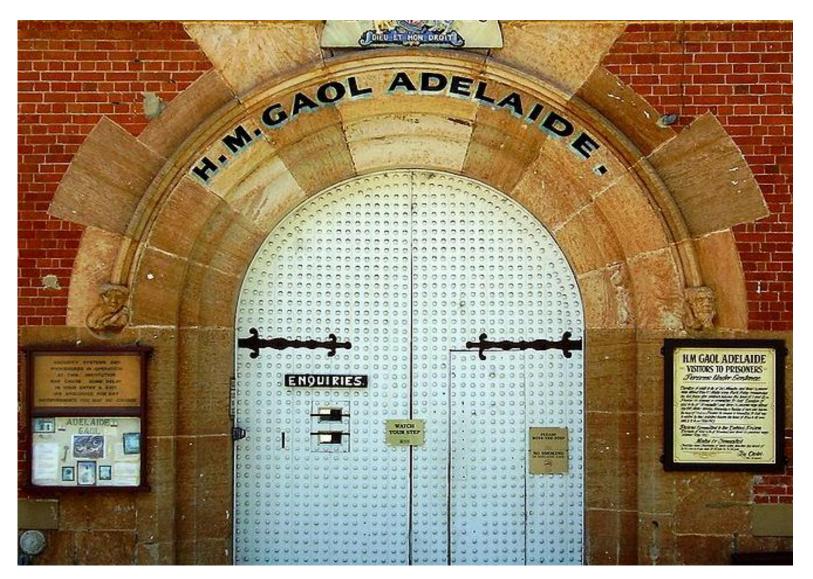
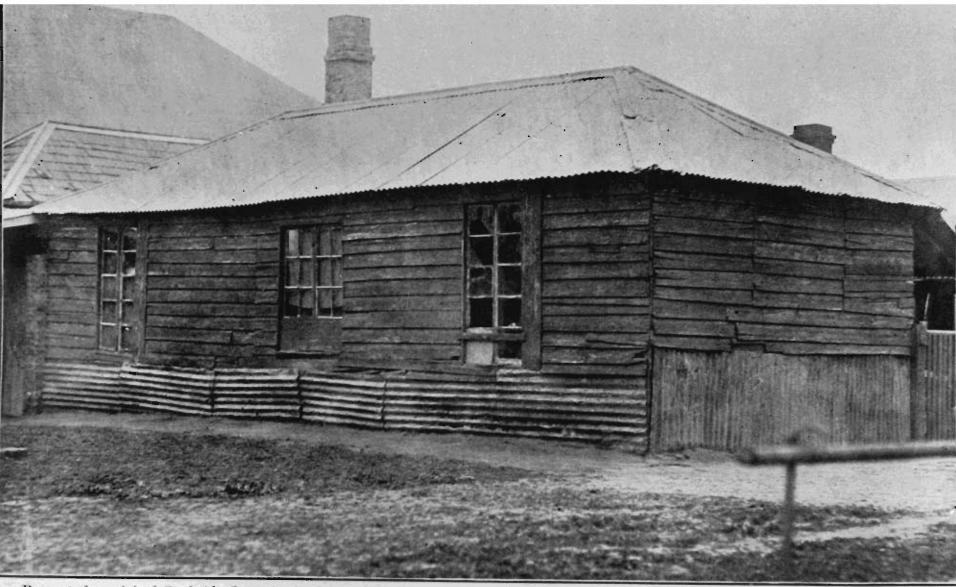
Adelaide & Parkside Asylums

Cycles of Change March 7 2011



1841 to 1988

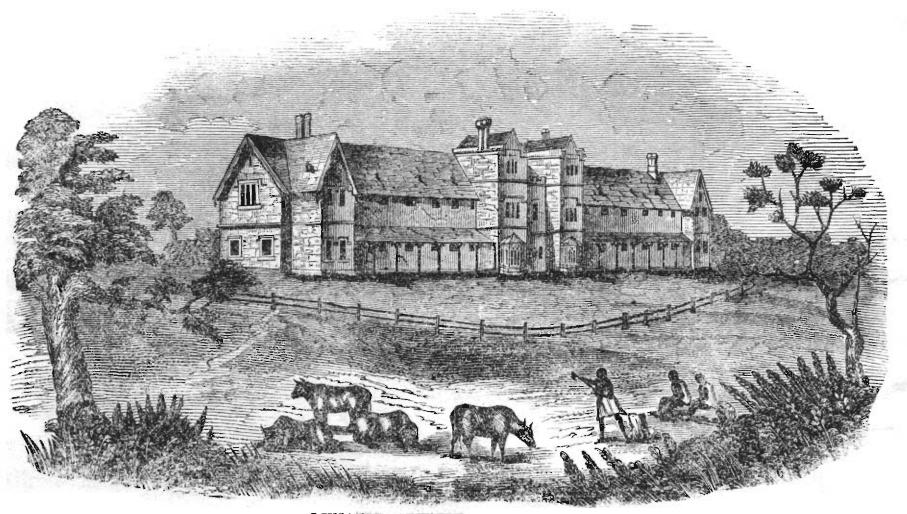


Part of the original Parkside Lunatic Asylum, which for many years has formed the rear portion of the old homestead at the Photo. Smith.

