

## My Time at Long Grove Hospital, Epsom



*Sybil Johnson and friend May c1937*

I started work at 15. My father had died in the school holidays. My mother was left with ten shillings a week, the widow's pension in the thirties. I had a younger brother and we all went to live with my grandparents. There was not enough room for everyone so I was put out to domestic service.

I had never been away from home before and the loneliness was intolerable. I cried myself to sleep many a night, I missed my father who spoiled me and never made me do housework. My mother got cross because I was let off the washing up. My father wanted me to work in an office and I was to return to school after the holidays to learn typing and shorthand, but his death put paid to that. In domestic service my first job was for four shillings and sixpence a week. My mother had to supply morning uniform and afternoon. I gave her half a crown a week for my washing and I had two shillings, nine pence for the pictures and I saved the rest for new clothes. One day off a week and every other Sunday I would go home by bus. Another nine pence

My second job paid seven and sixpence and I was able to live at home as my mother had remarried. By now I was 17 years old and not very happy with a new stepfather so I looked for another job. This time as a Mother's Help. I looked after a little boy and enjoyed my time there. Reading the newspaper one day in 1936 I saw an advertisement for mental nurses at Long Grove Hospital Epsom. Later we were called psychiatric nurses. We were the poor relations of the nursing profession.

My mother had hysterics when I told her of my intentions, for her idea of a mental hospital was like the workhouse in her day and conjured up all kinds of horrible goings on. However I went ahead and applied for an interview. I took a large suitcase packed with necessary black shoes and stockings, warm winter vests and bloomers, clean underwear in case I got run over by a bus

I arrived at my new job and was met by a ward sister in crisp uniform and starched cap with strings dangling under her chin "Come along nurse" she said and I was ushered into the presence of the matron. I felt quite awed by her but she was very kind and I was told what was expected of me. Hours of work were 7am till 8pm or 9.20pm and an hour for dinner and half an hour for tea. One day off a week, be in by 10.30pm and a late pass till 12 o'clock once a month. Two weeks paid holiday. All this for £10 a month. I felt like a millionaire. I walked down the long corridors, behind the sister to the needle room to be measured for uniform and raincoat. When I visit a hospital today I remember the smell all hospitals have - must be the carbolic.

After getting my uniform I was given a medical. There were three of us I remember, all a bit apprehensive at what was to come. We came from all over, one from Hartlepool, myself from Suffolk and the other from Yorkshire. The difference in dialects was really funny at the time.

After seeing my room, I was taken to the mess room for some tea and met other girls off duty. That night felt strange and the radiators clanked when they came on at six o'clock and I was scared out of my wits. The bell rung by a night nurse, went on and on. Doors were opened and shut with a bang, I got dressed and went as instructed to the sister's office. Then to the mess room where there were other nurses, Juniors as we were called, had our own table. The breakfast was good and plentiful, but we had to hurry and get on the ward by seven. My first morning was a bit frightening. The noise, the smell - all so strange.

I had had a sheltered upbringing. These poor people and their way of life made me so sad. Those who were restless and in danger of injuring themselves and others were inside rooms with shutters and locked doors. A black rubber chamber (pot) was the toilet for the night. As last nurse it was my job to empty these and make the bed, often soiled and wet. The padded room, for more fragile patients who were restless, was double locked. Those patients wore canvas shirts and had canvas bedding, like tent material. The room itself was often filthy and would have to be scrubbed with carbolic. To this day when I smell disinfectant I think of scrubbing the "pads" as we called them.

Once up and dressed the patients were taken to the toilet and bathroom to be washed and hair combed and braided, for many were not able to do it themselves and would just stand and wait or wander up and down. Then breakfast, that was often chaos, for the patients would steal each other's food. A plate of porridge was thrown at me. No wonder we had seven aprons each!

After breakfast it was toilets again, for many were incontinent and the floor had to be mopped very often. Then it was exercise in the gardens and each patient had much heavier shoes put on and shawls if it was cold. They were counted out and counted in by a senior nurse. After meals the cutlery was counted. I asked why. Some would hide knives to hurt themselves or swallow spoons.

Each nurse had three patients with her in the garden, some had to be watched. The nurses left on the ward would be checking the floors and making beds, doing medicines, seeing to the patients who had to stay in for various reasons. Some

patients would work on the ward, washing up, cleaning brass, windows and dusting. For this they got a little pay and privileges such as the hospital dance, cinema and shopping walk.

