 nuns were employed in eighty five workhouses and a nun was nursing matron in thirty two workhouses.

As a result of these developments, Ireland had one of the most advanced health services in Europe in the mid-19th century, if policy and structure are to be taken as criteria. The Local Government (Ireland) Act of 1896 empowered a board of guardians with the consent of the central authorities to convert their workhouse hospital into a district hospital but only two boards availed of this Act, which was the first effort to establish the district hospital as a separate and distinct entity from the workhouse.

The Local government (Ireland) Act, 1898, replaced the grand juries by democratically elected county and rural district councils. The county councils took over the administration, either directly or through joint committees, of the district lunatic asylums.

While Ireland had a low death rate from infectious disease in the first decade of the 20th century, tuberculosis was the marked exception. While every workhouse had at least two tuberculosis wards, treatment was very basic, although some workhouses attempted to deal with the disease more effectively, such as the South Dublin Union, which opened a small consumption hospital around 1905.

The last years of the 19th century saw the first attacks made against the disease with the opening of Newcastle Sanatorium in 1896. A Tuberculosis Prevention Act was passed in 1908, which gave the county councils power to provide sanatoria and brought the first veterinary inspectors into the employment of the sanitary authorities. In 1910, the sanitary authorities of County Cork combined with Cork Corporation to establish Heatherside...
Sanatorium near Doneraile. In 1911, the Dublin city and county authorities opened Crooksling Sanatorium. Peamount Sanatorium was founded in 1912 through the efforts of the Women’s National Health Association, which was, under the able leadership of Lady Aberdeen, the wife of the Lord Lieutenant, the most formidable health pressure group of the early 20th century.

The turbulent years of the early 1920s saw some revolutionary changes in the public health system. The poor law system had been denounced in the Democratic Programme read and adopted at the first meeting of Dáil Eireann in January 1919, which resolved to replace it with a more sympathetic native scheme for the care of the nation’s aged and infirm. During the height of the struggle for national independence in 1920 and 1921, the county councils under the guidance of the underground Local Government Department of Dáil Eireann, proceeded to re-organise the arrangements for hospital care of the poor in their respective counties under “county schemes” or “amalgamation schemes”. The principal provisions of these schemes were the abolition of the existing system of workhouses, the centralisation of administration under the county councils and the establishment in each county of central institutions for the relief of the sick poor. The institutions envisaged in these schemes included a central county home for the aged and infirm to which was attached a separate infirmary section to deal with chronic and long term cases, a county hospital to deal with major surgical cases, medical cases and abnormal midwifery, district hospitals to deal with medical cases, minor surgical cases and normal and abnormal midwifery in centres which were far removed from the county hospitals, and fever hospitals to deal with infectious diseases within the county unit.

In general, the boards of guardians outside Dublin were abolished and were replaced by county boards of health and public assistance, essentially sub-committees of the county councils. Most workhouses were closed to save money while some became district hospitals or county homes. While the county homes were to be reserved in theory for the old and infirm many soon included unmarried mothers, children and the intellectually disabled and mentally ill. Most county infirmaries were abolished except in Dublin, Cork, Limerick, Waterford, Kildare, Meath, Westmeath and Louth. Following the establishment of the Irish Free State the Department of Local Government and Public Health formally became, in 1924, the central government authority for local government and health administration. The Minister took over the Lord Lieutenant’s duties in relation to the mental hospitals. The Report of the Commission on the Relief of the Sick and Destitute Poor, published in 1927, provides an interesting insight into the local hospital infrastructure in the mid-1920s, as local authorities struggled to implement the county schemes in a time of political uncertainty and great economic upheaval. While limited resources did not permit any large scale expenditure on extensive hospitalisation schemes between 1923 and 1930, apart from the provision of a few small district hospitals in County Cork, the improvisation of existing buildings and the application of modern medical techniques nevertheless greatly improved the standard of the local authority hospital service.

In 1930, the establishment of the Irish Hospitals Sweepstakes, a lottery to provide financial assistance to hospitals, provided a financial lifeline to many voluntary hospitals who were struggling to survive following a reduction in the number of endowments and bequests after the Great War. The Sweepstakes was used to finance elaborate building programmes in both the voluntary and public hospital sectors from the 1930s onwards. A Hospitals’ Commission was set up in 1933 which was entrusted with the task of examining the resources and needs of the various hospitals and institutional medical care generally in the State and advising the Minister as to how the Sweepstakes funds received should be allocated.
A planned scheme for hospital building was initiated. Previous to the Sweepstakes no major public hospital building had been constructed since the Royal Victoria Eye and Ear Hospital was opened in 1904. The first new hospital of importance to be completed was the Westmeath County Hospital at Mullingar which was opened in April 1936 and provided 100 beds. During the following five years twelve new county hospitals, thirty new smaller hospitals and two mental hospitals were completed. The National Maternity Hospital, which had been housed in a few converted Georgian residences in Dublin, was completely rebuilt on its original site and opened in 1936. Another voluntary hospital, St. Michael’s in Dun Laoghaire, was so extensively rebuilt as to practically constitute a new hospital, and was completed in 1941. A new mental hospital was constructed in Ardee and opened in 1933 to cater for the county of Louth. An auxiliary mental hospital was built at Castlerea and opened around 1940. The outbreak of the Second World War had a detrimental effect on the hospital building programme as supplies of essential building materials such as structural steel and copper became unavailable. While projects which were in the course of construction in 1939 were completed with great difficulty, only two new hospital projects were undertaken during the period; the building of a 40 bed maternity hospital in Galway which was to form part of the future Regional Hospital, and extensive additions to Vergemount Isolation Hospital in Dublin which doubled the number of beds available there.

There were significant developments in health care in the 1940s and 1950s. The Mental Treatment Act of 1945 modernised the legal code under which the mental services operated and provided important safeguards against the arbitrary detention of patients although the numbers of persons being treated continued to increase until, by 1959, there were 20,000 patients in Irish mental hospitals.

In the years immediately after 1945 there was a major effort to develop anti-tuberculosis services. The Tuberculosis (Establishment of Sanatoria) Act of 1945 permitted the Minister for Local Government and Public Health to arrange for the building of sanatoria and to transfer these to local authorities when completed. This was a major departure from established practice for the central authority as it stepped outside its normal functions of directing and co-ordinating the local services. Sanatoria were built at Dublin, Cork and Galway and were handed
Survey of Hospital Archives in Ireland

over when completed to the local authorities as was provided under the Act. There was also widespread building and conversion of buildings for the treatment of tuberculosis cases by local authorities. These developments, together with the payment of maintenance allowances for dependents of persons undergoing treatment for infectious disease, mass radiography, BCG vaccination and new drugs such as streptomycin, led to a great decline in mortality from the disease and in the number of new cases appearing. The decline of particular ailments, like fever, led to closures of existing institutions or new uses for projected ones.

The new hospital at Gurranebraher, Cork, which opened in November 1955 as an orthopaedic hospital, had originally been planned as a fever hospital at a time when infectious diseases were a major health problem. Up to 1946 ministerial health functions were vested in the Minister for Local Government and Health. It became evident that the task of maintaining and improving the nation’s health services warranted the creation of a separate Department of State and in January 1947 the Department of Health was established under the Ministers and Secretaries (Amendment) Act, 1946. Nevertheless the public hospital infrastructure remained, to a great extent, under the control of the local authorities. The Health Act of 1953 extended eligibility for general hospital services and maternity care to a much wider class and ensured that the majority of the population enjoyed free or heavily subsidised hospital treatment. Health authorities were now required to provide child welfare clinic services and the school health service was improved. The dispensary service and dispensary doctors were transferred from the public assistance code to the health authorities. The old dispensary ticket system was done away with and replaced by medical cards. A more liberal code for the governing of county homes was introduced and provision was made for the development of a comprehensive rehabilitation service. Up to the 1950s the county homes had afforded only a very basic type of care for the different types of patient kept in them – including the old and infirm, chronic sick people, unmarried mothers and young children, persons with intellectual disabilities, epileptics and others. There was a move to ensure that, in future, they dealt with only the aged and chronic sick and that those other patients resident in them were cared for in separate homes or institutions dealing with their particular requirements. The 1950s saw a major increase in the number of general medical and surgical beds and a major expansion of specialist medical services, including institutions for the intellectually disabled, throughout the hospital system.

By the 1960s, it was felt that as the state had taken over the major financial interest in the health service there should be a new administrative framework combining national and local interests. For technical and logistical reasons it was believed that better services could be provided on a regional rather than a county basis. The establishment of the health boards under the Health Act, 1970, marked a major break in the link between the health services and county administration. At this time Ireland had the highest proportion of hospital beds to population in western Europe and the Irish hospital system was described as “one of a large number of small institutions scattered throughout the country”. The following decades would see the closure or amalgamation of many voluntary and state hospitals into larger units and the dismantling of the old mental hospital infrastructure.

That Irish hospital records are of great historical interest has long been acknowledged. Dr. William Wilde, the internationally renowned 19th century physician and statistician, recognised one hundred and seventy years ago that the hospital registers of the Rotunda Hospital represented the ‘most interesting and earliest statistical tables on record’. Ireland’s medical institutions, both voluntary and public, have a peculiarly rich and varied history and have played a paramount role in medical advances over the last three centuries. While some collections of hospital archives are now safe in archival custody, many collections remain in peril. These archives have no protection under the law and it is often only through the good offices of interested hospital staff that material has been preserved.

Brian Donnelly
Archivist,
National Archives of Ireland

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County Reports
Carlow

A county infirmary was established in Carlow town in 1767. Fever hospitals were established in Tullow in 1827, in Carlow town in 1829 and in Bagenalstown in 1832.

Carlow District Lunatic Asylum opened in 1832 for the reception of patients from Carlow, Kildare, Wexford and Kilkenny. By the late 1860s it catered just for Carlow and Kildare.¹

One poor law union was established in the county. Carlow Poor Law Union was formally declared on the 15th of September 1840. The workhouse was designed to accommodate 800 inmates and its first admission was in November 1844.

In the first decade of the 20th century the institutions in the county included the workhouse, with infirmary and fever hospital at Carlow, and small hospitals at Muinebeag (Bagenalstown) and Tullow. In addition, the poor of all classes in Baltinglass No. 2 and Idrone Rural Districts, had access to the workhouse infirmaries and fever hospitals of the Baltinglass and New Ross Poor Law Unions.

The County Scheme

The reorganisation of the local public health infrastructure which took place throughout Ireland in the early 1920s under the County or Amalgamation Schemes was not as traumatic in Carlow as in other counties. Under the Carlow County Scheme Order, 1923, a county home was established which utilised the old cavalry barracks in the town, the Free State Army having taken over the workhouse, which was, some years later, demolished.

Under the Scheme, the following classes were to be accommodated in the county home:- aged and infirm, chronic invalids, harmless lunatics and epileptics, children, unmarried mothers, and maternity cases, and the Commission on the Relief of the Sick and Destitute Poor found all these classes there when they visited the institution in the mid 1920s. They also noted that part of the accommodation had been set aside for cases of pulmonary tuberculosis and cancer and that there was a maternity department attached to the home. A district hospital was established in the old county infirmary building. The accommodation amounted to 17 beds and minor operations only were undertaken, serious cases being sent to Dublin. The Fever Hospital, Carlow, was a separate building situated about half a mile from the county home. The district hospital in Muinebeag could accommodate 15 beds and had a small detached fever hospital with two wards. The district hospital in Tullow was a building of the bungalow type erected in 1922, accommodating 16 beds and was connected by a covered passage to a small fever hospital.
In other counties, the county schemes had led to significant reductions in the number of institutions maintained at county expense. In Carlow, the county authorities were financially supporting almost the same number of public institutions as had existed before the establishment of the state. It was a situation which would retard the expansion of the hospital infrastructure in the county as the century progressed.²

**Later 20th Century Developments**

In the mid 1930s, a surgical, medical and midwifery hospital run by the Sisters of the Little Company of Mary was established in Carlow and operated until 1967. In September 1949 Tullow District Hospital became a TB institution and operated in that capacity for a few years until its closure. The county home became known as the Sacred Heart Home in December 1952. By March 1957, 41% of the population in the county was on the general medical services register which entitled them to free hospital treatment. As a result of the decline in infectious disease, Carlow fever hospital closed in December 1956. In 1971 the county became part of the South Eastern Health Board. The district hospital in Muinebeag, St. Lazerian’s, closed in 1987. In April 1986 the present Sacred Heart Hospital was opened on the site of the old county home.

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**List of Institutions Visited**

Sacred Heart Hospital

**Records in Other Locations**

**County Library**

Minute Books of the Board of Health and Public Assistance, 1923-1942

Minute Books of Carlow Poor Law Union, 1845-1923

**HSE Library, St. Lukes, Kilkenny**

Report Book, Carlow County Medical Officer of Health, 1927-44

**Private Archives**

The records of St Dymphna’s Hospital, Carlow are in the Delaney Archive


**Survival of Records in Hospital Institutions**

There is a small but important survival of records for Carlow, including some material dating from 1851, relating to the Carlow workhouse as well as some key 20th century records relating to the operation of the Carlow county home.

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1. Kilkenny opened its own asylum in 1852 and Wexford in 1868.
A county infirmary was founded at Church Street, Cavan, around 1760. Fever hospitals were established in Cavan town in 1824, in Cootehill in 1832 and by 1849 were in operation in Bailieborough and Virginia. Armagh Asylum, which opened in 1825, originally also catered for the counties of Monaghan and Cavan. By the late 1840s the county was entitled to send 33 patients there. In 1869, an asylum (later called St. Davnet’s) opened in Monaghan to cater specifically for the counties of Monaghan and Cavan. In the 1840s workhouses opened in County Cavan at Bailieborough (June 1842), Cavan (June 1842) and Cootehill (December 1842). A workhouse was later opened in Bawnboy in November 1853. Cootehill Union was dissolved in 1917. The Sisters of Mercy took charge of the county infirmary in 1913. In 1916, Cavan county council rented a building in Keadew for use as a tuberculosis dispensary.

The County Scheme

During the War of Independence there was a major re-organisation of the public hospital infrastructure at county level in an effort to promote efficiency and economy. Under these county or amalgamation schemes workhouses were closed or turned into county homes, district hospitals or county hospitals. Under the County Cavan scheme, Cavan workhouse was utilised partly as a county home and partly as a county medical hospital. The workhouses at Bailieborough and Bawnboy were closed, their staff pensioned off and their residents transferred to the county home. The report of the Commission on the Relief of the Sick and Destitute Poor, published in 1927, gives a vivid insight into the early years of these schemes. Many of the institutions utilised by the schemes were in poor condition following lack of maintenance during the years of turmoil and economic collapse in the early 1920s. The Commissioners noted that the county home was situated on the ground and first floors of the body of the Cavan workhouse and the medical hospital section was on the top floor. One of the wards in the latter was devoted to tuberculosis cases. They found that in addition to the aged and infirm and chronic invalids which were provided for under the original scheme, there were also unmarried mothers and children. The home and hospital had a one ward maternity hospital. A fever hospital was situated in grounds of the county home.

The County Scheme abolished the joint committee of management of the county infirmary and the building itself, which was in good structural condition, was turned into a county hospital dealing entirely with surgical cases and from 1922 was known as the ‘Surgical Hospital’. The Commissioners reported that it had an extern department which dealt with about 1,500 cases in the year.
Later 20th Century Developments

The Commissioners had noted during their visit to Cavan in the mid 1920s that a tuberculosis hospital was in the process of being provided. This opened in 1927 in Keade. As there was only half an acre of ground at Keade, it was impossible to build an extension there and, in 1936, plans were approved for a new 68 bed tuberculosis hospital at Lisdam. This was erected in 1943 at a cost of £85,000 with assistance from the Irish Hospitals Sweepstakes. By the late 1950s the number of patients had fallen dramatically and it closed in 1959. By March 1957, 29% of the population in Cavan were on the general medical services register and were entitled to free hospital and specialist services provided by local health authorities. Following the closure of Lisdam tuberculosis hospital, the existing buildings were converted into a general and maternity hospital which opened in 1962.

By the late 1960s, hospitals in the county included St. Felim’s Hospital - the County Home (317 geriatric beds), the County Hospital, Medical and Maternity Unit at Lisdam, Cavan, (31 maternity, 44 medical, and 9 beds for children) and the County Surgical Unit, Church Street, Cavan (63 public, 7 private beds).

The surgical hospital, which had been extended with Sweepstake funding, eventually closed in 1989. Cavan General Hospital is now located at Lisdam. St. Phelim’s closed as a residential institution at the beginning of the 21st century.

County Cavan became part of the North Eastern Health Board in 1971.

List of Institutions Visited

Cavan General Hospital
St. Felim’s Hospital, Cavan

Records in Other Locations

County Library
Minute Books of the Board of Health and Public Assistance, 1921-1942
Poor Law Union records, 1839-1925
Cavan Surgical Hospital records, 1943-55

Survival of Records in Hospital Institutions

Particularly extensive records, one of the best collections in the country, survives for St. Felim’s Hospital, the former county home. There is also very good survival of the records of St. Davnet’s Mental Hospital, which catered for the county from 1869. A small quantity of high quality 20th century records also survive for Cavan General Hospital.

1. Local Government in the County of Cavan by T.S. Smyth (Cavan County Library).
A county infirmary in Ennis opened in 1785. By 1849 there were fever hospitals at Ennis and Kilrush and there were 23 dispensaries in the county. In the 1840s workhouses opened in Ennis (December 1841), Ennistymon (September 1842), Kilrush (July 1842), and Scariff (May 1842). Workhouses were later opened at Ballyvaughan (January 1851), Corofin (January 1851), Killadysert (April 1853) and Tulla (February 1850).

The county was entitled to send patients to the Limerick District Lunatic Asylum, following its establishment in 1827. In 1868 a separate mental hospital, the Ennis District Lunatic Asylum, was established in Ennis.

In 1910 Lady Inchiquin offered to provide a small sanatorium on a two acre site near Ennis at Ballyalla. The building cost over £1,000, and was subsequently presented to the sanatorium committee of the County Council. It served as a sanatorium until the late 1920s.

The County Scheme

As in other counties, a major re-organisation of the public hospital services was initiated in Clare during the War of Independence in the early 1920s to centralise services and reduce costs. Under the Clare County or Amalgamation Scheme a county home and a county hospital were established in Ennis, and district hospitals at Ennistymon, Kilrush, and Scariff. There was also an auxiliary home for infant children and unmarried mothers at Kilrush. These were under the control of a local board of health appointed by the county council. Many of these institutions were in poor condition due to lack of maintenance as a result of the economic difficulties of the time. The county home was in the old Ennis workhouse. A fever hospital stood in the grounds of the county home, and was looked after by the matron and medical officer of the home. The joint committee of management of the Clare County Infirmary at Ennis was abolished under the county scheme and that institution was transferred to the board of health, who made it the county hospital. Kilrush auxiliary home, for unmarried mothers and infant children, was situated in the old Kilrush workhouse. The Commission on the Relief of the Sick and Destitute Poor, who visited the county in the mid 1920s, noted that it was the only home of this kind administered under the direct control of a Board of Health but criticised the Board for not properly adapting the building properly for its new purpose. It closed in the late 1920s. Kilrush district hospital was situated on the far side of the road from the auxiliary home, in the old workhouse infirmary. Ennistymon district hospital was in the infirmary.
of the old Ennistymon workhouse and the Commissioners noted the ‘the old empty workhouse falling into disrepair is in front of it’ and that the buildings were unsuitable for a district hospital. The Ennistymon fever hospital was a small two-storey building in poor repair. Scariff district hospital was situated in an old private residence in a demesne about three miles from Scariff. While all classes of operations were performed there, the Commissioners commented that the building was not suitable for a hospital.

Later 20th Century Developments

In the late 1920s Edenvale House was bought by the Clare sanatorium committee and converted into a sanatorium. The Irish Hospitals’ Sweepstakes provided funds for the construction of a new county hospital in Ennis, which officially opened on the 4th of October 1940, and funded the construction of the district hospital in Ennistymon, and the county sanatorium at Grianan an Chlair, Edenvale, Ennis. It also funded reconstructions of the district hospitals in Kilrush and Scariff, the fever hospital in Ennis, and additions to the mental hospital in Ennis. By March 1957, 22% of the population in the county were on the general medical services register and were eligible for free hospital and specialist services provided by the local health authorities. By the late 1960s medical institutions in the county included St. Joseph’s County Home in Ennis (353 geriatric beds), the County Hospital, Ennis (117 beds) Our Lady’s District Mental Hospital in Ennis (683 psychiatric beds), Kilrush District Hospital (41 beds), Ennistymon District Hospital (28 medical, surgical and maternity beds), Scariff District Hospital, Raheen (33 medical, surgical and maternity beds) and the Grianan an Chlair Sanatorium, Edenvale, Ennis (46 beds’). Kilrush District Hospital closed in July 1987.

Ennistymon community hospital is located on the site of the original Ennistymon workhouse, parts of which still stand. The original county home at Ennis was demolished in the 1960s and the present St. Joseph’s Hospital was constructed on the site between 1966 and 1974. In 1971 the county became part of the Mid Western Health Board. Our Lady’s Mental Hospital closed around 2002 and the mental health services in the county are now community based.

List of Institutions Visited

St Joseph’s Hospital, Ennis
Ennis General Hospital
Ennistymon Community Hospital

Records in Other Locations

County Archives

Minute Books of the Board of Health and Public Assistance, 1921-1942
Manager’s Orders, 1942-1966
Poor Law Union Records, 1850-1922
Records of Our Lady’s Mental Hospital, Ennis, 1832 - 1982

Survival of Records in Hospital Institutions

Important key records survive relating to the Clare County Home, as well as a small quantity of records relating to the County Clare Sanatorium.