Monreith Estate, which is shortly to be cut up for building sites.

PUBLIC COLONIAL LUNATIC ASYLUM 1846 - 1852

WOODEN HOUSE WITH 8 ROOMS & A COTTAGE LOCATED ON 1 ACRE OF GROUND WITHIN WHAT IS NOW GLENSIDE HOSPITAL GROUNDS APPROX 60 METRES WEST OF CONYNGHAM STREET ON GREENHILL ROAD. THE AREA WAS LEASED FROM MRS FREEMAN OF HOBART TOWN FOR 25 POUNDS PER ANNUM.



LUNATIC ASYLUM, ADELAIDE. 1852 - 1902 GOODHUGHES ALMANACK





ADELAIDE LUNATIC ASYLUM 1852 - 1902 S-E ASPECT CIRCA 1900







ADELAIDE LUNATIC ASYLUM & STAFF CIRCA 1900 N - E VIEW

Admission Honora R admisted 3 June 1863 38 of 63

ORDER BY JUSTICE OF PEACE IN CASES OF PAUPER OR DESTITUTE LUNATICS.

South



Australia

(TO WIT).

Whereas it appears to me, Samuel Beddome, Esquire, one of Her Majesty's Justices of the Peace in and for the said Province, having called to my assistance Mr. Horning Colonial Colonial that

is of unsound mind, and that is destitute of the means of support or maintenance, you are hereby directed to cause the said to be conveyed to the Lunatic

Asylum at Adelaide, in the said Province.

Given under my hand and seal, this here one thousand eight hundred and sixty-

day of forces

To the Master Attendant, Adelaide Lunatic Asylum.

MEDICAL CERTIFICATE IN CASES OF PAUPER OR DESTITUTE LUNATICS.

South



Australia

(TO WIT.)

I DO HEREBY CERTIFY, that, by the directions of SAMUEL BEDDOME, Esquire, a Justice of the Peace in and for the Province of South Australia, I have personally examined the said & Force a

and that the said

is of unsound mind.

Dated this There

day of

one

thousand eight hundred and sixty House

Frederick fpicer

Legally Qualified Medical Practitioner.

RULES AND REGULATIONS TO BE OBSERVED AT THE LUNATIC ASYLUM FOUND AMONGST THE ADELAIDE LUNATIC ASYLUM ADMISSION PAPERS FOR THE YEAR 1856.

•

RESIDENT MEDICAL OFFICER

• The Resident Medical Officer' will have the general medical and moral management of the patients, in the absence of the Superintendent. He is required to superintend the medical treatment of the patients under the authority of the Superintendent and no medicines are to be administered to any patient without his sanction. He is required to see that the sleeping rooms and day rooms are well ventilated and that the whole institution is clean and in proper order. He is required to see that the patients are properly watched over and cared for by the Headkeeper and the Attendants, that they are treated with kindness and gentleness as far as possible, that they are amused and properly employed, that no mechanical restraint or other mode of discipline is unnecessarily used in their treatment, and that their rations are properly served and all of proper quality.

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HEADKEEPER

The Headkeeper is to have the charge of all the patients in the Establishment and will be held strictly
responsible for other safety. He will be held responsible for all the furniture stores and the property
belonging to the Establishment. He will have authority over the keepers, nurses and other servants of
the Establishment and will strictly enforce their observance of the rules which are to regulate their
conduct.

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• No servant of the Establishment is to be absent from the premises without permission of the Superintendent, who shall communicate the same in writing to the Headkeeper.

HOUSEKEEPER

The Housekeeper is to have charge of all the bedding and linen belonging to the Asylum and is to be responsible for the same. She is to see that the whole Establishment is kept scrupulously clean.

COOK

The Cook, assisted by such patients as are able is to attend to the cooking and is to be held responsible for the proper performance of these duties. The Cook is to have charge of the bathrooms and to have the supply of hot water ready whenever required.