After some time I began lectures for my Preliminary Exam. We were allowed off duty for these, but on our day off we were expected to go. I found it all interesting. I learned to love some of my patients and dislike others, but you were not allowed to retaliate whatever the provocation. I was dragged along the floor by my hair once, not a nice experience, but the poor soul was so demented I just had to forget it and get on with everything else. After studying for my Prelim and passing I was a dayroom nurse, no more toilets thank goodness, but suddenly I had to do six months Night Duty. This was usual, and although one had to get sleep, there was more leisure time. I had two nights off a week and could do more. I went to London and saw some shows and various sights and had a bit more money.

Night duty was hectic at times. If you were on a refractory ward it could be very noisy and at 5 o'clock we had to give out clothes and get people up who were able to dress themselves, and make sure everyone was dry and clean that was still in bed when the day staff came on.

I did a month on the sanatorium for TB and typhoid and had to wear white coats and masks when attending patients. There were unpleasant tasks to perform but soon *it* became a habit. Thank goodness TB is no more and typhoid a rarity. I learned a great deal in that month. The charge nurse was a good lady and helped her junior nurses. I remember giving her a pound on pay day to keep till the end of the month because by then we juniors were always "broke". She very kindly did this for many of us. She would make us a snack in the kitchen when we were on late shift, because *it* was a long time till breakfast. She is gone now but I remember her with affection. I learned much from her which helped me to prepare for my Staff Nurse position. The exam was called "Psycho" for short not to be taken for the film by Hitchcock. I received my certificate and badge with great pride, and my mother was delighted to have a daughter who was a nurse.

By now things were changing. I was now 22 and engaged. Married staff were not allowed, or if you wore glasses, so I did not go back to Long Grove until the fifties when I went on night duty – married women were accepted by then, and things were very different.

### **Back to Long Grove 1952**

I went back to Long Grove in 1952 on Night Duty for three nights a week, part time it was called. I was a Staff Nurse and as something called the Salmon Report had come about I had to go where I was told, to a different Ward each night.

Everything was so different from my early years up till 1939 when I married. Married women were now accepted. My pay was better, I got £60 for 3 nights. Couldn't believe my eyes when I got my first pay cheque.

The Hospital was different now, no more padded rooms, no locked rooms. Outside doors were still locked but no more closed shutters in side rooms. No more iron beds but neat wooden ones along with a wardrobe and rug by the bed. New drugs now made all the difference and patients queued up by the Office every night for their medication.

There were Admission Wards where new patients came to be assessed and sent to appropriate Wards or sent home after a short stay and treatment. There were difficult patients but if they took their medication regularly they calmed down and some went out each day to work.

I did a short time on Day Duty and helped with Electric Convulsive Therapy, ECT for short, and deep Narcosis. The latter kept a patient sedated for a week at a time. ECT had a good reputation for depression but was said to affect the memory. We had our own operating theatre, for mentally ill people have the same illnesses as sane people. They had to be watched by a special Nurse by the bed, if they had stitches or tubes in, they would pull them out and undo the good work.

I preferred the Infirmary Nursing or the Geriatric Wards. We worked with women and did not nurse on the Male Wards; that came later. The patients were restless very often at night and disturbed each other. We would get them up at 5.30, dress them and put them in a geriatric chair for the Day Staff to wash them when they came on duty. I did four years with my old ladies and grew very fond of some of them.

Then things changed again and I had different Wards every night, new admissions, drug addicts and a Juvenile Unit of 13 and 14 year olds who were very destructive and set fire to the beds or absconded during the night to be brought back by the Police at all hours. We often went out at night to bring back patients who had escaped, taking a sedative with us in case of trouble.

I gave up my full time and did part time again still on a different Ward every night, never really getting to know the patients. Many got better as more new drugs came in, some never came back but many often did come back, they could not cope with the outside world. I feel now many years later it was not a good idea to close the Mental Hospitals. With modern day progress in drugs and machinery they would be easy to run with less Staff.

**Sybil Johnson S.N. © 2011**  
*Images courtesy of Sybil Johnson © 2011*

**Editors note** - Sybil retired in 1972 at age 58, she is now aged 93. Because she worked part time she receives no pension but is still very proud of the work she did while at Long Grove Asylum.



*Sybil's mother in law (left) and a colleague  
who worked at Banstead Mental Hospital c1890*