1. Irish Medical and Hospital Directory, 1966/67.
A large number of voluntary hospitals were established in the city of Cork and its surroundings in the 18th and 19th centuries. The earliest of them was the North Infirmary, which was, according to some authorities, founded about 1719. An Act was passed in 1751 having for its object the establishment of an enlarged infirmary. The trustees of the South Charitable Infirmary were incorporated in 1722.\(^1\) A Foundling Hospital in Leitrim Street was opened in 1747. A county infirmary opened in Mallow in 1784.

In 1861 this was transferred to Cork City and merged with the South Infirmary as “The South Charitable Infirmary and County Hospital”. A Cork Fever Hospital and House of Recovery was founded by John Milner Barry in 1802. The Mercy Hospital was established in the city by the Sisters of Mercy in 1857. The Cork Lying-in Hospital opened in 1798. A lying-in hospital opened in Youghal in 1823. The Royal Naval Hospital opened in Hawlboline in 1843. In 1870 the Irish Sisters of Charity opened a hospital in Cork, St. Patrick’s, for incurable cases of cancer.

In one of the first attempts by local authorities to combat the scourge of tuberculosis, the sanitary authorities of County Cork combined with Cork Corporation to establish Heatherside Sanatorium, Doneraile, County Cork, which opened in 1910. In 1902 an industrial school in Youghal was taken over, altered and extended and opened in 1904 as an auxiliary mental hospital (now St. Raphael’s).

The County Schemes

The early 1920s saw considerable changes in the administration of the public hospital services in Cork city and county. The county borough of Cork was combined with the adjoining county district and county in a joint scheme which was confirmed with modifications on the 28th of April 1924. The old union administration came to an end in Cork later than in any other county except Dublin. The county scheme in Cork differed from earlier county schemes. In other counties the boards of guardians had been superseded by one board of health for the whole county, while in Cork, because of the size of the county, the poor law unions were grouped into three districts, called county districts. Three separate boards were established and entrusted with the administration of poor relief in their respective districts which were designated the North Cork, South Cork, and the West Cork County Districts.

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North Cork County District

This district comprised the areas included in the poor law unions of Fermoy, Kanturk, Mallow and Millstreet. The scheme was to provide a county home at Mallow, a county hospital at Fermoy, and cottage hospitals at Charleville, Kanturk, Mallow, Millstreet, and Mitchelsttown. The Commission on the Relief of the Sick and Destitute Poor, who visited the county in the mid 1920s noted that no hospitals had been provided at Charleville, Kanturk or Mitchelsttown but plans had been approved for a hospital in the grounds of the old Kanturk workhouse.

The county home was in the old Mallow workhouse which had not been renovated in any way. Mallow district hospital was in the infirmary part of the old Mallow workhouse. There was a small maternity department consisting of one ward which dealt with both married and unmarried cases. Fever cases were dealt with in a detached fever hospital in the grounds of the county home.

Millstreet district hospital was in the old workhouse sheds, which were formerly used as the workhouse infirmary, the main workhouse building having been burned. At the back of the workhouse buildings was a fever hospital which had not been burned and which was intended to be converted, in due course, into a district hospital.

The county hospital in Fermoy used what was originally the old workhouse infirmary. Accommodation was provided in two good buildings, one for each sex. Part of the old Fermoy workhouse was also occupied by unmarried mothers and children, whose reception in the institution had not been contemplated by the scheme and the accommodation provided for them was entirely distinct from the hospital.

South Cork County District

The areas included in the South Cork County District were the unions of Bandon, Cork, Kinsale, Macroom, Midleton, and the part of Youghal Union that was in County Cork.

The institutions to be provided under the scheme were a county home at Cork, a district home at Midleton; a district hospital at Cork; cottage hospitals at Bandon, Cobh, Kinsale, Macroom, Midleton and Youghal and an auxiliary home at Bessborough, Blackrock, for unmarried mothers and their children. The scheme did not provide for a central or county hospital.

The Commission on the Relief of the Sick and Destitute Poor noted in the mid 1920s that no hospitals had been established at Bandon, Cobh or Macroom.

The auxiliary home at Bessborough was conducted by a religious community and a voluntary ladies committee and was not under the control of the board of public assistance, but the board paid for cases sent by them at a fixed rate.

The county home was in the Cork workhouse (later St. Finbarr’s) which was also used partly as a district hospital. The home also contained unmarried mothers and children, although the scheme did not contemplate the admission of either of these classes.

The Midleton auxiliary home and district hospital was in the old workhouse. Like the county home, it also contained unmarried mothers and children, classes of patient which were not intended in the original scheme. The district hospital in Midleton was in the old workhouse infirmary. There was a fever hospital outside the workhouse premises.

Kinsale Cottage Hospital was in what had been a private house. Youghal Cottage Hospital was in the old workhouse infirmary. There was a small maternity ward to which respectable married women were admitted, other cases being sent to Cork. There was also a fever hospital at Youghal, some distance away from the old workhouse, which was in a bad state of repair.
Cork continued

West Cork County District

The West Cork County District comprised the unions of Bantry, Castletown-Berehaven, Clonakilty, Dunmanway, Skibbereen, and Schull, all of which had workhouses.

The institutions to be provided under the scheme were a county home at Clonakilty, a county hospital at Skibbereen, cottage hospitals at Bantry, Castletown-Berehaven, Clonakilty, Dunmanway and Schull. The commissioners noted that no hospital had been established at Schull.

The county home at Clonakilty was situated in the body of the Clonakilty workhouse, and was described by the Commission in the mid 1920s as "one of the most primitive institutions in the country. It is doubtful if it has been improved in any way since it was built." The county hospital at Skibbereen was a neat, newly built, little hospital of 24 beds, well planned, and with good bathing and sanitary accommodation." Fever cases were received in a range of buildings in the old workhouse grounds. There was a district hospital in the old infirmary building of the Clonakilty workhouse, which contained mainly chronic cases. Fever cases were treated in a small detached building at Clonakilty.

Bantry Cottage Hospital was in the course of construction and was situated on the site of the old workhouse, which had been burned. A fever hospital was being reconstructed on the site of the old workhouse fever hospital.

A district hospital had been established in Dunmanway in the old fever hospital attached to the workhouse but the building was unsuitable and the commissioners noted that it was intended to convert the old board room of the workhouse into a cottage hospital.

The hospital accommodation in Castletown-Berehaven was in the old workhouse infirmary. The general condition of the hospital was very poor and there was no maternity department.

Unlike other counties, the Committee of Management of the County Fever Hospital was not abolished in Cork. The Cork Fever Hospital Act, 1935, made provision for the establishment of a new fever hospital, but the old institution continued in operation until it's closure in the late 1950s.

Later 20th Century Developments

The provision of hospital accommodation in County Cork in the 1920s was a matter of some urgency owing to the extensive destruction during the Troubles of workhouse buildings, seven of which were destroyed wholly and two partially. In the western half of the county only two poor law buildings suitable for use remained. Despite the financial uncertainty of the time, by 1928 new hospitals had been provided or were in the course of erection at Kanturk, Skibbereen, Macroom, Bandon and Clonakilty.2 These hospitals were of a much more modern design compared to the old workhouse hospitals they replaced. A new hospital opened in Kinsale in August 1931.3

The advent of the Irish Hospitals Sweepstakes provided an impetus to the development of the hospital infrastructure from the 1930s. The Sweepstakes funded a county hospital in Mallow, a central hospital in Bantry and district hospitals in Midleton, Millstreet, Kanturk, Schull, Bandon and Youghal. It also provided funding for a regional sanatorium in Cork, St. Stephen's Hospital, which opened in May 1955. Work in site development commenced in January 1950 and the first patients were accommodated in August 1955. The sanatorium followed the same general design as the Dublin Regional Sanatorium (James Connolly Memorial Hospital).4

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A new maternity and neo-natal unit was opened in St. Finbarr’s Hospital in April 1952 and a new maternity hospital attached to the Bon Secours Home and Hospital was opened in June 1958.6

A 133 bed orthopaedic hospital, originally planned as a fever hospital, opened in Gurranebraher, on the northern side of Cork City, in November 1955. In 1953 St. Patrick’s Franciscan Hospital, Mount Alvernia, Mallow, was opened by a Franciscan Order of Nuns to cater for surgical, medical and maternity cases. Sister Mary Ethnea was the first matron. By March 1957, 41% of people in North Cork, 24% in South Cork, and 25% in West Cork were on the general medical services register and were entitled to free hospital and specialist services provided by local health authorities.

A new Erinville maternity hospital was constructed and opened in December 1963. Heatherside Sanatorium closed in 1957 and was then used to relieve overcrowding in Cork Mental Hospital. Cork Fever Hospital closed in the late 1950s.

Hospital Infrastructure in the 1960s

By the late 1960s the hospitals in the county and city of Cork included the Cork District Mental Hospital, Our Lady’s, Lee Road, (2,000 beds) and the Auxiliary Mental Hospital in Youghal (355 beds). St. Anne’s Hospital and Clinic at Shanakiel (60 beds) was an early mental treatment unit. St. Finbarr’s Hospital on the Douglas Road, the successor to the Cork workhouse, remained a huge institution (929 beds) - a general hospital which also accommodated large numbers of chronic cases. There was also a county home at Clonakilty (233 beds) and a district home and hospital at Midleton (210 beds).

There was a county hospital at Bantry (134 beds), at Mallow (90 beds) and St. Patrick’s Hospital at Fermoy (145 beds). District hospitals in the county included Bandon District Hospital (21 beds), Castletownbere District Hospital (28 beds), Clonakilty District Hospital (44 beds), Dunmanway Cottage Hospital (23 beds), Kanturk District Hospital (51 beds), the General Hospital, Cobh (37 beds), Macroom District Hospital (37 beds), Millstreet District Hospital (25 beds), the Sacred Heart Hospital, Kinsale (23 beds), St. Anne’s Hospital, Skibereen (43 beds), St. Patrick’s Hospital, Fermoy (145 beds), and Youghal District Hospital (48 beds).

Voluntary hospitals included the Mercy Hospital, Granville Place (200 beds), the North Charitable Infirmary (120 beds), the South Charitable Infirmary and County Hospital, Old Blackrock Road ((134 beds), the Victoria Hospital, Cork, Infirmary Road (74 beds), Erinville Hospital (60 beds) the Eye, Ear and Throat Hospital, Western Road (57 beds), the Bon Secours Home and Hospital, College Road (223 beds), and the General Hospital, Cobh (37 beds).

The Cork Dental Hospital, a general district voluntary public hospital, operated in connection with the North Infirmary. Heatherside Hospital (180 beds) was now a geriatric unit. The Sacred Heart Hospital at Bessboro’, a special voluntary hospital, had 40 beds and St. Patrick’s Incurables Hospital, Wellington Road, a special semi-private voluntary hospital, had 76 beds.

St. Mary’s Orthopaedic Hospital at Gurranebraher (192 beds) and St. Stephen’s Hospital, Sarsfieldscourt, Glannire, catered for adult pulmonary tuberculosis cases and non-tubercular surgical pulmonary cases (420 beds). Cork became part of the Southern Health Board in 1971.

5. Irish Times, 08/04/1952.
Late 20th Century Developments

The last three decades of the 20th century would see a major transformation of the hospital infrastructure in Cork city. In July 1966 the Cork Hospital Board was established to design and build the new Cork regional hospital. The establishment of the hospital had been first mooted in 1938. The Emergency and subsequent restrictions delayed work on it until 1973. This 633 bed hospital, built at Wilton on the south-west side of Cork City, was officially opened on the 7th of May 1979. Some 400 patients had been transferred from St. Finbarr’s Hospital to the new building on the 30th November 1978.

The 1980s would see the closure of many long established Cork hospitals like Our Lady’s Mental Hospital. The North Infirmary closed in November 1987 and the Eye, Ear and Throat Hospital in November 1988. Cork University Maternity Hospital opened in 2007, following the amalgamation of maternity units at three Cork hospitals: St. Finbarr’s, the Bons Secours and Erinville.

List of Institutions Visited

- Bandon Community Hospital
- Castletownbere Hospital
- Clonakilty Community Hospital
- Cork University Hospital
- Dunmanway Community Hospital
- Kanturk Community Hospital
- Kinsale Community Hospital
- Macroom Community Hospital
- Mercy University Hospital
- Midleton Community Hospital
- Millstreet Community Hospital
- Mount Alvernia Hospital, Mallow
- Schull Community Hospital
- Skibbereen Community Hospital
- St Raphael’s Centre, Youghal
- St Stephen’s Psychiatric Hospital, Glenmire
- Youghal Community Hospital

Records in Other Locations

County and City Archives

Cork County and City Archives is the oldest established local authority archives in the country and it has actively intervened over the years, sometimes in co-operation with the National Archives, to ensure the preservation of hospital records in the county.

- Mallow Infirmary minute book, 1784 – 1862
- House of Industry and Lunatic Asylum ledger, 1828 – 31
- County Cork Joint Hospital Board minute book, 1905 – 12
- Cork County Home and Hospital (later St. Finbarr’s Hospital) records
- North, South and West Cork Boards of Assistance records
- Our Lady’s Mental Hospital records
- North Charitable Infirmary records
- Eye Ear and Throat Hospital records
- Poor Law records

7. Irish Times, 08/05/1979.
Survival of Records in Hospital Institutions

Cork city and county have a very large and extensive hospital infrastructure which includes long established voluntary hospitals, district and community hospitals and specialist medical institutions, who continue to hold records of great historical interest. There is, in general, a good survival of records for the hospitals in the county. One community hospital, a former workhouse, held a continuous run of indoor registers, listing those admitted and discharged, from 1843.

This is particularly remarkable considering the destruction of such institutions in the county during the Troubles in the early 1920s and the subsequent replacement of older institutions with more modern hospitals later in the 20th century, a process which has often led to the loss of records. Important records of specialist institutions also survive.

St. Raphael’s Centre in Youghal, formerly an auxiliary mental hospital, has particularly extensive records. Important records relating to Heatherside Sanatorium, which opened in 1910, also survive. Voluntary hospitals still hold important material. The Mercy Hospital still has their first register, dating back to the opening of the hospital in 1857, despite their proximity to the river and losses of material due to flooding. On occasion, more modern hospitals, such as Cork University Maternity Hospital, hold records relating to those hospitals whose services they replaced.
A county infirmary opened in Lifford in 1773. Fever hospitals opened in Letterkenny and Rathmelton in 1832 and Dunfanaghy in 1845. By 1849 there were 25 dispensaries in the county. A district lunatic asylum opened in Letterkenny in 1866. Before that date, the county sent patients to the lunatic asylum at Derry which had opened in 1829.

The following workhouses opened in the county in the 1840s: Ballyshannon (May 1843), Donegal (May 1843), Dunfanaghy (June 1845), Glenties (July 1846), Inishowen (October 1843), Letterkenny (March 1845), Milford (April 1846), and Stranorlar (May 1844). In 1894, the Sheil Hospital, endowed by Dr Simon Sheil, opened in Ballyshannon.

The Donegal County Scheme

During the War of Independence, there was a radical overhaul of the local hospital infrastructure in county Donegal, as in other counties, to promote economy and efficiency. An Amalgamation or County Scheme was initiated. The original Donegal County Scheme contemplated two county institutions, a county home at Stranorlar and a county hospital at Lifford and district hospitals at Carndonagh, Donegal, Glenties and Letterkenny. An additional district hospital was established at Ballyshannon with the approval of the Minister. The report of the Commission on the Relief of the Sick and Destitute Poor, published in 1927, gives a valuable insight into the implementation of the county scheme in the early 1920s, a period of great turmoil and economic upheaval.

The county home was in the Stranorlar workhouse, which had poor sanitary facilities, a bad water supply and was at times overcrowded. The county hospital at Lifford was in the old county infirmary and had 50 beds. It was looked on in the county more as a district hospital than a county one. The Ballyshannon district hospital was in the infirmary of the old workhouse and had a small operation ward and a maternity ward and had electric lighting installed. The Donegal district hospital was in the old workhouse infirmary and had a good operation room where, as in Ballyshannon, operations of every kind were performed. The Letterkenny district hospital was in the old fever hospital and was principally a surgical hospital. The Glenties district hospital was in the infirmary of the old workhouse and was in poor repair. The Commissioners recommended that a small modern hospital of 30 beds be provided to replace it. There was also a district hospital at Carndonough. There were only two fever hospitals in the county, in Donegal and at Carndonagh.
Later 20th Century Developments

By 1946/47 there were the following hospitals in the county: Ballyshannon District Hospital, Ballyshannon (38 beds); Carndonagh District Hospital, Carndonagh (59 beds, including 16 fever); County Hospital, Lifford (44 beds); District Hospital, Donegal (80 beds, including 28 fever); District Hospital, Letterkenny (59 beds, including 23 fever); Glenties District Hospital (50 beds, including 25 tubercular); Shell Hospital, Ballyshannon, (40 beds); and Donegal District Mental Hospital (750 beds). By March 1957, 13.5% of the population were on the general medical services register which entitled them to free hospital and specialist services provided by the local health authorities. The following three decades saw a major transformation in the hospital infrastructure in the county, financed, in the main, by the Irish Hospitals Sweepstakes.

In 1935 the Hospitals Commission had recommended that a central general hospital for Donegal be located in Letterkenny. The new county hospital was eventually opened, a quarter of a century later, in July 1961 by Mr MacEntee, the Tanaiste and Minister for Health. It cost £420,000 and contained 111 beds, an increase of 68 over the accommodation of the previous building. In 1950, a portion of Killybegs Industrial School was converted into a tuberculosis sanatorium, St. Columba’s, with accommodation for 68 patients. As a result of the falling rate of tuberculosis, St. Columba’s closed in the mid 1960s. Glenties district hospital continued in use on the old workhouse site but by the 1950s was in a grave state of disrepair and it eventually closed in the early 1960s. A new 33 bed hospital was built at Dungloe in 1958 and a new 31 bed hospital opened in Carndonagh in 1959 on the site of the old workhouse. In 1971 the county became part of the North Western Health Board. The old county home at Stranorlar was replaced by St. Joseph’s Home, which opened on 2nd of July 1973. The Shell Hospital was taken over by the North Western Health Board in 1974. Ballyshannon District Hospital is now a nursing home. Lifford District Hospital is now a community hospital. Following the transition to a more community based mental health service, St. Conal’s Hospital closed and the campus is now used for a variety of health purposes.

List of Institutions Visited

Carndonagh Community Hospital
Rock Hospital, Ballyshannon
Donegal Community Hospital, Ballybofey
Shiel Community Hospital, Ballyshannon
Dungloe Community Hospital
Letterkenny General Hospital
St Joseph’s Hospital, Stranorlar

Records in Other Locations

County Archives
Minute Books of the Board of Health and Public Assistance, 1924-1942
Donegal County Infirmary, 19th century records
Donegal District Lunatic Asylum, (later St Conal’s Mental Hospital) records
Poor Law records

Survival of Records in Hospital Institutions

While the original county home building was demolished in the 1970s, important key records relating to it still survive. Important collections of 20th century records relating to the community hospitals and the county hospital in Letterkenny were also examined.
Dublin city and its hinterland has the greatest number of voluntary hospitals in the country, the largest number of public medical institutions and a wide range of specialist institutions dating back to the 18th century.

Jervis Street Hospital was founded in 1718 as the Charitable Infirmary in Cook Street, Dublin, with accommodation for just four patients. It was the oldest voluntary hospital in Ireland and Great Britain, opening one year before London’s Westminster Hospital, the first voluntary hospital in Britain. Funded by public subscriptions and monies raised at charity events, the hospital moved to Inns Quay in 1728 and to Jervis Street in 1804. In 1854 the Sisters of Mercy took over the nursing and internal management of the hospital and a completely new building was erected in Jervis Street which opened in 1885.

Dr Steevens’ Hospital was founded in 1733, near Kilmainham, by Griselda Steevens, under the terms of the will of her brother, Dr Richard Steevens.

Mercer’s Hospital opened in 1734 in Stephen Street, Dublin, to provide medical treatment to the sick poor in a building provided by Mary Mercer which she had previously operated as a shelter for poor girls. The world premiere of Handel’s Messiah, held in Fishamble Street in 1742, raised funds for the hospital.

The foundation of the Royal College of Surgeons in adjacent premises in Mercer Street in 1784 led to a close association with the hospital and it became one of the chief teaching hospitals for surgery in Dublin in the 19th century.

The Royal Hospital for Incurables was founded in 1743 to cater for the chronically ill and disabled. Originally sited at Fleet Street and later at Townsend Street, it moved to its present location in Donnybrook in 1792 and remains the oldest continuously operating hospital of its type in Britain and Ireland.

The Meath Hospital was opened in 1753 by a group of surgeons to provide for the sick poor in a poverty stricken and disease ridden area of Dublin known as “The Earl of Meath’s Liberty”. Initially in rented accommodation, the hospital moved to Skinner’s Alley in 1757, to Meath Street in 1760 and to Earl Street in 1766. Eventually, largely through private subscription, a new hospital was constructed in the Coombe which opened in 1773. Known as the Meath Hospital and County Dublin Infirmary, it remained on that site for the next 50 years. A donation from a Dublin merchant, Thomas Pleasants, enabled the governors to purchase a new site at Long Lane and construct a new hospital there, which opened in 1822.
Many distinguished practitioners worked at the hospital, including Robert Graves (1796 – 1853) and William Stokes (1804 – 78) and the revolutionary teaching methods practised there gave the hospital an international reputation.

Simpson’s Hospital was founded in 1779, under the terms of the will of George Simpson, a merchant, for patients with gout or blindness. The hospital was in two different locations in Dublin before moving to its present location in Dundrum.