KEEPERS AND NURSES

The Keeper's and Nurses are to be under the immediate control of the Headkeeper. They are to watch vigilantly over the patients under their care, and are on no account to leave them without permission, except under the most imperative necessity. They must be most careful to avoid hardship both of conduct and language towards the patients, they are on the contrary to treat them with as great gentleness as is compatible with the due enforcement of discipline. They are to use all their best endeavours to keep the patient under their charge employed and amused. The Nurses assisted by such patients as are able to attend to the washing.

TIME OF RISING AND GOING TO BED

The patients are to rise at 6.00 a.m. in summer and at 8.00 a.m. in winter.

They are to be in bed by ½ past 5.00 p.m. in winter and 7.00 p.m. in summer, which are to be the "lock up" hours.

CLEANING VENTILATION ETC.

The sleeping rooms, day rooms, passages and water closets must all be cleaned before breakfast.

The bedding must also be aired and the rooms well ventilated as early as possible.

MEAL TIMES

The patients are to take breakfast at 9.00 a.m. in winter and 8.00 a.m. in summer.

Dinner at 1.00 p.m.

Supper at ½ past 4.00 p.m. in winter and 6.00 p.m. in summer.

MECHANICAL RESTRAINTS ETC.

All means of mechanical restraints to be kept by the Headkeeper under his direct control, except that which is in immediate use. No restraint nor any other' mode of enforcing discipline to be employed without the sanction of the Headkeeper. Every instance in which it has been employed, with the length of time it has in each occasion been employed to be stated by him to the Resident Medical Officer.

PATIENTS TO ASSIST

All patients, who are able, are required to assist on all occasions, the keepers and servants in the performance of their duties.

VISITORS

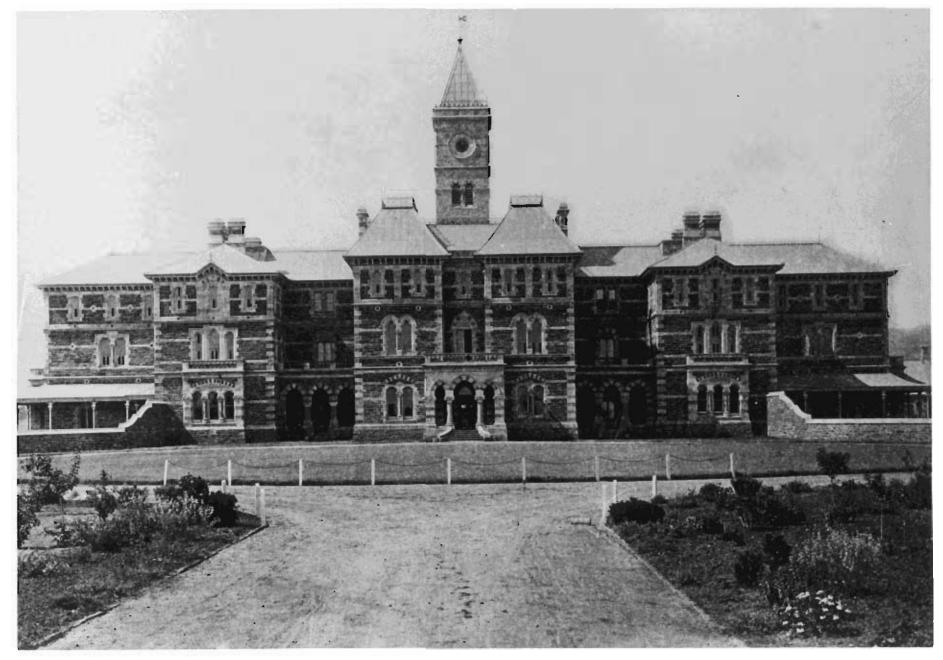
Friends of the patients may visit them every day, Sundays excepted, between the hours of 12.00 midday and 4.00 p.m. Visitors must see their friends in the reception room, with in all cases their names must be announced to the Headkeeper.

The South Australian Advertiser Monday 11 October 1869

THE LUNATIC ASYLUM ENQUIRY.

ALEX. S. PATTERSON, M.D. Edin., M.D. Melb., M.R.C.S. Edin.