The Westmoreland Lock Hospital, which treated venereal disease, was initially located on Rainsfort Street in Dublin and changed location on several occasions but was eventually relocated to Townsend Street in 1792. Initially catering for both sexes, from 1819 it catered solely for women.

Sir Patrick Dun’s Hospital opened in 1808 on Grand Canal Street, Dublin, as a result of the School of Physic Act, 1800, which regulated the establishment of a teaching hospital using some of the funds from the will of the physician, Sir Patrick Dun, who died in 1713.

The first Dublin lying-in training hospital was opened by Bartholomew Mosse, an accomplished surgeon and man-midwife, in a disused theatre in George’s Lane on the 15th of March 1745 to provide shelter and medical care for destitute and expectant mothers. The George’s Lane hospital soon became overcrowded and Mosse raised funds for the provision of a new hospital which opened as the New Lying-In Hospital (now the Rotunda) on the 8th of December 1757.

The Coombe Lying-in Hospital was established in 1826 in the Coombe, an area of the south inner city in the old building which had previously housed the Meath Hospital. This had been purchased by Dr John Timothy Kirby in 1823 and run as a general hospital. In 1826, Mrs Margaret Boyle, a leading member of a charitable committee, founded a maternity service at the hospital for poor lying-in women with the proceeds of a charitable bequest and the support of the Guinness family and other benefactors. The hospital was extended with the help of the Guinness family in the 1850s and 1870s.

In 1728 cells for the insane were erected in the original Dublin House of Industry (now the site of St. James’s Hospital) which had been established in 1703. This institution later became a foundling hospital, receiving large numbers of abandoned and orphaned children. In 1746 a private asylum for the insane, St. Patrick’s Hospital, was established in Dublin, through a bequest by Dean Jonathan Swift. This institution expanded in the 19th century and in 1898 acquired St. Edmundsbury, in Lucan, as a branch hospital. A new house of industry was founded on the north side of North Brunswick Street in the north of the city in 1772 and provided forty-six cells for those considered “curable lunatics”. In 1809 the governors petitioned parliament for funds to construct a separate institution for the mentally ill. In 1810, a parliamentary grant was made for an asylum in Dublin, the Richmond Asylum, which admitted its first patient in February 1814. Named after Charles Lennox, the fourth Duke of Richmond and Lord Lieutenant of Ireland, the hospital was initially established as a national asylum for the whole country. In 1830 the Richmond Asylum was incorporated into the district lunatic asylum system and became a district asylum for Dublin city and the county and the counties of Meath, Wicklow, Louth, and the town of Drogheda. The original building was designed by Francis Johnston and modelled on the layout of Our Lady of Bethlehem Hospital in London. In the mid 1850s additional buildings were opened to the north west of the original site and the adjoining Richmond Penitentiary was acquired for use by the hospital in 1897.

Many private asylums were established around Finglas in the early 19th century: Farnham House in 1815, Maryville in 1816, Bellvue in 1818, Finglas House in 1825, Eagle...
Dublin continued

Lodge, in 1834, and in other suburbs such as Hampstead House, Glasnevin, in 1826, and in Lisle House, Crumlin and Hartfield Retreat, Goosegreen, in 1843. While most of these institutions were shortlived, an asylum to cater for patients of the middle classes, St. Vincent’s, opened in Fairview in 1857 and continues in existence today as St. Vincent’s Hospital. The House of St. John of God, a private hospital for the treatment of mental and nervous diseases founded by the Hospitaller Order of the Brothers of Saint John of God, opened in Stillorgan in 1882.

A large complex of hospital institutions subsequently evolved around the new house of industry including the Hardwicke Fever Hospital which opened in 1803, the Richmond Surgical Hospital which opened in 1811 and the Whitworth Medical Hospital which opened in 1817. With the passing of the Poor Law Act of 1838, the house of industry itself was adapted as the workhouse of the North Dublin poor law union.

In 1821 a number of eminent Dublin doctors founded the National Children’s Hospital, which was the first hospital devoted exclusively to the care and treatment of sick children in Ireland and Britain.

In 1834 St. Vincent’s Hospital, staffed by the Sisters of Charity, opened in a house in Stephen’s Green. It was the first hospital staffed by nuns in the English-speaking world.

The Adelaide Hospital was founded in 1839 by Dr Albert Jasper Walsh (1815 – 80) and was originally intended only for Protestant patients. It was located at 43 Bride Street until 1846 and re-opened in Peter Street in 1858.

On occasion non-medical public institutions were utilised for hospital purposes in times of emergency. The completion of the Richmond Penitentary at Grangegorman in 1816 coincided with a terrible outbreak of fever due to climatic change arising from the eruption of Mount Tambora in the Dutch East Indies the previous year. It was used as a fever hospital until 1819. During the cholera epidemic of 1832 the building was utilised as a cholera hospital, staffed by nuns from the Sisters of Charity in nearby Stanhope Street.

Infectious disease was rampant in Dublin in the late 18th and early 19th centuries and a house of recovery and fever hospital on Cork Street, Dublin, opened in May 1804, to provide an institution to which patients might be removed on the first appearance of fever. The Rathdown Hospital and Dispensary apparently dates from the establishment in 1812 of a dispensary with an initial address at Montpelier Place, Monkstown, County Dublin. This dispensary is said to have treated up to 30,000 patients from its establishment until 1835 when £500 was raised to build a general and fever hospital in Monkstown. Opening in March of that year, it was named Rathdown Hospital and was to serve the Barony of Rathdown. In June 1878 the name of the hospital was changed to Monkstown Hospital.

Beggart Street Hospital was founded as a voluntary general hospital in November 1832 by a group of six doctors attached to the Royal College of Surgeons in Ireland who, with their own private funds, had purchased a house on Upper Baggot Street in order to set up a hospital associated with the college.

The Mater Hospital was opened in 1861 as a Roman Catholic charitable voluntary hospital by the Sisters of Mercy to care for the sick poor of Dublin. A number of the sisters were trained at the Hotel Dieu in Paris prior to the opening of the hospital.

A central criminal lunatic asylum was established in Dundrum in 1850. It predated the establishment of a similar institution at Broadmoor, England, which opened in 1863.

The Children’s Hospital, Temple Street, started life in 1872 as St. Joseph’s Infirmary in Buckingham Street, founded by a group of charitable ladies led by Ellen Woodlock. The
governance of the infirmary was transferred to the Irish Sisters of Charity in 1876 and the hospital moved to its present location in Temple Street in 1879.

St. Michael's Hospital in Dun Laoghaire opened in June 1876 and was staffed by the Sisters of Mercy.

In 1879 a hospice for the dying was established at Harold's Cross by the Irish Sisters of Charity, who had been running a hospital for incurable cases of cancer in Cork since 1870.

The Royal Victoria Eye Ear and Throat Hospital was established in 1897 under the Dublin Eye and Ear Hospital Act and amalgamated the National Eye Hospital, founded in 1814 by Isaac Ryall, and St. Mark’s Ophthalmic Hospital for Diseases of the Eye and Ear, founded by William Wilde in 1841. A site was purchased on Adelaide Road and the hospital opened in 1904.

In 1884, a maternity hospital opened in Holles Street under the supervision of Dr William Roe to cater for the Ringsend, South Quays and Westland Row districts. This closed in 1893 but reopened the following year with extended accommodation and an influential committee of management. A new wing was built in 1906.

There were four poor law unions in the county with workhouses at Balrothery (opened February 1841), North Dublin (opened May 1840), South Dublin (opened April 1840) and Rathdown (opened October 1841). Balrothery catered for the north of the county and Rathdown for south of the county and north Wicklow. The North Dublin Union catered for the north side of the city and surrounding area and the South Dublin Union for the south side of the city and its surroundings. In 1918 the North and South Dublin unions were amalgamated into one big union, the Dublin Union, which was based in the premises of the former South Dublin Union.

The early 20th century saw significant hospital development in Dublin. In 1902, a branch of the Richmond Asylum was completed at Portrane, County Dublin (later St. Ita’s), to relieve overcrowding in the original hospital. In December 1902 there was an outbreak of smallpox in Dublin City and an isolation hospital was quickly constructed near the Pigeon House fort to treat victims. This hospital was later used as a tuberculosis sanatorium.

In 1904, the Rest for the Dying, Gascoigne House, opened in a small building across the street from the Meath Hospital. It was specifically intended for destitute Protestants. In 1911, the philanthropist, Andrew Charles, founded a voluntary hospital, the City of Dublin Skin and Cancer Hospital, Hume Street, Dublin, to provide for “the treatment of diseases of the skin, cancer, rodent ulcer, lupus, kidney and other urinary diseases”. In May 1919 Saint Ultan’s Hospital for Children opened at 37 Charlemont Street. It was founded by Dr. Kathleen Lynn and other female doctors concerned at the high level of infant mortality in Dublin and the rise of infant syphilis following the Great War.

The Dublin city and county authorities opened Crooksling Sanatorium, Brittas, in 1911, and the Women’s National Health Association opened Peamount Sanatorium, Hazelhatch, in 1912. Both institutions were to play a major role in the fight against tuberculosis in the 20th century.

Hospital Services in Dublin from the 1920s

Following the establishment of the State, the poor law unions of Balrothery, Dublin and Rathdown continued to exist.

In the early 20th century, destitute poor persons belonging to the Balrothery Union in north county Dublin, had been maintained in the Drogheda workhouse. On the introduction of the Louth County Scheme Drogheda workhouse became a district hospital and the Balrothery inmates were transferred to the Dublin Union. The hospital portion of Balrothery workhouse continued in use until
Dublin continued

March 1925 and it was closed on the 1st of April 1925 when its function was taken over by the Dublin Union.\(^1\) The Balrothery Board of Assistance continued to meet until June 1960 when its functions were taken over by the Dublin Health Authority.\(^2\)

The old Rathdown Union workhouse at Loughlinstown continued to be used for poor law purposes, but poor persons from this union, other than the sick, were maintained in the Dublin workhouse. Major works were initiated to bring the building up to the standard of a modern hospital and on the 9th of June 1952, the reconstructed St. Columcille’s Hospital at Loughlinstown was formally opened.

The Dublin Union workhouse continued to operate in Dublin city and also developed into a municipal hospital. In 1942 it was renamed St. Kevin’s Institute and Pelletstown Auxiliary Workhouse was renamed St. Kevin’s Home.\(^3\) A major rebuilding programme started in St. Kevin’s in 1950 and extensively modernised the medical facilities there. In 1960 the Dublin Health Authority was established and replaced the Dublin Board of Assistance, the Rathdown Board of Assistance, the Balrothery Board of Assistance, the Grangegorman Mental Hospital Board and the Dublin Fever Hospital Board. Also integrated into the new authority were the Dublin Corporation services for food hygiene, school health and child welfare services, dental services for children, T.B. hospitals, general services in extern hospitals, certain specialist services and control of infectious diseases, as well as similar services provided by the Dublin County Council.\(^4\)

In 1926 a school and home (St. Vincent’s) for the intellectually disabled was established at Cabra by the Sisters of Charity of St. Vincent de Paul. While the institution was intended primarily for children, adults were also received. Boards of Health and Public Assistance could send cases to the home and maintain them there.\(^5\)

The 1940s saw a final push against tuberculosis. Rialto Hospital on the South Circular Road was initially under the control of the Dublin Board of Assistance, who ran the Dublin Union, and who for some time used it as an auxiliary to Crocksling Sanatorium for chronic and advanced cases of tuberculosis. In 1943, the hospital was transferred to Dublin Corporation and came within the Corporation’s general scheme for tuberculosis treatment. Major extensions and alterations were carried out. When Rialto ceased to treat tuberculosis in the mid 1950s, it was handed back to St. Kevin’s Hospital and re-opened as an up to date acute medical and surgical hospital in 1957.

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2. Irish Times, 14/06/1960.
St. Mary’s Hospital, which had originally been built as the Royal Hibernian Military School in 1769 and later became an Irish Army hospital, was transferred to the Dublin Health Authority in 1948 and developed as a chest hospital.

Dr. Dorothy Price of St. Ultan’s Hospital pioneered the introduction of the BCG vaccine to Ireland and in 1949 a dedicated BCG centre opened there and when the National BCG Committee was established by Dr Noel Browne it was based in the hospital.

Site development works on the Dublin Sanatorium (James Connolly Memorial Hospital) commenced in November 1949 and the hospital was officially opened in April 1955. It provided accommodation for 540 patients and the site contained twenty-six separate buildings. A new sanatorium at Ballyowen was formally handed over on 28th April 1952. This was reopened as a psychiatric hospital, St. Loman’s, in 1961.

Existing tuberculosis hospitals continued to be extended. Three new 40 bed ward units at Pearmount Sanatorium were opened by Dr. Browne, in July 1949.

However, by the mid to late 1950s the incidence of tuberculosis had happily fallen to such a degree that many tuberculosis institutions in Dublin closed including the Rialto Chest Hospital (which became part of St. Kevin’s Hospital), the Pigeon House Road Sanatorium, and Crooksling Sanatorium.

The Irish Hospitals Sweepstakes played a major role in financially supporting voluntary hospitals whose traditional sources of income had diminished after the Great War and in providing finance for the construction of new hospitals, many of them of a specialist nature.

In May 1954 St. Luke’s Cancer Hospital, Rathgar, was opened by Dr. James Ryan, Minister for Health. This 160 bed cancer hospital cost over £650,000. The Cancer Association of Ireland, set up in 1949, had acquired the Oakland estate three years earlier.

St. Mary’s Orthopaedic Hospital, Ballydine, formally opened on the 4th of July 1956.

On the 21st of November 1956 Our Lady’s Hospital for Sick Children was opened and entrusted to the care of the Sisters of Charity of St. Vincent de Paul. Planning for this hospital had been begun in the early 1930s.

The Westmoreland Lock Hospital was renamed after St. Margaret of Cortona in 1946 and was closed in the late 1950s due to a fall in admissions.

In 1936 the Dublin Fever Hospital Act made provision for the closing of the House of Recovery and Fever Hospital in Cork Street and the establishment of a new fever hospital near the city. The new hospital, Cherry Orchard, opened in November 1953 at Blackditch, Palmerstown.

While the Hardwicke Fever Hospital, the Richmond Surgical Hospital and the Whitworth Medical Hospital were known legally as the House of Industry Hospitals, they...
were known collectively as the Richmond until 1945, when the name was changed to St. Laurence’s Hospital. Plans were drawn up to build a large new general hospital on the site but this project was later abandoned.

Nevertheless, considerable extensions continued to be made to existing voluntary hospitals and a new 80 bed genito-urinary unit at Dublin’s Meath Hospital opened on the 17th of November 1955.

By March 1957, 22% of the population in the Dublin Board of Assistance area, 26.6% in Balrothery and 19% in Rathdown were on the general medical services register and were entitled to free hospital services.

In May 1964 the foundation stone of a new Coombe Hospital was laid in Dolphin’s Barn and the new hospital opened on the 15th of July 1967.

Re-organisation of the hospital services in the Dublin area in the last three decades of the 20th century saw the construction of three large new hospitals, the closure of several smaller hospitals and the re-designation of others. As a result of the decline in tuberculosis, James Connolly Memorial Hospital was established in 1971 as a general hospital. St. James’s hospital was constructed on the site of St. Kevin’s in the 1970s. The services of such historic hospitals as Mercer’s, Sir Patrick Dun’s, Dr Steeven’s and the Royal City of Dublin hospital in Baggot Street, all of which closed in the 1980s, were incorporated into the new hospital. Beaumont, which opened in November 1987, took over the services of Jervis Street and St. Laurence’s which closed around the same time. Tallaght, which opened in June 1998, took over the services of the Adelaide, the Meath and the National Children’s Hospital following the closure of these hospitals.
Records in Other Locations

**National Archives, Bishop Street, Dublin 8.**
The National Archives holds collections relating to the following Dublin hospitals:
- House of Industry and the House of Industry Hospitals (The Hardwicke, the Richmond and the Whitworth)
- North Dublin Poor Law Union
- South Dublin Poor Law Union (later the Dublin Union and St. Kevin's Institution)
- Rathdown Poor Law Union (later St. Columcille’s Hospital, Loughlinstown)
- Rotunda Hospital
- Charitable Infirmary (Jervis Street)
- City of Dublin Skin and Cancer Hospital, Hume Street
- Coombe Women and Infant’s University Hospital
- Mater Misericordiae Hospital
- Meath Hospital
- Mercer’s Hospital
- Military Orthopaedic Hospital, Blackrock
- Royal City of Dublin Hospital, Baggot Street
- St. Brendan’s Mental Hospital, Grangegorman, (formerly the Richmond Lunatic Asylum, the Richmond District Lunatic Asylum and Grangegorman Mental Hospital)
- Dublin Corporation Tuberculosis Hospitals (including St. Mary’s Chest Hospital and Rialto Hospital)
- Peamount Sanatorium
- Monkstown Hospital, Rathdown Dispensary and Rathdown Fever Hospital

**Royal College of Surgeons**
Jervis Street (minute books, 1828 – 58, subscription books, 1748 – 1832)

**Royal College of Physicians, Dublin**
Cork Street Fever Hospital
St. Ultan’s Hospital for Children
Sir Patrick Dun's Hospital
Westmoreland Lock Hospital

**Trinity College, Dublin**
Adelaide Hospital
Dr. Steevens’ Hospital

**Representative Church Body**
Gascoigne Home

Survival of Records in Hospital Institutions

The longest established and most extensive range of hospital institutions in the country are in Dublin city and county. While the active interaction between archival institutions in the capital and hospital authorities have ensured, in the past, the preservation of many collections of records relating to hospitals which have ceased to exist, many functioning hospitals continue to hold archives of great historical interest and of national significance, some of them dating back to the 18th century. A few hospitals, such as Simpson’s Hospital and St. Patrick’s Hospital, have employed a professional archivist on a part-time basis. Others, such as the Mater and the Children’s University Hospital in Temple Street, have had dedicated members of staff who have acted in an archival capacity, in addition to their other duties.

Most collections, however, have not had the benefit of professional archival attention. Virtually every hospital visited had early records of some sort, some dating back to their foundation, some even relating to earlier incarnations of a hospital nature such as the James Connolly Memorial Hospital which was opened initially as a TB hospital and still holds important records which chronicle the decline of that disease.

The range of medical endeavor reflected by these collections is astonishing and these records chronicle a hospital heritage of extraordinary diversity and sophistication. Many of these institutions are still in their original buildings and this has been a factor in ensuring the survival of material.
In 1505, the Mayor of Galway, Stephen Lynch, reputedly founded a hospital in High Street, Galway, for the relief of the poor. A small public infirmary opened in Woodquay in the late 17th century. This hospital later moved to Abbeygate Street and, in 1802, to Prospect Hill. Under the Galway Hospitals Act of 1892, the board of management of this infirmary included poor law union representatives from the Galway area. A fever hospital also opened in Galway town in 1822. Ballinasloe Asylum opened in 1833 as the Connaught Asylum to cater for the counties of Galway, Roscommon, Mayo, Sligo and Leitrim, and the town of Galway. From the 1870s, following the opening of separate asylums in Mayo and Sligo, it catered only for Galway and Roscommon. By 1849 there were fever hospitals at Galway and Loughrea and 27 dispensaries in the county.

There were formerly ten workhouses in Galway. The following were opened during the initial and major phase of workhouse construction in the 1840s: Ballinasloe (January 1842), Clifden (March 1847), Galway (March 1842), Gort (December 1841), Loughrea (February 1842), and Tuam (May 1846). Four workhouses in the county were opened in the 1850s: Glennamaddy (circa 1853), Mountbellew (May 1852), Oughterard (June 1850), and Portumna (February 1850).

The County Scheme

During the War of Independence, as in other counties, there was a major re-organisation of the hospital services in County Galway in the interests of economy and efficiency. The Galway County Scheme was perhaps the most extreme example of centralisation of any such scheme in the country. Most of the workhouses in the county were closed or discontinued and their staff pensioned off. Only three workhouses were utilised in connection with the County Scheme: Loughrea workhouse became the county home, Galway workhouse became the county hospital, and Tuam workhouse became a children’s home. Of the remaining seven workhouses, Clifden, Oughterard and Gort had been burnt and Ballinasloe, Glenamaddy, Mountbellew, and Portumna were not used for hospital purposes. The Report of the Commission on the Relief of the Sick and Destitute Poor, published in 1927, gives an interesting insight into operation of the public hospitals in the county in the years immediately following the founding of the State. The Commission noted that despite the fact that the county was second only in extent to County Cork, no district hospitals were provided under the scheme. They recommended the establishment of a district hospital at Clifden and thought that one would also be justified for Ballinasloe. The children’s home at Tuam was for children and unmarried mothers and the institution was conducted by the Bon Secours Sisters who were paid by the Board.
of Health at a fixed rate for each inmate. While the Board was supposed to have put the old workhouse building in which it was situated in order, by the time of the Commissioners visit in October 1925, this had not been done and “signs of dilapidation and decay were painfully evident. Its continuance in the condition in which we saw it would be a grave injustice to the Sisters and militate very much against its usefulness for the purposes to which it has been allocated”. In December 1924, the Galway Hospital, formerly known as the infirmary, was closed and the workhouse in Galway, which had been reconstructed, opened in January 1925 as the Galway Central Hospital. By 1930 it included a medical and surgical hospital of 220 beds, a fever hospital of 60 beds and a maternity hospital of 18 beds, all of which had the most modern equipment. It was a heavily centralised system and patients in need of hospital treatment were brought in by ambulance to Galway city from all parts of the county.

In 1928 the Department of Local Government and Public Health amended the county scheme to make provision for the establishment of district hospitals in Clifden and Ballinasloe, although there was local opposition from ratepayers on account of the financial burden it would place on the rates. The district hospital in Clifden was constructed in the early 1930s at a cost of £14,000 and opened in 1935. From 1953 it was known as Our Lady of Fatima Hospital.

Ballinasloe eventually got its hospital in 1943 when Portiuncula was founded by the Franciscan Missionaries of the Divine Motherhood. The name Portiuncula is derived from the first church of St. Francis of Assisi. The hospital was originally based in two houses in Mount Pleasant, Ballinasloe, before moving to its present location in Brackemagh in 1945. The hospital was initially intended to cater for private cases, but, by subsequent arrangement with the local authorities, served as a general hospital for the district. On the 17th of October 1949, Dr. Noel Browne turned the first sod of an extension which would cost £250,000 and increase the number of beds from 60 to 140.1

While the mental hospital in Ballinasloe acquired a building called “The Pines” not far from the main complex in June 1924, overcrowding remained a problem. By the following August the hospital had accommodation for 1317 patients but there were 1503 in residence. In 1940 an auxiliary mental hospital was built at Castlerea.

In an effort to combat the scourge of tuberculosis, Galway County Council purchased Renmore House which opened as Woodlands Sanatorium in 1924. Renmore was located about a mile from the town, on its own grounds of 17 acres. In 1930 it afforded accommodation for 49 patients. Woodlands later became an orthopaedic hospital.

By the late 1940s there were the following medical institutions in the county: Ballinasloe mental hospital (1,900 beds), a county home at Loughrea, a children’s home and maternity hospital in Tuam, which was a special hospital (rate aided) catering for the counties of Galway and Mayo (8 beds), a district hospital at Clifden (23 beds), the Franciscan Missionary Sisters’ Hospital, Portiuncula (36 beds), Galway Central Hospital (441 beds), and Woodlands Sanatorium, Renmore (132 beds).

Galway Central Hospital was eventually replaced by Galway Regional Hospital. The latter was built in stages over several years. The clearing of the site began in 1933. A new nurses’ home and a new maternity block were provided before 1939 but the outbreak of the war slowed progress. The new hospital initially comprised a main hospital block, a maternity block, children’s unit, fever unit, staff quarters, service block and some temporary buildings. The main hospital block accommodated 284 patients, the maternity block 60 and the children’s unit 40. It was a medical teaching centre and trained nurses and

1. Irish Independent, 18/10/1949.
midwives. It was officially opened in November 1955.

On the 22nd of September 1949 a contract was signed for the erection of the Western Regional Sanatorium, Merlin Park, Galway, and the first sod was cut by the Minister for Health on the 6th of February 1950. It opened in 1954 but due to the fall in the incidence of TB it was, within a few years, being used for orthopaedic cases and long term geriatric care.

By March 1957, 28% of the population in Galway was on the general medical services register which entitled them to free hospital and specialist services.

The present Galway University Hospital comprises University Hospital Galway (the successor to the Regional Hospital, Galway) and Merlin Park University Hospital.

Around 1974 the following institutions remained in the county: St. Brigid’s Psychiatric Hospital, Ballinasloe (1,366 beds), a district hospital at Clifden (39 beds), St. Anne’s geriatric home at Clifden (42 beds), Regional Hospital, Merlin Park, Galway (614 beds), Regional Hospital, Newcastle, Galway (600 beds), and St. Brendan’s Geriatric Home, Loughrea (360 beds).

In 1971 the county became part of the Western Health Board.

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A county infirmary was in operation in Tralee in the late 18th century and was described rather unflatteringly in 1788 as “a ruinous building – the roof falling in”. Fever hospitals opened in Killarney in 1800 and Tralee in 1814. Limerick asylum, opened in 1827, originally catered for County Kerry, but in 1852 the Killarney District Lunatic Asylum (later St. Finian’s) opened in Killarney which catered solely for the county.

By 1849 there were fever hospitals at Tralee, Killarney, Listowel and Caherciveen and 28 dispensaries in the county. The poor law unions established in County Kerry were: Caherciveen (workhouse opened October 1846), Dingle (temporary workhouse opened June 1848), Kenmare (workhouse opened October 1845), Killarney (workhouse opened April 1845), Listowel (workhouse opened February 1845) and Tralee (workhouse opened February 1844). A voluntary hospital was established in Valentia in 1871 in a wooden building donated by the post office authorities. This hospital was extended in 1881.

The County Scheme

In Kerry, as in other counties, there was a major re-organisation of the local hospital services during the War of Independence. A County or Workhouse Amalgamation Scheme was initiated to place the local hospital infrastructure on a more efficient and economic basis. The joint committees of management of the county infirmary in Tralee and county fever hospitals at Killarney and Tralee (Moyderwell) were abolished under the county scheme which came into effect on the 1st of August 1921. The county scheme initially provided for the establishment of only two institutions, viz., a county home at Killarney and a county hospital at Tralee, but subsequent amendments provided for district hospitals at Listowel, Killarney, Dingle and Caherciveen, and a children’s home in Kenmare.

The report of the Commission on the Relief of the Sick and Destitute Poor, published in 1927, gives a vivid insight into the operation of the local hospital services during the mid 1920s, a period of great economic distress and political uncertainty. The county home in Killarney was in part of the old workhouse and provided, under the scheme, for the reception of aged and infirm persons, chronic invalids, children and unmarried mothers. The county hospital in Tralee was divided into three sections: the medical section in part of the old Tralee workhouse, the surgical in the old county infirmary and the fever in the male infirmary in the workhouse. The Listowel district hospital was in the infirmary section of the old workhouse, Killarney district hospital was in the front portion of the workhouse there, and the Caherciveen district hospital was located in the old workhouse fever hospital. The children’s home in
Kenmare had not been established at the time of the Commissioners report and a district hospital was eventually opened there around 1928. The Dingle district hospital was situated in the old workhouse and there were 49 patients there in 1925. The hospital was in a very poor state of repair in the late 1920s and the right wing was destroyed by fire in 1931.

Later 20th Century Developments

By the early 1930s the staff at Valentia Cottage Hospital included one nurse, one maid, a secretary and a visiting doctor. While the hospital was mainly supported by voluntary contributions, the Kerry Board of Health also gave the hospital a subvention. The advent of the Irish Hospitals Sweepstakes provided funding for the modernisation and expansion of the local hospital infrastructure. Dingle hospital was reconstructed with Sweepstakes money and a 150 bed county hospital in Tralee opened on the 23rd of June 1934. A new district hospital opened in Kenmare in February 1936. On the 26th of October 1939 two new hospitals were opened in Killarney, a district hospital and a fever hospital. A new district hospital opened in Listowel on the 9th of June 1941. Our Lady’s and St. Teresa’s Tuberculosis Hospital opened at Edenburn, an old residence of the Hussey family, on the 2nd of August 1937. Staffed by the Bon Secours nursing order, it contained beds for 104 patients and cost £36,000. It later became a home for the elderly and closed in 1987.

By the late 1940s, the following hospitals were operating in the county: a county home at Killarney (537 beds), Killarney mental hospital at Killarney (800 beds), county hospital at Tralee (St. Catherine’s) (141 beds), district
hospitals at Cahirciveen (18 beds), Dingle (St. Elizabeth’s - 46 beds), Killarney (27 beds) and Kenmare (27 beds), a district and fever hospital at Listowel (63 beds), St. Anne’s Isolation Hospital at Killarney (44 beds) and Tralee fever hospital (37 beds). There was also the public voluntary hospital, Valentia Village Hospital, at Valentia Island. By March 1957, 36% of the population of the county were on the general medical services register which entitled them to free hospital and specialist services provided by the local health authorities.

A new 34 bed district hospital at Cahirciveen was opened on the 7th of June 1955. The building of the hospital had begun in 1952 and it replaced the existing district hospital, which was in a very bad condition structurally. It cost £100,000.

In 1971, the county became part of the Southern Health Board.

The old Dingle Community Hospital (St. Elizabeth’s) was replaced by West Kerry Community Hospital in Dingle in 2010.

List of Institutions Visited

Caherciveen Community Hospital
Dingle Community Hospital
Kenmare Community Hospital
St. Columbanus Hospital, Killarney
Killarney District Hospital (now Killarney Community Hospital)
Listowel Community Hospital

Records in Other Locations

County Archives
Minute Books of the Kerry Board of Health, 1922-42
Records of the Poor Law Unions, 1840-1922
Records of the St Finan’s Mental Hospital.
County Infirmary minutes, 1812 – 1913

Limerick Archives
Records of the Limerick Asylum, opened in 1827, which catered for Kerry before the establishment of St. Finian’s in 1852, are in the Limerick Archives.

Survival Of Records Of Hospital Institutions

Extensive records survive relating to the county home in Killarney, the refurbished buildings of which is still used by St. Columbanus’ Hospital. There is a very good survival of records for the local community hospitals, some of which relate to earlier institutions which they replaced, and they give a great insight into local conditions and the administration of the hospitals during the course of the 20th century. In Dingle, some of the entries in the early registers are in Irish.
A county infirmary was established in Kildare town in 1769 and fever hospitals in Naas and Celbridge in 1819, and Athy in 1841. Carlow district lunatic asylum, which opened in 1832, also catered for the county of Kildare. By 1849 there were fever hospitals at Celbridge, Kilcullen, Naas and Athy and there were 16 dispensaries in the county. There were three workhouses in County Kildare, Athy (opened January 1844), Naas (opened August 1841) and Celbridge (opened June 1841), and parts of the unions of Edenderry and Baltinglass were situated partly in the county. A lock hospital for the treatment of venereal disease operated on the northern outskirts of Kildare town between 1869 and 1887. A cottage hospital, the Drogheda Memorial Hospital, opened at Lumville, the Curragh, in April 1899, in memory of the late Lord Drogheda, for the reception of patients suffering from any sort of accident or complaint.

**The County Scheme**

During the War of Independence a major re-organisation of the public hospital infrastructure took place. Under the County or Amalgamation Scheme the workhouse of Athy union became the county home which was to cater for the aged and infirm, chronic invalids, and expectant mothers. The Commission on the Relief of the Sick and Destitute Poor visited the county home in the mid 1920s and also noted that there were mental defectives, unmarried mothers and children present in the home, categories of patients not intended in the original scheme.

The county hospital was then situated in the infirmary part of Naas workhouse and the old fever hospital there functioned as the county institution for the treatment of contagious and infectious disease.

The county infirmary, described by the Commission as a well-managed institution of 40 beds, was not brought under the management of the County Board of Health.

The county infirmary became known as St. Brigid’s Hospital. It was the surgical hospital for County Kildare and closed around 1961. In 1934, St. Conleth’s Sanatorium, situated at Firmount, Sallins, County Kildare, was formally opened to deal with cases of chronic and acute tuberculosis from the county. A new 50 bed county fever hospital was built in Naas and formally opened on the 21st of July 1938.

In the late 1940s the local hospital infrastructure included a county home in Athy, a surgical county hospital in Kildare (42 beds), a county fever hospital at Naas (42 beds), a district hospital in Naas (87 beds), a sanatorium - St.

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1. The Kildare Observer, 10/02/1934.
Conleth’s Sallins - (30 beds) and a general public voluntary hospital – the Drogheda Memorial Hospital – at the Curragh, County Kildare (14 beds).

St. Raphael’s, an institution for those with intellectual disabilities run by the Hospitaller Brothers of St. John of God, opened in Celbridge in November 1955. The Irish Hospitals Sweepstakes provided funding over the years for a staff home for the county hospital in Kildare, a county fever hospital of 50 beds in Naas, St. Conleth’s Sanatorium (40 beds), and improvements and extensions to St. Brigid’s Sanatorium. By March 1957, 28% of the population of the county were on the general medical services register and were entitled to free hospital and specialist services provided by the local health authorities.

St. Mary’s Hospital, Naas, a 44 bed institution which had been used for sanatorium accommodation, was converted into a maternity hospital in the late 1950s. St. Vincent’s Hospital, Athy, the former county home, is now a residential care centre.

Naas General Hospital was built on part of the site of the old Naas workhouse from the 1980s onwards and now provides acute hospital services for the population of Kildare and West Wicklow. Kildare became part of the Eastern Health Board in 1971.

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List of Institutions Visited

Drogheda Memorial Hospital, The Curragh
Naas General Hospital
St. Vincent’s Hospital, Athy

Records in Other Locations

County Library
Minute books of the Board of Health and Public Assistance
Small collection of records relating to the County Hospital, Naas
Some records relating to St. Vincent’s Hospital, Athy, the old county home

Delaney Archive
Records of St. Dymphna’s Mental Hospital, Carlow, which also catered for Kildare

Survival of Records in Hospital Institutions

St. Vincent’s Hospital, Athy, was originally the Athy workhouse, and, after that, the county home. The records relating to the county home are particularly extensive and some earlier material relating to Athy workhouse has already been transferred to the county library. A small but most unusual and interesting collection of records survives for the Drogheda Memorial Hospital, The Curragh, a cottage hospital established in 1899.
There was a county hospital in Kilkenny in the late 18th century. In 1787 it was described as a spacious house, with only 5 patients. A public lunatic asylum, supported by Grand Jury grants, was established in the city of Kilkenny in 1817. The new asylum at Carlow, which opened in 1832, also catered for Kilkenny. In 1852, the Kilkenny District Lunatic Asylum opened to cater for the county of Kilkenny and Kilkenny City.

Five workhouses were opened in County Kilkenny; Kilkenny (April 1842), Thomastown (March 1853), Castlecomer (opened after 1850), Callan (March 1842) and Urlingford (November 1852). A private hospital, Aut Even, was established in 1915.

The County Scheme

During the War of Independence there was a major transformation of the local hospital infrastructure in the county. Under the Amalgamation or County Scheme a county home was established in the old Thomastown workhouse and provided for the reception and maintenance of aged and infirm persons, chronic invalids, children, expectant unmarried mothers, and harmless lunatics.

The old Kilkenny workhouse became the medical section of the county hospital and the county infirmary became the surgical section of the same institution. Fever cases were treated in the old Kilkenny fever hospital, a detached building situated a short distance from the old county infirmary.

In the infirmary of Castlecomer workhouse a district hospital was established and served the area of the old Castlecomer union. The original county scheme provided that this hospital would be kept open if the mine-owners and miners gave a joint guarantee to pay half the cost of maintenance.

Later 20th Century Developments

The advent of the Irish Hospital Sweepstakes in 1930 made available funding which modernised the local hospital infrastructure over the succeeding decades.

A new 150 bed county hospital was opened on the 18th of December 1941 in Kilkenny at a cost of £118,000. The building of this hospital had begun in 1936 and it replaced the Kilkenny county infirmary, which was located in John’s Green.

In 1951 the Kilkenny county home in Thomastown was renamed St. Columba’s and thereafter was primarily concerned with the care of the elderly.
In August 1947, Kilkenny County Council purchased Kilcreene House for use as an orthopaedic hospital. The house was demolished in the 1950s and a new 90 bed hospital was built there in 1958 and opened for the treatment of orthopaedic patients from Kilkenny, Carlow, Laois, Offaly, Tipperary and Waterford. The hospital was renamed the Lourdes Orthopaedic Hospital in 1959.

The Hospitals Sweepstakes also funded the conversion of an auxiliary sanatorium in Kilkenny and additions to the mental hospital. The Auxiliary Hospital closed in 1959 and became a 36 bed auxiliary to St. Luke’s Hospital but that also eventually closed in 1987.

By the late 1940s the hospital institutions in the county included a county home at Thomastown, a county hospital at Kilkenny (129 beds), a new county hospital at Kilkenny (136 beds), a district hospital at Castlecomer (28 beds), a fever hospital at Kilkenny (40 beds), a county sanatorium at Kilkenny (45 beds) and a district mental hospital at Kilkenny (534 beds).

By March 1957, 40% of the population of the county were on the general medical services register which entitled them to free hospital and specialist services provided by local health authorities.

In 1971 the county became part of the South Eastern Health Board.

The county hospital became St. Luke’s General Hospital and in recent years has been extended significantly. A new 45 bed Department of Psychiatry serving the Carlow/ Kilkenny area opened in March 2003.

**List of Institutions Visited**

- St Canice’s Psychiatric Hospital, Kilkenny
- St Luke’s General Hospital and Regional Orthopaedic Hospital, Kilcreene
- St Columba’s Hospital, Thomastown

**Records in Other Locations**

**National Archives**

Kilcreene Orthopaedic Hospital records

**County Library**

Board of Health and Public Assistance minute books

**HSE Library, St. Lukes, Kilkenny**

Kilkenny County Infirmary minute books, 1859 – 1921

Kilkenny Board of Health minute books, 1921 - 27

**Survival of Records in Hospital Institutions**

Particularly impressive and extensive collections of records survive relating to both St. Canice’s Mental Hospital and the old county home in Thomastown.
A county infirmary opened in Portlaoise in 1766 and a fever hospital in 1838. Maryborough District Lunatic Asylum (later St. Fintan’s Mental Hospital), which opened in Portlaoise in 1833, served the county of Laois and adjoining counties. There were only three workhouses in Laois; Mountmellick (opened January 1845), Abbeyleix (opened in June 1842), and Donaghmore (opened September 1853) although the unions of Athy, Carlow and Roscrea also extended into the county. By 1849, there were fever hospitals at Mountrath and Doonane and 21 dispensaries in the county. Donaghmore Poor Law Union was dissolved in 1886.

The County Scheme

During the War of Independence, County or Amalgamation Schemes, re-organised the local health infrastructure. Under the Laois County Scheme, which came into operation on the 1st of May 1921, Mountmellick workhouse became the county home and the infirmary of the Abbeyleix workhouse became a district hospital. A county hospital was established in the old county infirmary at Portlaoise.

The County Scheme Order provided that the county home should be for aged and infirm persons, chronic invalids, epileptics and idiots. The Commission of the Relief of the Sick and Destitute Poor, who visited the county in the mid 1920s, found that there were also in residence unmarried mothers, lunatics and children. The county hospital operated in conjunction with the district hospital in Abbeyleix, the county hospital dealing with the more acute and serious operation cases, and the district hospital receiving medical cases from all parts of the county. They noted that provision for maternity cases for respectable women was made in Abbeyleix hospital and three wards on the female side were set aside for infectious diseases cases.

Shaen House, near Portlaoise, was acquired by the Laois Board of Health to treat those with tuberculosis and opened in 1929. It became known as St. Brigid’s Sanatorium. Following a reduction in the number of tuberculosis cases it became an auxiliary mental hospital. A new fever hospital was constructed on part of the site of Abbeyleix workhouse at a cost of £50,000 and this opened in 1936. The district hospital continued to operate from an older building.

By the late 1950s the number of infectious cases had decreased dramatically and it was decided to turn the new fever hospital into a general district and maternity
hospital.\(^1\) In October 1964 this reopened as a 42 bed district hospital.\(^2\)

The foundation stone of a new 90 bed county hospital at Portlaoise was laid on the 17th of December 1936. This later became the Midland Regional Hospital, Portlaoise.

By the late 1940s the county hospital infrastructure included a county home in Mountmellick, a county hospital in Portlaoise (71 beds), a district hospital in Abbeyleix (104 beds), a sanatorium, St. Brigid’s, at Portlaoise (45 beds) and a district mental hospital at Portlaoise (660 beds).

By March 1957, 31.4% of the population in the county were eligible for free hospital and specialist services provided by the local health authorities. The county became part of the Midland Health Board in 1971.

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1. Irish Independent, 13/05/1955.

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List of Institutions Visited
Abbeyleix Community Nursing Unit
St. Brigid’s Hospital, Shaen, County Laois
St. Fintan’s Hospital, Portlaoise
Midland Regional Hospital, Portlaoise
St. Vincent’s Community Nursing Unit, Mountmellick

Records in Other Locations
County Library

Survival of Records in Hospital Institutions
There is a very particularly good survival of hospital records in County Laois. Important collections survive for St. Fintan’s (mainly post-1900 records, but also minutes of the Board of Health and Public Assistance); the County Hospital; Abbeyleix District Hospital and the County Home in Mountmellick. Some records also survive for St. Brigid’s Hospital, Shaen.
A county infirmary was established in Carrick-on-Shannon in 1805 and a fever hospital in Mohill in 1842. By 1849 there were 10 dispensaries in the county. Ballinasloe Asylum, which opened in 1833, initially also served the county of Leitrim. The Sligo District Lunatic Asylum, which opened in 1855, catered for the counties of Leitrim and Sligo.

There were three workhouses in County Leitrim; at Carrick-on-Shannon (opened July 1842), Manorhamilton (opened December 1842), and Mohill (opened June 1842).

The County Scheme

During the War of Independence, County or Amalgamation schemes were introduced by the local authorities with the object of making the local hospital infrastructure more efficient and economic. The Leitrim county scheme came into operation on the 5th of November 1921. Under the scheme, the main county institutions were situated in north Leitrim. The county home was situated in Manorhamilton, in the body of the old Manorhamilton workhouse. The county hospital was situated in the old workhouse infirmary, at the back of the county home. There was a district hospital in Carrick-on-Shannon, in the old county infirmary building. There was a fever hospital behind the county hospital in Manorhamilton and fever cases in Carrick-on-Shannon were treated in the old workhouse fever hospital there. The Mohill workhouse was closed, staff were pensioned off and the inmates were transferred to the county home in Manorhamilton. The Commission on the Relief of the Sick and Destitute Poor visited the county in the mid 1920s and noted in their subsequent report in 1927 that, as south Leitrim had the greater population, a higher rateable valuation and a larger area than north Leitrim, the county home and county hospital should have been located in Carrick-on-Shannon, in the south of the county.

In 1936, as a response to these concerns, all the inmates and officials were transferred from the old county home at Manorhamilton to a new county home which had been opened in the old workhouse at Carrick-on-Shannon.¹

The Mohill workhouse fell into a state of dilapidation in the 1920s and was partly occupied by local homeless families. A district hospital opened in part of the structure about 1935.

¹. Irish Times, 14th November 1936.
In the late 1940s the county had the following hospital institutions: St. Patrick’s Home, Carrick-on-Shannon (100 beds), County Leitrim Infirmary and District Hospital at Carrick-on-Shannon (26 beds), St. Manachan’s District Hospital at Mohill (16 beds), and the Surgical Hospital, Manorhamilton (53 beds).

The fever hospital at Carrick-on-Shannon was closed on the 14th of November 1948 and the permanent staff transferred to the county home.² Fever cases requiring hospitalisation were subsequently sent either to fever hospitals in Roscommon or Sligo.

A new general hospital at Manorhamilton, County Leitrim was commenced in October 1950³ and opened in July 1954 as Our Lady’s Hospital. It was the first of the new general hospitals to be built under the new post-war hospital building programme and provided 61 beds – 26 medical beds, 24 surgical beds, 7 maternity beds and a 4 bed children’s ward.

By March 1957, 13% of the population in the county were eligible for free hospital and specialist services provided by the local health authorities.

In 1971 the county became part of the North Western Health Board.

² NAI, Department of Health file A 16/45.
13 Limerick

A county infirmary opened in Limerick City in 1759. A house of industry was also established in the city in 1774 under the Irish Poor Law of 1771 – 72. St. John’s Fever Hospital was established in 1780 but became a general hospital in 1886. The Limerick Lying-In Hospital was established by a number of local charitable ladies in 1812. The hospital moved, in 1866, to the corner of Bedford Row and Henry Street and was known thereafter as the Bedford Row Lying-in Hospital. Barrington’s Hospital was founded by Sir Joseph Barrington in 1829 and granted a charter in 1830. Fever hospitals opened in Adare in 1830, Newcastle and Rathkeale in 1831, and KIlfinane in 1838. Limerick Asylum opened in 1827 to cater for the city of Limerick, and the counties of Limerick, Clare and Kerry. By 1849 there were 32 dispensaries in the county. There were workhouses at Croom (opened January 1853), Limerick (opened March 1841), Kilmallock (opened March 1841) and Rathkeale (opened July 1841). The house of industry closed soon after the Limerick workhouse opened. In 1860 Limerick workhouse was the first such institution to be run by the Sisters of Mercy. The Nursing Sisters of the Little Company of Mary began working in St. John’s in 1888.

During the War of Independence there was, as in other counties, a major re-organisation of the local hospital infrastructure. County or Amalgamation Schemes were introduced which reduced the number of poor law institutions. In Limerick, there were separate county and borough schemes.

The County Scheme

The Limerick county scheme provided for the establishment of a county home at Newcastle West and a county hospital at Croom. The Commission on Relief of the Sick and Destitute Poor, who visited Limerick in the mid 1920s, noted that considerable expenditure was incurred in adapting the old Newcastle West workhouse for use as a county home which was to cater for aged and infirm persons, chronic invalids, idiots, epileptics, advanced cases of tuberculosis, and unmarried mothers and their children. The home also contained harmless lunatics in the 1920s. The Croom workhouse was remodelled to serve as a county hospital. The old fever hospital there became the county fever hospital.

County Borough Scheme

There was a similar scheme in the county borough area which provided for a borough home and a borough hospital. Both of these utilised the old Limerick workhouse: the home was in the body of the workhouse and the hospital in the old infirmary wards. The Commission noted that the old Limerick workhouse had formerly served not only Limerick city but large rural areas.
in the counties of Limerick and Clare. The severance of the city from those areas under the county and county borough schemes meant that the number of inmates had fallen from 1,000 to 398, and many of the buildings were unoccupied. The Commission commented in their subsequent report that the number of staff seemed excessive which meant that a serious financial burden was thrown on the city ratepayers.

**Later 20th Century Developments**

Funding from the Irish Hospitals Sweepstakes helped modernise the local hospital infrastructure from the 1930s. The county hospital in Croom, the mental hospital, Barrington’s Hospital, St. John’s Hospital, the Limerick county infirmary in Mulgrave Street and the Bedford Row Lying In Hospital all benefitted from financial assistance from the Sweepstakes. The city home and hospital was also a major beneficiary and was extensively reconstructed, an 80 bed tuberculosis hospital was provided, a fever hospital, ophthalmic, skin and orthopaedic departments, a staff home, a thoracic surgical unit and a tuberculosis clinic.

In the late 1940s, the county and city hospital infrastructure included the city home and hospital, at Limerick City (170 beds), a county infirmary in Limerick city, a district mental hospital at Limerick (909 beds), a Limerick county hospital at Croom (202 beds), a county home at Newcastle West, Barrington’s Hospital and City of Limerick Infirmary, George’s Quay, Limerick (82 beds), St. John’s Hospital (72 beds) and the Lying-In Hospital, Bedford Row.

In 1934 the Hospitals Commission recognised the need for a new maternity hospital in Limerick. This was formally opened on the Ennis Road on the 21st of November 1960 as St. Munchin’s Regional Maternity Hospital. It is now the University Maternity Hospital. The Lying In Hospital in Bedford Row remained in use until financial difficulties forced it’s closure in 1975.

St. Senan’s Home, a 100 bed sanatorium for children suffering from primary tuberculosis, opened in Foynes in July 1949.1

Work on the site at Limerick Regional Hospital commenced in 1949, the erection of buildings began in March 1950 and was completed by September 1955. The new hospital served Limerick city and county and also acted as a regional centre for North Kerry, Tipperary (N.R.) and Clare. Accommodation was available for 286 patients.2 Following the opening of the Limerick Regional Hospital, the hospital in Croom became the main orthopaedic hospital, a function it performs to the present day. By March 1957, 32% of the population of Limerick County and 43% of the population of Limerick City were on the general medical services register and were eligible for free hospital treatment. In 1971 the county became part of the Mid Western Health Board. Barrington’s Hospital closed in March 1988 and services at the hospital were transferred to the Regional Hospital and St. John’s Hospital. It subsequently re-opened as a private hospital. The City Home is now St. Camillus’ Hospital, a 100 bed community hospital. The Limerick Asylum later became St. Joseph’s Hospital and is now the administrative headquarters for the Limerick Mental Health Services.

### List of Institutions Visited

- St Camillus’ Hospital, Limerick
- St Ita’s Community Hospital, Newcastle West
- St John’s Hospital, Limerick
- St Nessan’s Hospital, Croom

### Records in Other Locations

#### National Library
- Resolution book of Kilfinane Fever Hospital, 1836 – 55 (Photostat)

#### Limerick Archives
- Bedford Row Lying-In Hospital,
- Limerick House of Industry, 1774 – 1893
- Limerick County Infirmary, 1835 – 1958
- St. Joseph’s Mental Hospital
- Poor Law Union minute books, 1842 – 1922

### Survival of Records in Hospital Institutions

Extensive collections of records survive for the former County Home (now St. Ita’s Community Hospital) and the former County Hospital (now St. Nessan’s Hospital Croom). The records of St. John’s Hospital are particularly early and a small collection of key 20th century records survives for the old City Home and Hospital, (now St. Camillus’ hospital).

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1. Irish Independent, 19/07/1949.

A county infirmary opened in Longford town in 1767. Maryborough Asylum, which opened in Portlaoise in 1833, also catered for the county of Longford.

There were three workhouses in Longford: Granard (opened September 1842), Longford (opened March 1842) and Ballymahon (opened July 1853).

In 1878, the Sisters of Mercy began their work among the sick poor in Longford workhouse. Padraic Colum, the poet and writer, whose father was master of the workhouse, was born there in 1881.

The County Scheme

During the War of Independence, the local hospital infrastructure was radically changed. Under the County or Amalgamation Scheme, Longford workhouse was used partly as a county home and partly as the medical section of the county hospital. The old county infirmary, which was situated in Longford town, became the county surgical hospital. The workhouses at Ballymahon and Granard were closed and their staff pensioned off and their residents sent to the county home.

Post war developments

By the late 1940s, there were the following medical institutions in the county; the Longford County Hospital, Battery Road, Longford (45 beds), the Longford Fever Hospital, Dublin Road, Longford (36 beds) and the County Home, Longford (110 beds). In 1952, the county home was renamed St. Joseph’s hospital. The old fever hospital on the site was completely renovated and modernised and became Mount Carmel. In the late 1960s most of the old workhouse/county home buildings were demolished and were replaced by the present St. Joseph’s hospital complex. Sister Calasanctus Duffy (1914 – 2011) was closely associated with the upgrading of the hospital facilities and the opening of St. Joseph’s Care Centre and there is a memorial to her in the grounds. By March 1957, 43.5% of the population of the county was entitled to free medical and surgical services. The surgical hospital was closed on the 31st of January 1986 during a rationalisation of the general hospital services.¹ In 1971 the county became part of the Midland Health Board.

List of Institutions Visited

St Joseph’s Care Centre

Records in Other Locations

County Archives

Poor Law Union minute books, Longford, 1839 – 1922; Granard, 1855 – 1920; Ballymahon, 1881 – 1921

Drumlish Dispensary Committee minute book, 1871 – 99

Board of Health and Public Assistance minute books, 1926 – 41

Survival of Records in Hospital Institutions

A small but important collection of key 20th century records survives relating to the former county home (now St. Joseph’s Care Centre).

¹. Longford Leader, 07/02/1986.
Louth

A county infirmary opened in Dundalk in 1755 in what is now Park Street. In 1835 it was replaced by a new building on the Ardee Road which survived as the Louth Infirmary until replaced by the county hospital on the Dublin road in 1960. There were three workhouses in County Louth; Ardee (opened May 1842), Drogheda (opened December 1841) and Dundalk (opened March 1842). During the 19th and early 20th centuries, Louth mental patients who required institutional care were accommodated at the Richmond District Lunatic Asylum, Grangegorman (later Grangegorman Mental Hospital). The Drogheda Cottage Hospital, Scarlett Street, Drogheda, opened in 1907. Two sisters, Miss Sidney Smith and Miss Rosa Smith, were responsible for raising money for its erection and they acted as secretaries of the hospital from 1908 to 1932. The institution followed the concept of a small hospital with a few beds where those patients who could not be conveniently treated in their own homes would be cared for by local physicians who were familiar with their case histories. The hospital was under the direction of a committee of not more than 20 or less than 10 ladies.

The County Scheme

The War of Independence saw County or Amalgamation Schemes introduced which usually dramatically reduced the number of poor law institutions in each county. The Louth county scheme was unusual in that the number of institutions operating in the county was not reduced. Under this scheme Drogheda and Dundalk workhouses became district hospitals. Ardee workhouse was used in 1922 for the accommodation of refugees fleeing the pogroms in the north. The Louth county scheme was unusual in that no central county home or hospital was established, but it provided that aged and infirm persons and chronic invalids should be received into each of the district hospitals. The old workhouses at Drogheda and Dundalk accommodated, in addition to the sick, the same classes found in county homes in other counties – the aged, lunatics, unmarried mothers and children. There were detached fever hospitals in both institutions.

A district hospital opened in Ardee in the late 1920s. It was based in a mansion formerly belonging to the Ruxton family and was bought by local interests initially for use as an auxiliary mental hospital but it opened as a district hospital, St. Joseph’s.

A new mental hospital was opened in Ardee in 1933 to cater for the county of Louth. In December 1939, the Medical Missionaries of Mary opened a maternity centre for Catholic women in Drogheda. In 1942 a new wing was added to the hospital, Our Lady of Lourdes, and it received recognition as a training school for Medical Missionary of Mary student midwives. A general hospital

Survey of Hospital Archives in Ireland

Louth continued

was built in the 1950s and 1960s to provide more general training for the Sisters.

By the late 1940s the county medical infrastructure included; a mental hospital at Ardee (400 beds), the Louth County Hospital, The Crescent, Dundalk (32 beds), the District Hospital, Drogheda (70 beds plus 170 for infirm patients), Dundalk District Hospital (122 beds), the District Hospital, Ardee (59 beds), Drogheda Cottage Hospital – a general public voluntary hospital (21 beds), and Our Lady of Lourdes Hospital – a general and maternity voluntary hospital – (73 beds).

In 1956 Louth county council, together with the other counties forming the North-Eastern Health Region, acquired Dunboyne Castle in County Meath as a home for unmarried mothers and arrangements were made with the Sisters of the Good Shepherd for its staffing and management.1

By March 1957, 20.5% of the population were entitled to free hospital and specialist services.

The three district hospitals continued to provide general institutional medical services for their respective districts into the 1950s. The Fatima T.B. unit had been established in Drogheda district hospital in 1952, Dundalk had a fever hospital extension completed by 1954 and Ardee had a maternity unit. When the Lourdes and Louth county hospitals opened in 1957 and 1960 respectively, this led eventually to the disappearance of the general medical and maternity facilities provided in Drogheda and Dundalk district hospitals and they were reclassified as county homes. County Louth became part of the North Eastern Health Board in 1971.

List of Institutions Visited

Louth County Hospital, Dundalk
St Brigid’s Psychiatric Hospital
Cottage Hospital, Drogheda
St Joseph’s Hospital, Drogheda
St Mary’s Hospital, Drogheda
St Oliver Plunkett’s Hospital, Dundalk
Our Lady of Lourdes, Drogheda

Records in Other Locations

National Archives
Records of Grangegorman Mental Hospital (later St. Brendan’s), which catered for the county prior to the opening of Ardee Mental Hospital in 1933.

County Archives
Minute books and proceedings of Louth County Board of Health and Public Assistance, 1924 – 42.
Minutes of the Ardee Mental Hospital Committee, 1932 – 42.
A range of health and public assistance files relating to union amalgamation and local hospitals.
Some bound volumes relating to Dundalk District Hospital, 1926 – 47, are also held.

Survival of Records in Hospital Institutions

County Louth has, historically, had an extraordinary wide range of hospital institutions, considering its size.
Extensive records survive for St. Brigid’s Mental Hospital, Ardee. Opened in 1933 it was the first new mental hospital constructed following the foundation of the State. The Drogheda Cottage Hospital and Our Lady of Lourdes Hospital have good records. A smaller collection also survives for Ardee District Hospital.

A county infirmary opened in Castlebar town in 1765. By 1849 there was a fever hospital at Ballina and there were 28 dispensaries in the county. Ballinasloe Asylum, opened in 1833, also catered for County Mayo. A separate asylum opened in Castlebar in 1866 exclusively for the county of Mayo. Workhouses opened in the 1840s at Ballina (November 1843), Ballinrobe (May 1842), Castlebar (October 1842), Claremorris (May 1852), Swinford (April 1846), and Westport (November 1845) and in the 1850s at Belmullet (September 1850), and Newport (July 1852). Newport Poor Law Union was dissolved in 1885.

The County Scheme

During the War of Independence there was a major re-organisation of the hospital infrastructure in the county under the Mayo county scheme. As amended in May 1924 this scheme provided for six institutions in the county: a county home at Castlebar, a county hospital at Castlebar, a district hospital at Ballina, a cottage hospital at Achill Sound, a fever hospital at Swinford and a fever hospital at Belmullet.

The county home was to be in Castlebar, for aged and infirm persons, children under three years of age and unmarried mothers. The Commission on the Relief of the Sick and Destitute Poor, who visited medical institutions in the county in the mid 1920s, found on the day of their visit that there were also lunatics, tubercular patients and children under three years of age present there. The county home utilised the old Castlebar workhouse. The county hospital was in the old county infirmary building but as the accommodation was insufficient, acute medical cases were sent to the county home, where they were accommodated in the old fever hospital building. The district hospital in Ballina was situated in the old workhouse infirmary – an unsuitable building which, the Commission noted, would require much expenditure to bring it up even to a moderate standard. No district hospital had been built at Achill when the Commissioners visited. The fever hospitals at Swinford and Belmullet were detached buildings in the grounds of the old workhouses there. The Commission commented that, although not contemplated by the scheme, there was a district hospital in Swinford situated in the infirmary part of the old Swinford workhouse, although they doubted “owing to its location at the back of a ruinous building, that it could ever be made suitable”.¹ There was no district hospital at

¹. Report of the Commission on the Relief of the Sick and Destitute Poor, including the Insane Poor, 1927, page 38.
Belmullet and owing to the remoteness of the town and the lack of any train service, the Commissioners recommended that a district hospital be established there.

**Later 20th Century Developments**

The 1930s saw major improvements in the local hospital infrastructure in the county. A 20 bed district hospital was built in Belmullet in 1936 on the site of the workhouse and the workhouse fever hospital there continued to be used as a T.B. hospital, St. Nicholas's, for some years afterwards until it was closed around 1956.

A new district hospital of 42 beds and a fever hospital of 24 beds were constructed on the site of the old workhouse in Ballina and were open for the reception of patients in December 1936.

A fever hospital in Swinford was constructed and the Swinford District Hospital reconstructed. The modern Swinford Community Hospital now stands on the same site.

A new 140 bed county hospital was built in Castlebar at a cost of £100,000 and opened in October 1938. Mayo General Hospital now stands on the same site.

St. Teresa’s Sanatorium at Creagh, near Ballinrobe, was formerly the residence of Colonel Henry Knox and was acquired by the Mayo Board of Health in 1929. Constructed at a cost of £40,000, it was a magnificent building, built of beautifully cut stone, and possessed some of the finest woodwork in Connaught. In June 1939, it was almost completely destroyed by fire, but without any loss of life. A new sanatorium was opened in June 1941. St. Teresa’s closed in 1957.

In the late 1940s the hospital institutions in the county included the Mayo county home and infirmary at Castlebar, (310 beds), a district mental hospital at Castlebar (1050 beds), district and fever Hospitals at Ballina (69 beds), and Belmullet (36 beds and 12 cots), a district hospital at Swinford (48 beds), a fever hospital at Swinford (30 beds) and St. Teresa’s Sanatorium at Ballinrobe (40 beds).

By March 1957 29% of the population of the county were entitled to free hospital and specialist treatment.

St. Joseph’s Hospital in Ballina, formerly Ballina District Hospital, is now a community hospital. The Sacred Heart Hospital in Castlebar now stands on the site of the county home. The county hospital, Castlebar, is now Mayo General. Swinford District Hospital has been extensively refurbished and is still a community hospital. Belmullet Community Hospital now stands on the site of Belmullet workhouse.

In 1971 the county became part of the Western Health Board.

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**List of Institutions Visited**

- St Joseph’s Hospital, Ballina
- Belmullet District Hospital
- Mayo General Hospital, Castlebar
- St Mary’s Psychiatric Hospital, Castlebar
- Sacred Heart Hospital, Castlebar
- Swinford District Hospital

**Records in Other Locations**

**National Archives**

- St. Brigid’s Mental Hospital, Ballinasloe, County Galway. This hospital catered for County Mayo before the District Lunatic Asylum was opened in Castlebar in 1866.

**National Library**


**County Library**

- A few volumes relating to the Poor Law Unions of Ballinrobe, Castlebar and Swinford, Board of Health and Public Assistance minute book, 1926.

**Survival of Records in Hospital Institutions**

Extensive records survive for St. Mary’s Mental Hospital, Castlebar. Key records survive for Mayo County Home and smaller collections for Mayo General Hospital and Swinford Hospital. Some mid 20th century records survive for Belmullet Community Hospital.

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2. Belmullet Community Hospital Information Booklet.
Meath

The county infirmary in Navan dated from 1754. A fever hospital opened in Kells in 1817 but closed in 1851 for want of funds. Navan Fever Hospital opened in 1818. The Richmond Asylum catered for the County of Meath until 1855, when the Mullingar District Lunatic Asylum opened which then served the county. There were four poor law unions completely within County Meath, and there were workhouses at Dunshaughlin (opened May 1841), Kells (open May 1842), Navan (opened May 1842), and Trim (opened October 1841), each of which had an infirmary and fever hospital attached. The union of Oldcastle, with a workhouse at Oldcastle (opened October 1841), was partly in County Meath and partly in County Cavan.

The County Scheme

As in other counties, the early 1920s saw a dramatic re-organisation of the local hospital infrastructure. The Meath county scheme provided for a county home at Trim, a maternity hospital at Trim and a county hospital at Navan. The county home was in Trim workhouse and the scheme provided for care of the aged and infirm, chronic invalids, and unmarried mothers and their children. The Commission on Relief of the Sick and Destitute Poor visited the county home in the mid 1920s, a period of economic depression, and found during their visit “lunatics, idiots, epileptics, infants, and children of various ages from 3 to 15”,1 categories of patient not envisaged in the original scheme. They thought that the home had not changed, “except for the worse”, from its workhouse days and that it required renovation. The maternity hospital at Trim was a detached building at an angle between two roads. The county hospital was in the old Navan workhouse, which at the time of the Commissioners visit was being reconstructed. The county infirmary at Navan was not brought under the Board of Health, who ran the public health services in the county, but continued to exist independently of the new institutions.

The advent of the Irish Hospital Sweepstakes in the 1930s provided funding for major improvements to and modernisation of the county hospital at Navan, the maternity hospital at Trim and the county infirmary.

By the late 1940s there were, in the county, the following institutions; a county home and maternity hospital at Trim (300 beds), the Meath county hospital including a fever hospital, Navan (152 beds), the Meath county infirmary, Academy Street, Navan (44 beds), the Lourdes Pulmonary Hospital, Trim (12 beds), and St. Theresa’s, Stamullen, a training centre for male mental defectives from sixteen years of age run by the Hospitaller Brothers of St. John of God. By March 1957, 13% of the population of the county was entitled to free hospital services.

The fever hospital in Navan closed in 1956 and the county infirmary in 2010. County Meath became part of the North Eastern Health Board in 1971.

List of Institutions Visited

St Joseph’s Hospital, Trim

Records in Other Locations

National Archives

Archives of St. Brendan’s Mental Hospital, Grangegorman. The Richmond District Lunatic Asylum (later St. Brendan’s Mental Hospital) served the county until 1855.

County Archive


Poor Law Union minute books for Dunshaughlin, 1839 – 1921; Kells, 1839 – 1922; Navan, 1839 – 1921; Oldcastle, 1870 – 1920; and Trim, 1839 – 1921.

Board of Health and Public Assistance minute books, 1934 – 42

County medical officer’s reports, 1936 – 57

Survival of Records in Hospital Institutions

There is a good survival of records for the former Meath County Home (now St. Joseph’s Hospital, Trim).

A county infirmary was established in Monaghan town in 1768. Fever hospitals were established in Connabury in 1833, Clones in 1836, Glasslough in 1838, Monaghan town in 1843 and Rockcorry in 1844. By 1849 there were fever hospitals at Castleblayney, Farney, Monaghan, Carrickmacross, Clones, Rockcorry and Trough and 14 dispensaries in the county. Four workhouses opened in the county at Carrickmacross (February 1843), Castleblayney (December 1842), Clones (February 1843) and Monaghan (May 1842).

Initially, the counties of Monaghan and Cavan sent their mental patients to Armagh Asylum, which opened in 1825. A separate Monaghan district asylum was established in 1869 to serve the counties of Monaghan and Cavan.

The County Scheme

The county scheme originally envisaged that there would be a county home and county hospital at Monaghan town, and that there would be district hospitals at Clones and Carrickmacross. Under the amended scheme a county home was to be provided at Castleblayney, a county hospital at Monaghan, a fever hospital at Monaghan, a district hospital at Carrickmacross and a fever hospital at Carrickmacross. In February 1924, the Minister for Local Government and Public Health approved of a district hospital being established at Clones for persons suffering from infectious and contagious diseases. The county home which in Monaghan until the late 1920s when it was transferred to the reconstructed Castleblayney workhouse. The county hospital was in the Monaghan county infirmary, which had been taken over by the Monaghan Board of Health, which had responsibility for the public health services. The building had been part of the old Monaghan prison. The Commission on Relief of the Sick and Destitute Poor visited Monaghan in the mid 1920s and provide an interesting insight into the hospital services in the county at that time. They noted that Monaghan fever hospital was a detached building with good bathing and closet accommodation. The old county fever hospital at Monaghan had been converted into a tuberculosis sanatorium with accommodation for 25 beds. There was also a small fever hospital at Clones.

The advent of the Irish Hospitals Sweepstakes meant that funding became available from the 1930s to build or reconstruct medical facilities in the county. A new county hospital was constructed in Monaghan on the site of the old infirmary between 1933 and 1938. Hope Castle, Castleblayney, was used as a temporary hospital during
this period. The mental hospital infirmary was adapted for use as a tuberculosis hospital. By the late 1940s the local hospital infrastructure included a county home in Castleblayney (230 beds), a district mental hospital at Monaghan (800 beds), a county hospital at Monaghan (96 beds), a new tuberculosis hospital, Monaghan (92 beds), and fever hospitals at Monaghan (29 beds), Clones [at Clonboy] (16 beds) and Carrickmacross (16 beds and 9 cots).

By March 1957, 35% of the population of the county was eligible for free hospital and specialist services.

County Monaghan became part of the North Eastern Health Board in 1971.

List of Institutions Visited
St Davnet’s Mental Hospital, Monaghan
St Mary’s Hospital, Castleblaney
Monaghan General Hospital

Records in Other Locations
National Archives
The National Archives holds the first minute book of the Monaghan County Infirmary (1768-1857)

County Library
Records relating to Carrickmacross, Castleblayney and Clones Poor Law Unions, 1840 – 1922
Monaghan County Infirmary, register of admission, 1853 – 1920

Survival of Records in Hospital Institutions
Extensive records survive relating to both the former county home (now St. Mary’s Hospital, Castleblaney) and St. Davnet’s Mental Hospital, Monaghan.
The foundation stone of a new county infirmary was laid in Tullamore in 1788 and this replaced an even earlier institution. A fever hospital was established at Parsonstown (now Birr) in 1838. Maryborough Asylum, which opened in Portlaoise in 1833, catered for the county of Offaly and adjoining counties. By 1849 there were fever hospitals at Parsonstown and Shinrone and 13 dispensaries in the county. There were workhouses at Birr (opened April 1842), Edenderry (opened March 1842) and Tullamore (opened June 1842).

The County Scheme

The War of Independence would see considerable changes to local hospital infrastructures in many Irish counties under County or Amalgamation Schemes which attempted to reduce the number of institutions in each county on grounds of economy and efficiency. In Offaly, these changes were less dramatic. The Commission on Relief of the Sick and Destitute Poor, who visited the county in the mid 1920s, noted that it was the original intention to have at Tullamore one central institution comprising a medical and surgical hospital, a fever hospital and a county home but that district hospitals in Birr and Edenderry workhouses, which were declared to be temporary in the existing scheme, were still in existence. The county home was in the Tullamore workhouse and accommodated aged and infirm persons, chronic invalids, married and unmarried mothers, infants and older children and lunatics although the scheme did not provide for the admission of the latter. A maternity department was administered as part of the home. The Commission was impressed by the condition and operation of the home. The county hospital was in the old workhouse infirmary, quite distinct from the other workhouse buildings, and was a well-equipped hospital. There was a detached fever hospital at the rear. There was a district hospital in Edenderry in the old workhouse fever hospital which also received patients from County Kildare. The district hospital in Birr was in the old fever hospital building. The Birr workhouse infirmary was being used as a sanatorium for tubercular patients and while the wards were well ventilated the Commission noted that the surroundings of the place, an empty workhouse falling into dilapidation, must be depressing. Funding from the Irish Hospitals Sweepstakes from the 1930s would greatly improve the local hospital network.
A new Offaly county hospital opened in December 1942. A £45,000 alterations and extension scheme at St. Brendan’s District Hospital, Birr, formally opened on the 19th of February 1959. A nurses home attached to the county hospital, which cost £80,000, was opened at the same time. The district hospital at Edenderry was also extended with Sweepstakes funding.

By the late 1940s there were the following institutions in the county; the Offaly county home and fever hospital, Tullamore (42 beds), the Offaly county hospital, Tullamore (no bed numbers given), and district hospitals at Edenderry (22 beds), and Birr (15 beds).

St. Vincent’s Hospital, Tullamore, a 22 bed T.B. institution, was closed in the late 1950s.¹ By March 1957, 32% of the population were entitled for free hospital treatment.

In 1971, the county became part of the Midland Health Board.

List of Institutions Visited
Midland Regional Hospital, Tullamore

Records in Other Locations

County Library
Minute Books of the Board of Health and Public Assistance

Survival of Records in Hospital Institutions

Important 20th century records survive relating to Offaly County Hospital and there are extensive records for St. Fintan’s Mental Hospital, Portlaoise, which catered for the county.

A county infirmary opened in Roscommon town in 1767. A new infirmary building was built by a Mrs Walcott in 1783 for the poor of the county. This building has been used as a library since 1948. Ballinasloe Asylum, which opened in 1833, also served the county of Roscommon and in the early 1850s it could send 40 patients there.

Workhouses opened in the county at Boyle (December 1841), Castlerea (May 1846), Roscommon (November 1843) and Strokestown (July 1852).

The County Scheme

During the War of Independence there was a major transformation of the local hospital infrastructure at county level under various County or Amalgamation Schemes for reasons of economy and efficiency. Under the Roscommon county scheme three institutions were provided: a county home in Roscommon, utilising the workhouse at Roscommon, a district hospital at Boyle, that utilised the infirmary portion of Boyle workhouse, and a county hospital at Roscommon, which utilised two wards of the county home as a medical section and the old county infirmary as the surgical section.

The other two workhouses in the county, at Castlerea and Strokestown, were closed and their residents transferred to the county home. The county scheme provided for the accommodation of only the aged, the infirm and chronic invalids in the county home but the Commission on Relief of the Sick and Destitute Poor, who visited the county in 1925, noted that there were “lunatics, imbeciles and unmarried mothers and children” there also.

The county fever hospital was a detached building in the same grounds as the county home.

With the advent of the Irish Hospitals Sweepstakes monies became available to modernise the local hospital infrastructure in the county.

A new mental hospital was constructed at Castlerea in the late 1930s and opened about 1940. It operated as an auxiliary mental hospital for Ballinasloe and accommodated about 400 patients in the early 1940s. A new 98 bed county hospital, built at a cost of £120,000, opened near Roscommon town in 1941. In May 1948 the mental hospital at Castlerea was taken over for use as a sanatorium and was opened as the first regional chest hospital in the country by Dr Noel Browne in June 1948. In 1955 it reverted back to its former status as a mental hospital. In December 1996 it became a prison. The old
district hospital in Boyle was demolished in the early 1970s and a new nursing home was constructed on the site. By March 1957, 28% of the population were eligible for free hospital treatment. The county became part of the Western Health Board in 1971 at which time the local hospital infrastructure included a county hospital in Roscommon (137 beds), a district hospital at Boyle (26 beds) and the Sacred Heart geriatric home (270 beds) in Roscommon.

List of Institutions Visited
Áras Naomh Chaolain, Roscommon
Roscommon County Hospital
Sacred Heart Hospital, Roscommon

Records in Other Locations
National Archives
Records of St Brigid’s Mental Hospital, Ballinasloe which catered for the county since 1833.

County Library
Poor Law Union minute books relating to Boyle, 1883 – 1920; Castlerea, 1839 – 1928; Roscommon, 1884 – 1921; Strokestown, 1850 – 1913
Minute books of the Roscommon Board of Health and Public Assistance, 1921 – 42

Survival of Records in Hospital Institutions
Extensive records survive for the former County Home (now the Sacred Heart Hospital) and Roscommon county hospital. Áras Naomh Chaolain hold a small collection of 20th century records.
A fever hospital was established in Sligo in 1748 and a county infirmary in 1765. Ballinasloe Asylum initially catered for the institutional care of the mentally ill of the county until 1855, when a separate district lunatic asylum was built in Sligo, which served the counties of Sligo and Leitrim.

There were three workhouses in County Sligo: Sligo town (opened December 1841), Dromore West (opened April 1852), and Tobercurry (opened June 1853). In August 1917 a county sanatorium for tuberculosis patients was opened at Cloonmahon, near Collooney, about eight miles from Sligo.

**The County Scheme**

As in other counties the War of Independence saw an extraordinary transformation of the local hospital infrastructure in Sligo. Under the County or Amalgamation Scheme the workhouses of Dromore West and Tobercurry were closed, the staff were superannuated and the residents were transferred to the old Sligo workhouse which became the county home. The scheme provided for the reception in the home of aged and infirm persons, chronic invalids and children under three years of age. The Commission on Relief of the Sick and Destitute Poor, who visited the county in the mid 1920s, noted that unmarried mothers, idiots and imbeciles and children under three were also in residence. The county hospital was in three separate locations. The medical section was in the old infirmary block of Sligo workhouse, the surgical hospital was in the old county infirmary, and the fever section was in the old county fever hospital building.

**Later 20th Century Developments**

The establishment of the Irish Hospitals Sweepstakes provided funding for the modernisation of the local hospital system. A 110 bed county hospital in Sligo was constructed in Sligo at a cost of £63,000 and completed in 1940.

By the late 1940s there was, in the county, the following institutions; a county home at Sligo, a county hospital at Sligo (111 beds), the Sligo and Leitrim District Mental Hospital (944 beds), a fever hospital, Sligo (30 beds), and St. Patrick’s Sanatorium, Cloonmahon, Collooney, County Sligo (38 beds).

The county sanatorium closed temporarily in the early 1920s but was later re-opened and became known as St. Patrick’s Sanatorium. In 1952 a new 32 bed T.B. hospital was opened at Markievicz Road, Sligo, in a building which was formerly the High School.

In July 1951, Hazelwood House was formally opened as an extension to the Sligo/Leitrim Mental Hospital.

In December 1955, the Minister for Health opened a new institution for women with intellectual disabilities at La Sagesse Convent, Cregg House, Sligo.

By March 1957, 25.5% of the population of the county was eligible for free hospital and specialist treatment.

In March 1971 a £704,000 extension to Sligo County Hospital was opened by Erskine Childers, Tanaiste and Minister for Health. The extension provided another 101 beds, bringing the total to 228 beds. Sligo Regional Hospital is now on the site. In 1971 the county became part of the North Western Health Board. The main building at St. Columba’s mental hospital closed and was sold in the early 1990s and is now a hotel.

St. John’s Community Hospital now stands on the site of the old county home. The county became part of the North Western Health Board in 1971.

**List of Institutions Visited**

Sligo Regional Hospital
St John’s Hospital, Ballytivnan

**Records in Other Locations**

**National Archives**

Records of St. Brigid’s Mental Hospital, Ballinasloe.
Records of St Columba’s Mental Hospital which served the county from 1855.
Records of St John’s Hospital, the old Sligo County Home.

**County Library**

Board of Guardians minute books, 1850 – 90.
Minutes of Sligo Board of Health and Public Assistance, circa 1921 – 42.

**Survival of Records in Hospital Institutions**

While very extensive collections survive relating to St. Columba’s Mental Hospital and St. John’s Hospital (the former county home) which are now in the National Archives, a considerable body of county council material relating to the operation of the local hospital system is still held locally. Important 20th century records survive for Sligo county hospital.
A county infirmary was established in Cashel in 1768. Fever hospitals were established in Clonmel in 1811, Cahir in 1815 and Roscrea and Templemore in 1825. Clonmel infirmary, a ward of the Clonmel fever hospital, opened in 1829. By the late 1840s there were fever hospitals at Borrisokane, Cahir, Carrick-on-Suir, Cashel, Clogheen, Clonmel, Cloughjordan, Nenagh, Roscrea, Templemore, Thurles and Tipperary and 46 dispensaries in the county. In the North Riding of Tipperary there were four workhouses; Borrisokane (opened June 1853), Nenagh (opened April 1842), Thurles (opened November 1842) and Roscrea (opened March 1842). In the South Riding there were workhouses at Carrick-on-Suir (opened July 1842), Cashel (opened January 1842), Clogheen (opened June 1842), Clonmel (opened October 1853) and Tipperary (July 1841).

Clonmel asylum opened in 1835 for the county of Tipperary with a capacity for 60 beds. It was the smallest asylum built in the entire country and the demand for accommodation soon outstripped the available beds. In 1862 the governors of the asylum acquired the house of industry building at Upper Irishtown, Clonmel, which was utilised until 1933. The two asylums operated independently until they were amalgamated in 1871.

The County Scheme

During the War of Independence, in Tipperary, as in other counties, there was a major re-organisation of the public hospital infrastructure under County or Amalgamation Schemes and the old workhouse system was dramatically overhauled. In the North Riding an amended county scheme envisaged a county home and a district hospital at Thurles, a district hospital and a fever hospital at Roscrea, and a district hospital at Nenagh. The county home was in the old Thurles workhouse and was for the reception of aged and infirm persons, chronic invalids, imbeciles, and unmarried mothers. The Commission on the Relief of the Sick and Destitute Poor, who visited the county home in the mid 1920s, also found harmless lunatics, a number of able bodied inmates and six married women and their children in the home. The district hospital was based in the male infirmary of the workhouse. While part of the Nenagh workhouse had been destroyed by fire, the Nenagh district hospital was in the old workhouse male infirmary. The old workhouse fever hospital there was used for fever cases. Roscrea district hospital was in the infirmary part of Roscrea workhouse. Fever cases were dealt with in the old workhouse fever hospital. A sanatorium for consumptives had been set up in two wards of the boy’s school block of the workhouse.
In the South Riding the county scheme envisaged a county home at Cashel and district hospitals at Carrick-on-Suir, Cashel, Clogheen, Clonmel, Tipperary and a fever hospital at Clonmel.

The county home at Cashel was for aged and infirm persons, chronic invalids, unmarried mothers, idiots and epileptics. The district hospital at Cashel was in the old county infirmary, the committee of management of which had been abolished under the scheme. Small operations only were carried out and the hospital had an extern department. The detached fever hospital at Cashel had been closed and cases were sent to Clonmel. The Clonmel district hospital occupied a small part of the old Clonmel workhouse, the remainder of the workhouse being unoccupied. The hospital was bright and roomy, with a good water supply and sanitary annexes and a well-equipped kitchen. The Commission noted that Clonmel workhouse was one of the finest workhouses in Ireland and was an imposing structure in a good state of preservation occupying an excellent position adjoining the Clonmel district mental hospital. They noted that it would lend itself to conversion into an auxiliary mental hospital if such was required but that a suitable modern hospital should be provided in Clonmel in that event. Tipperary district hospital was based in the old fever hospital and the range of sheds at the back of the Tipperary workhouse.

Clogheen district hospital was in the old workhouse fever hospital. Most of the workhouse had been destroyed by fire in November 1922 during the Civil War and following refurbishment, a district hospital opened there in 1926. The Carrick-on-Suir workhouse had been burned down during the Civil War and was not available to provide hospital accommodation. A district hospital in Carrick-on-Suir opened in 1924 in a building that had originally served as a fever hospital.

Later 20th Century Developments

St. Vincent’s Hospital, Tipperary, opened on the 25th of June 1930 and functioned as a district hospital until it was closed as a result of cutbacks in 1987. The building was originally part of the old British army barracks built in Tipperary town in the 1870s and survived the destruction by fire of most of the barrack’s complex in July 1922 during the Civil War.

The advent of the Irish Hospitals’ Sweepstakes in 1930 provided funding for the modernisation of the local hospital infrastructure. Building work commenced in March 1935 on a 90 bed county hospital for South Tipperary at Cashel. The hospital (Our Lady’s), which cost £73,000, officially opened on the 20th of July 1940.

In 1950 there was a major upgrading of the old workhouse in Clonmel, St. Joseph’s, and it re-opened as the 117 bed County Medical and Maternity Hospital. In 1952 the medical and maternity services were transferred from Our Lady’s Hospital, Cashel, to St. Joseph’s and in 1995 the surgical services were also transferred there.

An 80 bed county hospital was constructed on the site of the old workhouse at Nenagh at a cost of £68,000 and opened in 1938.

By the late 1940s the following institutions existed in the county; a district mental hospital at Clonmel (908 beds), a county hospital at Cashel (60 beds), St. Joseph’s General Hospital at Nenagh (65 beds), district hospitals at Carrick-On-Suir (15 beds), Clogheen (20 beds), Clonmel (93 beds), Roscrea (40 beds), Thurles (35 beds) and Tipperary (62 beds), a county sanatorium at Roscrea, fever hospitals at Roscrea (40 beds) and Clonmel (46 beds) and Sean Ross Abbey Hospital, Roscrea (a home for unmarried mothers).

By March 1957, 35% of the population of the North Riding and 39.5% in the South Riding were eligible for free hospital and specialist services.

In 1971 the North Riding of Tipperary became part of the Mid Western Health Board and the South Riding became part of the South Eastern Health Board.

Tipperary District Hospital closed in June 1987 and Thurles District Hospital the following July.

Our Lady’s Community Hospital of the Assumption, opened in 2006, now stands on the site of the Thurles workhouse.

The district hospital in Carrick-on Suir is now St. Brigid’s Hospital and provides rehabilitation and respite care for the elderly. St. Joseph’s in Clonmel is now the South Tipperary General Hospital.

List of Institutions Visited
- St Brigid’s Hospital, Carrick-on-Suir
- St Luke’s Psychiatric Hospital, Clonmel
- St Patrick’s Hospital, Cashel
- St Theresa’s District Hospital, Clogheen
- Community Hospital of the Assumption, Thurles
- South Tipperary General Hospital, Clonmel
- Nenagh Hospital

Records in Other Locations
- County Library
  - Poor Law Union Records, 1839-1924
- Representative Church Body
  - Cashel Infirmary Register, 1829-51

Survival of Records in Hospital Institutions

There is a good survival of records for hospitals in Tipperary. All the hospitals visited had records, some dating back to the 19th century. A particularly extensive collection survives for St. Luke’s Psychiatric Hospital, Clonmel. The records of St. Theresa’s District Hospital in Clogheen give a good insight into the operation of a small district hospital from the 1920s. There are good records for the Community Hospital of the Assumption, Thurles; South Tipperary General Hospital, Clonmel; and St. Patrick’s Hospital, Cashel. Small but important collections survive relating to St. Brigid’s Hospital in Carrick-on-Suir and Nenagh Hospital.
The Waterford Infirmary Act, 1896, appropriated the Leper Hospital of St. Stephen, an ancient foundation which was reputedly founded in 1211, and converted it into an infirmary for the county and city of Waterford. A Lying-in hospital opened in Waterford City in 1838. A fever hospital opened in Tallow in 1818.

There were three workhouses in County Waterford, Dungarvan (opened July 1844), Kilmacthomas (opened March 1853) and Lismore (opened May 1842). Waterford workhouse (opened April 1841) was situated in the county borough. Waterford Asylum opened in 1835 to cater for the mentally ill in the city and county of Waterford. In the late 19th century Lady Waterford founded a cottage hospital in Portlaw called the Martin Hospital after Dr. James Martin a beloved surgeon at the local cotton mill, who had run a hospital in the town for some years.

The County Scheme

During the War of Independence there was in Waterford, as in other counties, a major re-organisation of the local hospital infrastructures through County or Amalgamation Schemes. Under the Waterford county scheme a county home was established in the Dungarvan workhouse. The scheme contemplated that the following classes should use the home, viz.: - aged and infirm persons, chronic invalids, expectant mothers, children, healthy harmless idiots and healthy epileptics. The Commission on Relief of the Sick and Destitute Poor found, when they visited Waterford in the mid 1920s, that able-bodied men and unmarried mothers were also in the home. The county hospital was in the infirmary portion of Waterford workhouse. Most of the adjoining workhouse buildings were unoccupied and were described by the Commission as “a cheerless environment of old dilapidated structures”.1 As the county home was so far from Waterford City, the commissioners noted that the county hospital in Waterford served not only as a hospital, but as a home for local bedridden chronic cases. The old fever hospital of Dungarvan workhouse was used as a district hospital. The old county fever hospital at Waterford was taken over by the board of public assistance and was used for the reception of cases of infectious and contagious diseases. The Waterford county and city infirmary was not brought under the administration of Board of Public Assistance and continued to be administered as it was prior to the scheme. Kilmacthomas workhouse had been closed and there were plans to

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1 Report of the Commission on the Relief of the Sick and Destitute Poor, Including the Insane Poor, Stationery Office, 1927 page 47.
convert the infirmary portion of Lismore workhouse into a district hospital.

Later 20th Century Developments

By the late 1940s the following hospitals were operating in the county: a county home at Dungarvan, a county hospital at Waterford (239 beds), a district mental hospital at Waterford (637 beds) a fever hospital at John’s Hill (62 beds), a district hospital at Dungarvan (34 beds), a district hospital and fever hospital at Lismore (62 beds and 2 cots), the county and city infirmary, Waterford – a general semi-voluntary hospital (64 beds), the Waterford maternity hospital, 4 Parliament Street, Waterford – a special public voluntary hospital (12 beds), St. Patrick’s Private Mental Hospital, Belmont Park, Waterford run by the Brothers of Charity (100 beds) and the Martin Hospital, Portlaw – a public voluntary cottage hospital (10 beds).

Ardkeen Chest Hospital (280 beds) was built between 1950 and 1954 and was originally used as a sanatorium for tuberculosis patients. It was officially opened on the 21st of July 1952. In 1958, due to a continuing decline in T.B., it became an acute general hospital. In 1959, it was decided to transfer the county hospital services that had been provided by St. Patrick’s, Waterford, to Ardkeen Hospital and St. Patrick’s was retained as an elderly care centre. In 1965 the first psychiatric unit in a general hospital in the state was opened in Ardkeen.

Airmount Maternity Hospital opened in Waterford in February 1951 and over 50,000 babies were delivered there until its closure in July 1995 when services were transferred to a new maternity hospital at Waterford Regional Hospital. By March 1957, 40% of the population in Waterford were entitled to free hospital treatment. In 1971 Waterford became part of the South Eastern Health Board.

The district hospital in Lismore was converted into a tuberculosis hospital with the aid of Sweepstakes funding. It reverted to its role as a district hospital and was closed in June 1987. The county and city infirmary was closed in November 1987.

In 1973 the development plan for hospitals in the south east envisaged that Ardkeen should be developed as the major hospital in the region. Ardkeen is now the University Hospital Waterford, a hospital and tertiary referral centre serving Waterford, Carlow, Kilkenny, Wexford and South Tipperary. The county hospital in Waterford has been extensively refurbished and is now St. Patrick’s Hospital which provides 24 hour care for patients who require rehabilitation, continuing care, palliative care and respite.

List of Institutions Visited

- St Joseph’s Hospital, Dungarvan
- St Otteran’s Hospital, Waterford City
- St Patrick’s Hospital, Waterford City
- Waterford University Hospital

Records in Other Locations

National Archives
- Poor Law records of the Lismore Union

County and City Archives
- Poor Law Union minute books for Waterford, 1848 – 1920; Lismore, 1843 – 1924; Dungarvan, 1849 – 1922; and Kilmacthomas, 1851 – 1921

This archives also holds the records of the Waterford County and City Infirmary.

Survival of Records In Hospital Institutions

There is a very good survival of records for Waterford. Extensive records survive relating to St. Otteran’s Mental Hospital, the former county hospital (now St. Patrick’s Hospital), and the former county home (now St. Joseph’s Hospital, Dungarvan) Some minutes of the Waterford Board of Health and Public Assistance are also held by the latter.
A county infirmary had been established at Mullingar in 1729. A fever hospital opened in Castlepollard in 1819. Wilson’s Hospital School in Multyfarnham was completed in 1761 as a hospital for aged Protestant men and a school for poor Protestant boys. Maryborough Asylum, which opened in 1833, catered for County Westmeath until a separate asylum, the Mullingar District Lunatic Asylum, opened in Mullingar in 1855. This institution served not only Westmeath, but also Longford and Meath. There were three workhouses within County Westmeath at Athlone (opened November 1841), Delvin (opened November 1853) and Mullingar (opened December 1842).

The County Scheme

During the War of Independence the local hospital infrastructure was radically changed following the introduction of County or Amalgamation Schemes. Superfluous workhouses were closed for reasons of efficiency and economy. The county scheme in Westmeath provided for a county home and a county hospital at Mullingar and a district hospital at Athlone. The report of the Commission on Relief of the Sick and Destitute Poor, published in 1927, gives an interesting insight into the public hospital system in the county in the mid 1920s. The county home was in the body of the old Mullingar workhouse. The scheme contemplated the accommodation of aged and infirm persons and chronic invalids but the Commission also found idiots and imbeciles, unmarried mothers and children. A maternity department for single women was administered in connection with the home. The county fever hospital was in a detached building in the grounds of the county home. The county hospital was based in the infirmary part of the workhouse. A maternity department for respectable women was administered in connection with the hospital. There was a district hospital at Athlone. The fever hospital attached to the old Athlone workhouse was also used for the accommodation of fever cases. The county infirmary at Mullingar was not brought under the control of the board of health.

The advent of the Irish Hospitals Sweepstakes in 1930 provided funding which resulted in the transformation of hospital services in the county. On the 27th of April 1936 a new county hospital at Mullingar was officially opened by Sean T. O’Kelly, the Minister for Local Government and Health who noted the significance of the occasion for the Free State as it was the first county hospital built in Ireland with money provided by the Hospitals Sweepstakes. The hospital, which was erected at a cost of £66,000, was
situated on the Longford – Castlepollard road, about a mile from the town.¹

The county infirmary in Mullingar closed in November 1936 and the staff were given the option of transferring to the county hospital or being given service compensation.²

Sweepstakes funding also paid for additions to the county tuberculosis hospital, a maternity annexe to the district hospital in Athlone, additions to the mental hospital, and additions to St. Joseph’s Orthopaedic Hospital, Coole.

Funding amounting to £68,000 was also provided for St. Peter’s Maternity Hospital and Home in Castlepollard.

By the late 1940s there were the following medical institutions in the county: a county home at Mullingar, a district mental hospital at Mullingar catering for the counties of Longford, Westmeath and Meath (1,245 beds), Westmeath county hospital at Mullingar – a general semi-voluntary hospital (84 beds), St. Vincent’s district hospital at Athlone (59 beds), a fever hospital at Mullingar (34 beds), St. Joseph’s Orthopaedic Hospital, Coole (119 beds) and St. Peter’s Maternity Hospital, Castlepollard.

By the 31st of March 1957, 38% of the population of Westmeath was eligible for free hospital treatment.

The county became part of the Midland Health Board in 1971.

¹ Irish Press, 28/04/1936
² Irish Examiner, 16/11/1936

List of Institutions Visited

Midland Regional Hospital, Mullingar
St Loman’s Hospital, Mullingar
Cluain Lir Centre, Mullingar
St Vincent’s Centre, Athlone

Records in Other Locations

National Archives
Records of Wilson’s Hospital School, Multyfarnham 1768-1966 (copies)

National Library
Minute book of the Trustees of Wilson’s Hospital, Multyfarnham, 1762 – 1913 (microfilm)
Register of Castlepollard Fever Hospital, 1821 – 50 (microfilm)

County Archives
Poor Law Union minutes for Athlone, 1849 – 1920;
Mullingar, 1857 – 1921
Board of Health and Public Assistance (County Home and Hospitals) minute books, 1921 – 42
Tuberculosis Advisory Committee minute book, 1926 – 34.
Register of Castlepollard Fever Hospital, 1821 – 50 (photocopy)

Survival of Records in Hospital Institutions

Extensive records survive relating to St. Loman’s Mental Hospital, dating back to the foundation of the hospital in 1855. The Cluain Lir Centre holds important 20th records relating to the county home and smaller collections of 20th century records survive for the Midland Regional Hospital and St. Vincent’s Centre.
A county infirmary opened in Wexford town in 1769. The Houghton Fever Hospital was established in New Ross in 1809 and a fever hospital in Enniscorthy in 1815. A lying-in hospital was established in New Ross in 1809 and Mrs Morgan’s Lying-in Hospital in Wexford town in 1841. By the early 1850s there were fever hospitals in Wexford, Arthurrstown, Enniscorthy, Gorey, New Ross, Newtownbarr and Oulart. Four workhouses were opened in County Wexford: Enniscorthy (November 1842), Gorey (January 1842), New Ross (July 1842) and Wexford (July 1842). Mental patients from the county were originally catered for in the Carlow Asylum and the county was allowed to send 44 patients to that institution. A district lunatic asylum (later St. Senan’s mental hospital) opened near Enniscorthy in April 1868.

**The County Scheme**

During the War of Independence the local public hospital infrastructure was radically overhauled with the introduction of the Amalgamation or County Scheme. The Enniscorthy workhouse became the Wexford county home and provided for aged and infirm persons, and it’s fever hospital became a sanatorium for tubercular patients. The main buildings of Wexford workhouse were refurbished and were opened as a county hospital in December 1928. The fever hospital at Gorey workhouse and the infirmary of New Ross workhouse became district hospitals. The county infirmary was closed and disposed of around this time.

**Later 20th Century Developments**

Brownswood House, an Elizabethan style mansion near Enniscorthy, was bought by the Wexford Board of Health in 1929. A hospital wing had been added by 1939 and it was used as a TB sanatorium, Grianan Charmain, until 1964. In 1965 the medical department of Wexford county hospital was moved to Brownwood. The hospital closed in 1987. With the help of Sweepstakes finance new district hospitals were constructed at New Ross (24 beds) and Gorey (20 beds) and a new county fever hospital at New Ross (30 beds). They were all opened formally by Patrick J. Ruttledge, the Minister for Local Government, in October 1940. Gorey district hospital was managed by the Sisters of Saint John of God and had a maternity unit until 1986. New Ross district hospital closed in 1988 but the building was re-opened the following year as a community hospital. By March 1957, 39% of the population of the county were entitled to free medical treatment.

In 1971, when the county became part of the South Eastern Health Board, hospital services in Wexford town...
were still being provided in the old workhouse buildings. Work began on a new hospital on the site in 1988, the first phase of which opened in 1992.

List of Institutions Visited
Gorey District Hospital
St John’s Hospital, Wexford
Wexford General Hospital
St Senan’s Hospital, Enniscorthy

Records in Other Locations

County Archives
Poor Law Union records: Wexford Union, 1840-1922
Enniscorthy Union, 1840-1922; Gorey Union, 1840-1919;
New Ross Union, 1847-1922
Board of Health minute books, 1921-42
County Wexford infirmary records, 1845-1923
Records of St. Senan’s Hospital, Enniscorthy

National Archives
Brownswood Hospital records

Survival of Records In Hospital Institutions
Key records survive relating to St. John’s Hospital (the former Wexford county home) and smaller collections of 20th century records survive for Gorey District Hospital and Wexford County Hospital. St. Senan’s records are in the County Archives and a very small quantity of pre-1970 material remains in the hospital.
A county infirmary opened in Wicklow in 1766. The Richmond District Lunatic Asylum, later St. Brendan’s Hospital, Grangeogorm, served Wicklow and the county was entitled to send 27 patients there in the late 1840s. Fever hospitals had been established in Newtownmountkennedy and Enniskerry in 1814, in Stratford-on-Slaney and Bray in 1817 and in Arklow in 1818. By 1849 there were also fever hospitals at Delgany and Wicklow and 20 dispensaries in the county. In the late 1890s fever hospitals remained at Arklow, Newtownmountkennedy and Wicklow.

Workhouses were opened at Baltinglass (October 1841), Rathdrum (March 1842) and Shillelagh (February 1842). The Rathdown union, whose workhouse was located at Loughlinstown, in south County Dublin, also catered for the northern end of County Wicklow.

In March 1896, the Royal National Hospital for Consumption (Newcastle Sanatorium) was opened at Newcastle, County Wicklow, with 24 beds. By the outbreak of the First World War, the number of beds had risen to 125.

In 1874 Lucinda Sullivan founded The Home for Crippled Children in Bray for destitute crippled children. This later became Sunbeam House. The Countess of Wicklow conceived the idea of establishing a general hospital in Arklow in 1917. In 1918 the hospital was in operation and had 12 beds.

The County Scheme

During the War of Independence there was a major re-organisation of the local health services under the County or Amalgamation Scheme. The amalgamation scheme in Wicklow provided that a home for the aged and infirm, chronic invalids, and expectant mothers was to be established utilising the workhouse buildings at Rathdrum. A county hospital was to be established using the existing county infirmary and fever hospital buildings at Wicklow. A fever hospital was to be established at Shillelagh utilising the workhouse buildings there. The scheme was modified to allow cases of fever and infectious disease to be sent from Bray and the surrounding area to St. Columcille’s Hospital in Loughlinstown, the old Rathdown workhouse. As Baltinglass workhouse had been burned during Civil War, people in the west of the county found themselves increasingly isolated from institutional medical care and it was decided to eventually establish a district hospital in Baltinglass to provide for the treatment of all cases, infectious or otherwise, in the district. Patients from the Baltinglass area were sent to Kildare county hospital,
Naas, as a temporary arrangement until Baltinglass district hospital opened in 1931.

Later 20th Century Developments

In 1929 Shillelagh fever hospital was closed and was replaced by the old fever hospital building in Wicklow town. In the late 1950s the county council decided to close the old county hospital and transfer the patients to the old fever hospital building which had been reconstructed. From the late 1940s the district hospital building at Baltinglass was extended and improved. The Countess of Wicklow Memorial Hospital in Arklow received assistance from the Sweepstakes in the 1930s and became recognised for the reception of cases of tuberculosis from all parts of the country.

A tuberculosis sanatorium, St. Kevin’s, financed with Sweepstakes money, opened beside the county home in January 1936. In 1957, the decline in TB cases led to the sanatorium being used by the county home for female infirm cases. By the late 1940s, hospitals in the county included the Countess of Wicklow Memorial Cottage Hospital at Arklow (12 medical beds, 30 surgical), a county fever hospital at Wicklow (38 beds), a county hospital at Wicklow (33 beds), a county sanatorium at Rathdrum (30 beds), a district hospital at Baltinglass (50 beds), The Home for Crippled Children (Sunbeam House), Bray (40 beds), and the Royal National Hospital for Consumption, Newcastle, (130 beds).

In March 1957, 35% of the population of Wicklow were eligible for free medical treatment.

By the late 1960s the county home, St. Colman’s, was in very poor structural condition and a decision was made in 1970 to replace it with modern hospital buildings. The new hospital was opened on the 26th of September 1975.

X-ray facilities were added to the hospital in Newcastle in 1935 and a modern operating block in 1936. Newcastle closed as a tuberculosis sanatorium in October 1963 and the remaining patients were transferred to Peamount sanatorium. Wicklow County Council had for many years tried to establish a mental hospital in the county and in March 1964 the council took over the hospital at Newcastle for mental health purposes. By 1971 there were 80 patients in Newcastle and 127 Wicklow mental patients in the Dublin Health Authority Hospitals.

County Wicklow became part of the Eastern Health Board in 1971.

List of Institutions Visited

Baltinglass District Hospital
St Colman’s Hospital, Rathdrum

Records in Other Locations

National Archives
Poor Law Union records relating to Rathdown

County Archives
Poor Law Union minutes for Shillelagh and Rathdrum.
Indoor Registers for Shillelagh and Rathdrum workhouses
Minutes of Wicklow Board of Health and Public Assistance, 1921-42
Early records of Baltinglass District Hospital

Royal College of Physicians
Royal National Hospital for Consumption (Newcastle Sanatorium)

Representative Church Body Library
Home for Crippled Children (Sunbeam House), Bray

Survival of Records In Hospital Institutions

Key records survive relating to the Wicklow County Home (now St. Colman’s Hospital in Rathdrum). The records of the Rathdrum workhouse, its predecessor, are particularly extensive, and are in the county archives. While the records of Baltinglass workhouse were destroyed when it was burnt during the Civil War, a good range of records survives relating to the district hospital which was erected there subsequently.
Local Authority Archives Services

**Clare County Archives**
Clare County Council
Áras Contae an Chlár
New Road, Ennis, Co. Clare
Tel: (065) 6846414
Email: archivesrecords@clarecoco.ie

**Cork City and County Archives**
Seamus Murphy Building
33a Great William O’Brien Street
Blackpool, Cork
Tel: (021) 4505867
Email: archivist@corkcity.ie

**Donegal Archives Service**
Donegal County Council
Three Rivers Centre, Lifford
County Donegal
Tel: (074) 9172490
Email: archivist@donegalcoco.ie

**Dublin City Library and Archive**
138-144 Pearse Street, Dublin 2
Tel: (01) 6744800
Email: cityarchives@dublincity.ie

**Fingal Archives**
Clonmel House, Forster Way
Swords, Fingal, Co. Dublin
Tel: (01) 8704496
Email: archives@fingalcoco.ie

**Galway County Council Archives**
Galway County Libraries HQ
Island House, Cathedral Square, Co. Galway
Tel: (091) 562471
Email: archivist@galwaycoco.ie

**Kerry County Library Headquarters**
Moyderwell, Tralee, Co. Kerry
Tel: (066) 7121200
Email: archivist@kerrylibrary.ie

**Limerick City Archives**
City Hall, Merchant’s Quay, Limerick
Tel: (061) 407293
Email: Jacqui.hayes@limerick.ie

**Longford Library Headquarters**
Longford, County Longford
Tel: (043) 3341124
E-mail: mmorris@longfordcoco.ie
Also Sligo County Council
E-mail: mmorris@sligococo.ie

**Louth County Archives Service**
Old Gaol, Ardee Road, Dundalk, Co. Louth
Tel: (042) 9324358
Email: archive@louthcoco.ie

**South Tipperary County Archives**
South Tipperary Local Authorities
Carrigeen Business Park,
Clonmel, Co. Tipperary
Tel: (052) 6172319
Email: roisin.ogrady@southtippcoco.ie

**Waterford City and County Archive Service**
Dungarvan Library
Davitt’s Quay, Dungarvan, Co. Waterford
Tel: (058) 23673
Email: jrothwell@waterfordcouncil.ie

**Wexford County Archive Service**
6A Ardcavan Business Park
Ardcavan, Co. Wexford
Tel: (053) 9196572
Email: archivist@wexfordcoco.ie

**Wicklow County Archives**
Wicklow County Council
Station Road, Wicklow Town, Co. Wicklow
Tel: (0404) 20126
Email: cwright@wicklowcoco.ie
Local Libraries

**Bray Public Library**
Bray, Co. Wicklow, Republic of Ireland
Tel: +353 (0) 286 2600
Email: FScannell@wicklowcoco.ie
Website: http://www.wicklow.ie/Apps/WicklowBeta/Libraries/BranchBray.aspx

**Carlow Central Library**
Tullow Street, Carlow, Republic of Ireland
Tel: (0503) 70094
Fax: (0503) 40548
Other: Catalogue online
Email: tking@carlowcoco.ie
Website: http://www.countycarlow.ie/

**Cavan County Library**
Farnham St., Cavan, Republic of Ireland
Tel: (049) 4331799
Fax: (049) 4362127
Other: Catalogue online
Email: jbrady@cavancoco.ie
Website: http://www.cavanlibrary.ie/

**Clare County Library**
Mill Road, Ennis, Co. Clare, Republic of Ireland
Tel: (065) 6821616/6842461
Fax: (065) 6842462
Other: Catalogue online
Email: mailbox@clarelibrary.ie
Website: http://www.clarelibrary.ie/

**Cork City Library**
Grand Parade, Cork, Republic of Ireland
Tel: (021) 4277110
Fax: (021) 4275684
Other: Catalogue online
Email: citylibrary@corkcity.ie
Website: http://www.corkcitylibrary.ie/

**Donegal County Library**
Oliver Plunkett Road, Letterkenny, Co. Donegal, Republic of Ireland
Tel: (074) 21968
Fax: (074) 26402
Other: Catalogue online
Email: library@donegalcoco.ie
Website: http://www.donegallibrary.ie/

**Dublin City Libraries**
Dublin City Libraries, 138-142 Pearse St., Dublin 2, Republic of Ireland.
Tel: (01) 677 7662
Email: dublinstudies@dublincity.ie
Website: http://www.dublincity.ie/living_in_the_city/libraries/

**Dun Laoghaire Rathdown County Library**
Duncairn House (1st Floor), 14 Carysfort Avenue
Blackrock, Co. Dublin, Republic of Ireland.
Tel: (01) 278 1788
Fax: (01) 278 1792
Other: Catalogue online
Email: libraries@dlrcoco.ie
Website: http://www.dlrcoco.ie/library

**Fingal County Library**
County Hall, Main Street, Swords, Co. Dublin
Republic of Ireland.
Tel: (01) 890 5000
Other: Catalogue online
Email: fincolib@iol.ie
Website: http://www.iol.ie/~fincolib/
Local Libraries continued

**Galway County Library**
Island House, Cathedral Square, Galway, Republic of Ireland
Tel: (091) 562471/565039
Fax: (091) 565039
Other: Catalogue online
Email: info@galwaylibrary.ie
Website: http://www.galwaylibrary.ie/

**Galway Public Library**
Island House, Cathedral Square, Galway
Republic of Ireland
Tel: 091 562471
Fax: 091 565039
Email: info@galwaylibrary.ie
Website: http://www.galwaylibrary.ie/

**Kerry County Library**
Moyderwell, Tralee, Co. Kerry
Republic of Ireland
Tel: (066) 7121200
Fax: (066) 7129202
Other: Catalogue online
Email: info@kerrycollib.ie
Website: http://www.kerrycollib.ie/

**Kildare County Library**
Riverbank, Newbridge, Co. Kildare
Republic of Ireland
Tel: (045) 431486/431109
Fax: (045) 432490
Other: Catalogue online
Email: libinfo@kildarecoco.ie
Website: http://kildare.ie/library/

**Kilkenny County Library**
NIB, 6 Rose Inn Street, Kilkenny
Republic of Ireland
Tel: (056) 91160
Email: library@kilkennycc.ie
Website: http://www.kilkennylibrary.ie/

**Laois County Library**
Kea-Lew Business Park, Portlaoise, Co. Laois
Republic of Ireland
Tel: (0502) 64550
Fax: (0502) 64558
Other: Catalogue online
Email: library@laoiscoco.ie
Website: http://www.laois.ie/LeisureandCulture/Libraries/

**Leitrim County Library**
The Courthouse, Ballinamore, Co. Leitrim
Republic of Ireland
Tel: (078) 4401244424
Fax: (078) 44425
Other: Catalogue online
Email: leitrimeolibrary@eircom.net
Website: http://www.leitrimeo.ie/eng/Services_A-Z/Library/

**Limerick City Library**
The Granary, Michael St., Limerick, Republic of Ireland
Tel: (061) 314668
Fax: (061) 415266
Email: citylib@limerickcity.ie
Website: www.limerickcity.ie/library/localstudies/

**Limerick County Library**
58 O’Connell St., Limerick, Republic of Ireland
Tel: (061) 318477
Fax: (061) 318570
Other: Catalogue online
Email: libinfo@limerickcoco.ie
Website: http://www.lcc.ie/Library/

**Longford County Library**
Town Centre, Longford, Republic of Ireland
Tel: (043) 4112441125
Fax: (043) 4112441125
Email: longlib@iol.ie
Website: http://www.longfordcoco.ie/
Louth County Library
Roden Place, Dundalk, Co. Louth, Republic of Ireland
Tel: (042) 9335457/9353190
Fax: (042) 9337635
Other: Holds databases of Catholic records of Louth
Email: library@louthcoco.ie
Website: http://www.louthcoco.ie

Mayo County Library
Mountain View, Castlebar, Co. Mayo, Republic of Ireland
Tel: (094) 24444
Fax: (094) 24774
Other: Catalogue online
Email: avaughan@mayococo.ie
Website: http://www.mayolibrary.ie/

Meath County Library
Railway St., Navan, Co. Meath, Republic of Ireland
Tel: 046) 21134/21451
Fax: (046) 21463
Other: Catalogue online
Email: colibrar@meathcoco.ie
Website: http://www.meath.ie/Community/Libraries/

Monaghan County Library
The Diamond, Clones, Co. Monaghan, Republic of Ireland
Tel: (047) 51143
Fax: (047) 51863
Other: Catalogue online
Email: jmoelvaney@monaghancoco.ie
Website: http://www.monaghan.ie/en/services/library/

Monaghan County Museum
1-2 Hill Street, Monaghan, Republic of Ireland
Tel: (047) 82928
Fax: (047) 71189
Email: comuseum@monaghancoco.ie
Website: http://www.monaghan.ie/en/services/museum/

Offaly County Library
O’Connor Sq., Tullamore, Co. Offaly, Republic of Ireland
Tel: (0506) 46833/46834
Fax: (0506) 52769
Email: colibrar@offalycoco.ie
Website: http://www.offaly.ie/eng/Services/Libraries

Roscommon County Library
Abbey St., Roscommon, Republic of Ireland
Tel: (0903) 37270 ext. 184/186
Fax: (0903) 25474
Other: Catalogue online
Email: roslib@eircom.net
Website: http://www.roscommoncoco.ie/en/Services/Library/

Sligo County Library
Westward Town Centre, Bridge Street, Sligo
Republic of Ireland
Tel: (071) 47190
Fax: (071) 46798
Other: Catalogue online
Email: sligolib@sligococo.ie
Website: http://www.sligococo.ie/

South Dublin County Library
Unit 1, Square Industrial Estate, Tallaght, Dublin 24
Republic of Ireland
Tel: (01) 459 7834
Fax: (01) 459 7872
Other: Catalogue online
Email: libraries@sdcc.ie
Website: http://www.southdublinlibraries.ie/

The Central Library
Dublin City Libraries, The ILAC Centre, Henry St, Dublin 1
Republic of Ireland
Tel: (01) 8734333
Other: Catalogue online
Email: dublinpubliclibraries@dublincity.ie
Website: http://www.iol.ie/dublincitylibrary/
Local Libraries continued

Tipperary County Library
Castle Avenue, Thurles, Co. Tipperary
Republic of Ireland
Tel: (0504) 21555 / 21102
Fax: (0504) 23442
Other: Catalogue online
Email: info@tipperarylibraries.ie
Website: http://www.tipperarylibraries.ie/

Waterford City Library Headquarters
35 The Mall, Waterford, Republic of Ireland
Tel: (051) 860839
Fax: (051) 849704
Other: Catalogue online
Email: citylibrary@waterfordcity.ie
Website: http://www.waterfordcity.ie/library/

Waterford County Library
Lismore, Co. Waterford, Republic of Ireland
Tel: (058) 54128
Fax: (058) 54877
Email: libraryhq@waterfordcoco.ie
Website: http://www.waterfordcountylibrary.ie

Westmeath County Library
Dublin Road, Mullingar, Co. Westmeath
Republic of Ireland
Tel: (+353) (0)44 40781/2/3
Fax: (044) 41322
Other: Catalogue online
Email: library@westmeathcoco.ie
Website: http://www.westmeathcoco.ie/en/ourservices/tourismartsrecreation/libraryservice/

Wexford County Library
c/o.Kents Building, Ardcavan, Co. Wexford
Republic of Ireland
Tel: +353 (0) 53 24922
Fax: (053) 21097
Other: Catalogue online
Email: libraryhq@wexfordcoco.ie
Website: http://www.wexford.ie/wex/Departments/Library/

Wicklow County Library
Boghall Road, Bray, Co. Wicklow, Republic of Ireland
Tel: +353 (0) 1 2866666
Fax: (01) 2865811
Email: library@wicklowcoco.ie
Website: http://www.wicklow.ie/apps/wicklowbeta/Libraries/Overview.aspx
**Glossary of Terms**

**ACUTE HOSPITAL:**
Acute hospital services diagnose, treat and care for seriously ill or injured patients.

**AMALGAMATION SCHEMES:**
In the early 1920s, counties outside of Dublin initiated these schemes whereby, in the interests of economy, *workhouses* were closed or turned into *county homes*, district or county hospitals. Many of these amalgamation schemes, or county schemes as they were sometimes known, were legalised retrospectively by the Local Government (Temporary Provisions) Act, 1923.

**BARONY:**
Baronies represent the geographic territories occupied by the native Irish tribes before English conquest. In many instances, civil baronies were formed by combining or sub-dividing such territories. Some of the original baronies were further sub-divided for administrative convenience into half baronies. Baronies formed units of civil division prior to 1898, comprising a sub-division of a county and consisting of a group of townlands. There were 327 baronies in 1891.

**BOARD OF GUARDIANS:**
See Poor Law Guardians

**BOARDS OF HEALTH AND PUBLIC ASSISTANCE:**
Boards established in counties outside Dublin in the early 1920s, which operated as executive committees of the county councils from the early 1920s to 1942. In each county, the board supervised the *county home*, *county hospital*, *district hospitals*, *dispensaries*, *home assistance* and blind welfare schemes, boarded out children, measures against infectious diseases and tuberculosis, sanitary reports, labourers’ cottage schemes, water and sewerage schemes, school medical service and other matters in rural areas, small towns and villages. They were abolished in 1942 and their functions taken over by the county councils. In Dublin, Rathdown and Balrothery boards of assistance were created and continued in existence until 1970.

**CENTRAL CRIMINAL LUNATIC ASYLUM:**
Under the Central Criminal Lunatic Asylum Act of 1845 a central asylum for insane convicts and other criminal lunatics was established at Dundrum in 1850. The institution was the first of its kind in these islands and initially had room for 120 criminal lunatics.

**COTTAGE HOSPITAL:**
The concept of a cottage hospital was that of a small institution with a limited number of beds attended by local physicians familiar with the needs of the patients. In Ireland, some of these hospitals were voluntary institutions but the term was also applied to some of the smaller public *district hospitals* in rural areas.

**COUNTY COUNCIL:**
Local authorities established under the Local Government (Ireland) Act, 1898. They were democratically elected and took over most of the functions hitherto performed by the *grand juries* and *county at large presentment sessions*; the repair and maintenance of roads, the maintenance of courthouses and county buildings, the preparation of jurors and voters lists, food and drugs sampling etc.

They made and levied the *poor rate* in rural areas and from this source and the agricultural grant, the county councils supplied money to the *board of guardians* for the upkeep of the *workhouses*, *the dispensaries*, and for *outdoor relief*. They also supplied money to the *rural district councils* to enable them to carry out their duties as sanitary and housing authorities. Each county council served a demand on the *boroughs* and *urban districts* within its boundaries for their share of expenses incurred on poor relief, main roads and other county-at-large expenses. They acquired important powers in relation to motor traffic and public health during the first two decades of the 20th century. They were also enabled to set up committees for agriculture and technical instruction and to give limited aid to these committees. Most county councils transferred their allegiance to the Dáil Éireann Department of Local Government during the War of Independence.

During the reorganisation of local government in the early 1920s the county councils appointed *boards of health and public assistance* to perform health, sanitary and housing functions. The county councils remained the rating authorities and raised the sums necessary for the boards of health and public assistance, the mental hospital committees, the committees of agriculture and, after 1930, the county vocational committees.

Following the abolition of the boards of health and public assistance in 1942 the executive functions of the county council were carried out by *county managers*. Under the Health Act of 1947 responsibility for preventative health services was transferred from the urban districts (apart from...
the county boroughs) to the county councils. Under the Health Act, 1970, health boards, took over the running of the health services from the county councils in April 1971.

**COUNTY HOME:**
Institutions established by county amalgamation schemes in the early 1920s to provide institutional care for the aged, infirm and chronic invalids in particular counties. They generally utilised old workhouse buildings. Like the workhouses before them, they often also accommodated a wide variety of other residents such as unmarried mothers, illegitimate children, orphans, the intellectually disabled, tramps etc. and played a vital role in providing accommodation for vulnerable elements over much of the 20th century. They were invariably run by religious orders, but were financed, often inadequately, by the local authorities. From the 1940s onwards there was a major push by successive governments to improve conditions in these homes.

**COUNTY INFIRMARY:**
An act of 1765 made provision for the erection and support of an infirmary for each county in Ireland to be maintained by grand jury presentments, parliamentary grants, and local subscriptions. The Act also permitted support for several existing hospitals out of public funds. Most county infirmaries were closed as a result of amalgamation schemes in the 1920s and were replaced by county hospitals.

**DEPARTMENT OF HEALTH:**
In 1947 the Department of Local Government and Public Health became the Department of Local Government and a separate Department of Health was established. Responsibility for water supplies, sewerage disposal and other sanitary services remained with the Department of Local Government.

**DISPENSARY:**
From 1805 grand juries were authorised to give grants to dispensaries. These were administered by committees of management and supported partly by subscriptions and partly by a grand jury grant of equal amount. Under the Medical Charities Act of 1851 the grand jury network of dispensaries was taken over by the poor law unions. The dispensaries were staffed by dispensary doctors and run by a committee formed partly of poor law guardians and partly of ex-officio guardians. These committees were abolished under the Local Government (Ireland) Act, 1898, after which dispensaries were run directly by the boards of guardians. From the early 1920s to 1942 the dispensaries were under the control of the boards of health and public assistance.

**DISTRICT HOSPITAL:**
Under the amalgamation schemes of the 1920s district hospitals were established in centres geographically removed from the larger county hospitals. They dealt with medical cases, minor surgical cases and normal and abnormal midwifery. Initially, workhouse buildings were utilised as district hospitals, but as Sweepstakes money became available in the 1930s and thereafter, purpose-built district hospitals were constructed.

**FEVER HOSPITALS:**
Under an Act of 1807, the grand juries could build and maintain fever hospitals to deal with infectious diseases. There were twelve such hospitals in 1921. Fever hospitals were also attached to workhouses before 1921. While many of the older fever hospitals were closed during the amalgamation schemes of the 1920s, fever hospitals remained important in the Irish hospital infrastructure until well into the 1950s when the incidence of infectious disease dropped dramatically and many institutions subsequently closed or were used for other purposes.

**GRAND JURY:**
Grand juries were originally active in Ireland from the middle ages in those areas controlled by the English crown, but gradually spread to all parts of the country. They functioned mainly as local government authorities at the county level. The system was so-called as the grand jurors had to present their public works proposals and budgets in court for official sanction by a judge. Grand jurors were usually the largest local payers of rates, and therefore tended to be the larger landlords, and on retiring they selected new members from the same background. Distinct from their public works function, as property owners they also were qualified to sit on criminal juries hearing trials by jury, as well as having a pre-trial judicial function for serious criminal cases. Many of them also sat as magistrates judging the less serious cases. They were usually wealthy “country gentlemen” (i.e. landowners, landed gentry, farmers and merchants).

A country gentleman as a member of a Grand Jury levied the local taxes, appointed the nephews of his old friends...
to collect them, and spent them when they were gathered in. He controlled the boards of guardians and appointed the dispensary doctors, regulated the diet of paupers, inflicted fines and administered the law at petty sessions.

From 1691 to 1793, Dissenters and Roman Catholics were excluded from membership. The concentration of power and wealth in a few families caused resentment over time. The whole local government system started to become more representative from the passing of the Municipal Corporations (Ireland) Act 1840. Grand juries were replaced by democratically-elected county councils by the Local Government (Ireland) Act 1898, as regards their administrative functions.

HEALTH BOARDS:
These were established under the Health Act, 1970 and took over responsibility for administration of health services from county councils in April 1971. Eight health boards were originally established, each of which were prescribed a functional area in which they operated. The system was altered in 1999, with the eight boards replaced by eleven regional bodies. On 1 January 2005, the health boards were replaced by the Health Service Executive.

HOME ASSISTANCE:
This replaced outdoor relief in the 1920s in an attempt to reduce the stigma of the poor law. However, the ethos of the poor law continued to be associated with it. There was no right to assistance and home assistance officers determined whether persons were actually in need. In 1933, free milk was first provided for those in receipt of home assistance and a free beef scheme was introduced at the beginning of the winter of 1934-35. The payment of home assistance by local authorities continued until 1975.

HEALTH SERVICE EXECUTIVE (HSE):
The Health Service Executive was established on 1 January, 2005 taking over the running of the health service from eleven regional health boards.

INDOOR REGISTER:
Indoor registers were key records kept by such institutions as workhouses, county homes etc, which gave details relating to inmates such as name and address, age, condition, date of admission and date of discharge. Workhouse indoor registers survive for most of Dublin and sporadically for unions outside Dublin. There is a good level of survival for those relating to the county homes.

INDOOR RELIEF:
A system of poor law relief, under which individuals entered workhouse institutions, which was introduced on a more general widespread basis in the aftermath of the industrial revolution in the early nineteenth century as a means of alleviating poverty.

IRISH HOSPITALS SWEEPSTAKES:
The Irish Hospitals Sweepstakes was a lottery established in 1930 to provide financial assistance to hospitals. Many voluntary hospitals had struggled to survive after the Great War due to a reduction in the number of endowments and bequests. The Sweepstakes was used to finance elaborate building programmes in both the voluntary and public hospital sectors from the 1930s onward. From the 1960s income declined and the last sweeps was held in 1986.

LOCAL GOVERNMENT (IRELAND) ACT, 1898:
Under this Act the administrative powers and duties of the grand juries were taken over by democratically elected county councils. Each of the six largest boroughs was formed into an administrative county at the same time. Each urban sanitary district was to be governed by an urban district council and the rural sanitary districts by rural district councils. In addition to sanitary and housing work, these rural district councils took over the business of the baronial presentment sessions and the district share of roads and public works from the grand juries. The functions of the boards of guardians were now restricted to poor relief and district dispensary work and they were relieved of their power to strike a poor rate. Dispensary committees and the posts of ex-officio guardians were abolished. The district asylums were placed in the charge of the county councils who appointed committees of management to administer them.
LYING-IN HOSPITAL:
The archaic term lying-in refers to the time when a woman lies in bed before, while and after giving birth to a baby. It was applied formerly to maternity hospitals such as the Dublin Lying-in Hospital (the Rotunda) and the Bedford Row Lying-in Hospital in Limerick.

MANAGER’S ORDERS:
Following the introduction of the managerial system within Irish local government the process began of the manager making orders to authorise specific actions or payments. These were kept in bound volumes and are important key records reflecting the operation of the health services before 1971.

MENTAL HOSPITALS:
Under an Act of 1806 the grand juries were enabled to make provision for lunatics by adding wards to the existing houses of industry, but the arrangements made under this measure were a failure. The Dublin House of Industry, established in 1772, had some cells for lunatics and played a major role in persuading the government to establish the Richmond Lunatic Asylum, the first and largest of the public asylums, which opened in 1814. The Lord Lieutenant was enabled by statute in 1817 to build asylums where he considered necessary and the costs were to be met by the grand juries. By 1871 twenty two asylums were supported in this way throughout the country. The asylums were run by boards of governors appointed by the Lord Lieutenant and after the Local Government (Ireland) Act, 1898, by committees of management appointed by the county councils. Following the setting up of the new state, the Minister for Local Government and Public Health took over the Lord Lieutenant’s duties in relation to the lunatic asylums. In the early 20th century large auxiliary asylums were opened in Youghal, County Cork, and Portrane, County Dublin. Following the foundation of the state new mental hospitals were constructed in Ardee, County Louth and Castlerea, County Roscommon.

POOR LAW GUARDIANS:
Each poor law union was administered by a board of guardians or poor law guardians, which were hybrid administrative bodies consisting of some elected guardians and some appointed guardians called ex-officios. Following the Local Government (Ireland) Act, 1898 the post of ex-officio guardian was abolished.

POOR LAW UNION:
Poor law unions were formed by taking as a centre the chief market town in each part of the country and attaching to it the adjoining rural districts within as far as possible a radius of ten miles or thereabouts. Townlands in each poor law union were formed into electoral divisions and elected representatives to the boards of guardians drawn from these divisions. There were eventually 163 unions, each with a workhouse.

POOR RATE:
The poor rate was a form of charge on property originally levied to support the poor law unions. Following the Local Government (Ireland) Act, 1898, the county council, as the main rating authority, levied a poor rate. In 1946, poor rates were replaced by county rates.

RURAL DISTRICT COUNCIL:
Local authorities established under the Local Government (Ireland) Act 1898, which operated between April 1899 and June 1925. Their functions included some hitherto exercised by poor law unions (control of sanitation and housing) and grand juries (the functions of the baronial presentment sessions in relation to roads and public works). Rural district councillors also acted as poor law guardians in rural areas and separate elections for guardians disappeared outside urban areas. They were abolished under the Local Government Act, 1925.

OUTDOOR RELIEF:
A system of poor law relief under which an impoverished person was given aid in the form of food, money or goods without the requirement of having to enter the workhouse in order to avail of indoor relief. From the 1920s, outdoor relief was known as home assistance and continued until 1975.
SANATORIA:
The Tuberculosis Prevention Act, 1908, gave the city and county borough councils power to provide hospitals (including sanatoria and dispensaries) for the treatment of persons suffering from tuberculosis or to enter into agreements with existing institutions. By the mid 1920s small sanatoria had been established in Cavan, Clare, Galway, Monaghan, Kilkenny, Tipperary North Riding and other counties had made arrangements for sanatorium treatment with institutions such as Peamount, Newcastle, and Heatherside in Cork. As the 20th century progressed many more sanatoria were constructed until the disease declined in the 1950s.

TOWNLANDS:
In Ireland, a townland is generally the smallest geographical division of land, though a few large townlands are further divided into hundreds. Whilst the system of townlands is of Gaelic origin and predates the Norman conquest, it was in the 1600s that they became mapped by the English administration. While most townlands have names of Gaelic origin, some names and boundaries derive from Norman manors, plantation divisions or were later defined by the Ordnance Survey.

VESTRY:
The parish organisation of the established church was an integral part of the administration of local government in Ireland in the seventeenth and eighteenth centuries. An Act of 1613 specified that parishioners should choose two honest persons to be surveyors of roadworks, and to decide on six days for the repairing and cleaning of the roads by householders, cottiers and labourers. The parish developed important functions with regard to abandoned children and a form of outdoor relief appears to have been in operation with regard to the aged poor in some localities.

VOLUNTARY HOSPITAL:
The earliest hospitals developed in Ireland were voluntary hospitals, established and maintained by private charity and managed by boards of governors. Prior to 1914 the members of the medical staff practically never received payment for their services in these hospitals. Following the Great War voluntary subscriptions to such hospitals almost totally disappeared and they became more dependent on Sweepstakes funding and government subventions.

WORKHOUSES:
Institutions constructed for the relief of the destitute poor under the poor law system established under the Poor Law Act, 1838. Each workhouse was centred on a market town and 163 were built in Ireland between 1840 and 1853. In the early 1920s, under the amalgamation schemes, workhouses outside Dublin were closed and became county homes, county hospitals or district hospitals. In Dublin, the Dublin Union workhouse was renamed St. Kevin’s Institute in 1942.