-"The members of the Gas Commission made a visit of inspection on the evening of the day when this took place. I was round the Asylum three times that day—once on my morning visits; a second time at 6 o'clock; and about 8 I was sent for, and accompanied Hessra, Thomas, Lewis, and Dr. Moore on their visit of inspection. On none of these occasions did I see any indication of drinking on the part of the attendants.
- The statement made by Brewster that patient B...... came home on one occasion intoxicated is correct; but he is guilty of misrepresentation when he says I allowed it. B......, being convalescent, was permitted to make probationary trips to his friends in town. I know of no better method for .testing the fitness of patients for discharge than allowing them to make excursions beyond the Asylum. My practice is to exact a promise from them in the first instance that they will behave properly, and return at a stipulated time. B...... having come back from one of these visits intoxicated, I expostulated with him, and stopped his leave. Being the father of a family of email children I allowed him to procure work from his brother, who keeps a boot-shop in Rundle Street, and the proceeds were applied to the support of his wife and children, who, I believe, were in a starving state. I have never, as has been represented by attendant Brewster, allowed intoxication on the part of attendants.



PARKSIDE LUNATIC ASYLUM 1870 - 1913 EASTERN VIEW CIRCA 1876 - 1886

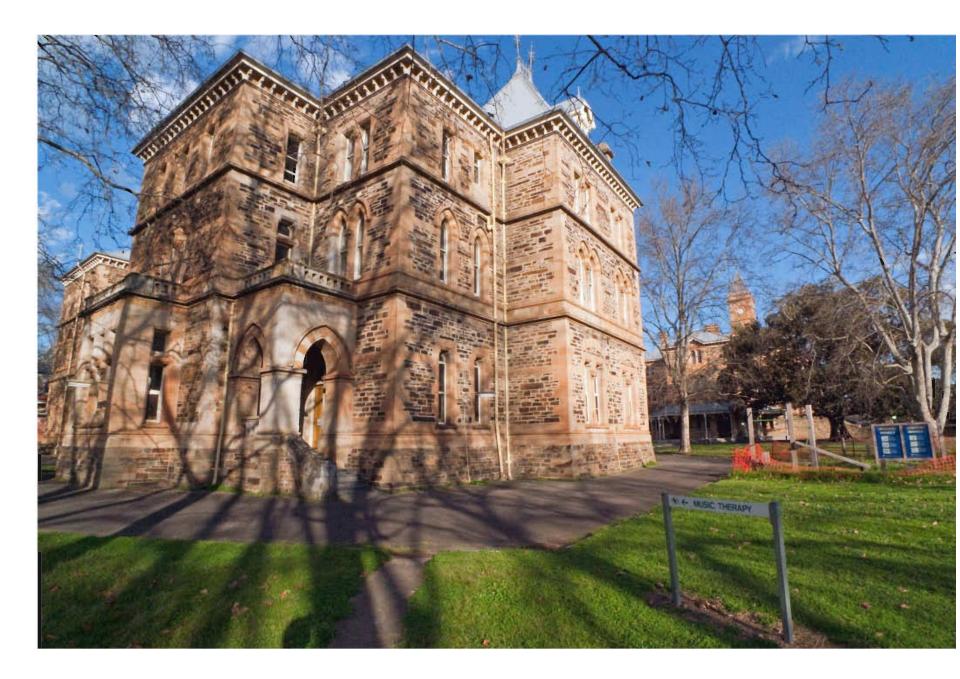


PARKSIDE MENTAL HOSPITAL 1913 - 1963 C. 1920 N - E VIEW













By whose authority sent Date of admission Name of Patient, and Christian name at length / Male 47 years Sex and age Married, single, or widowed Supphoned to have a wife in Victoria Condition of life, and previous occupation (if any) Labores The religious persuasion, as far as known Pomaso Catholic Previous place of abode Whether first attack Age (if known) on first attack When and where previously under care and treatment - do -Duration of existing attack Several weeks past Supposed cause Whether subject to epilepsy-Whether suicidal to so fact so known Whether dangerous to others you kas made an attack with a knift on an inmate & one Name and Christian name and place of abode of the nearest known relatives of the patient, and degrees of relationship (if known) Can the relatives pay anything towards maintenance, and if so, how much Degree of education mg 1997 11 4 15 18 3 18 Previous habits THE CHARLES Date of medical certificate, and by whom signed 26 1 family 1857 STATE ON ADMISSION General health Frail. Face inclined to ac April 1: 1887 Removed to Tarkinde Any · Kalin

By whose authority sent_ Date of admissiou _ Name of patient, and Christian name at length_ remale are 2 Sex and age Married, single, or widowed. ('ondition of life, and previous occupation (if any) atomestic The religious persuasion, as far as known, Previous place of abode_ Whether first attack_ Age (if known) on first attack_ When and where previously under care and treatment... Duration of existing attack Supposed cause Typhoid fever which she had recent Whether subject to epilepsy . Not know Whether suicidal_ Whether dangerous to others __ Name and Christian name and place of abode of the Lavenua & nearest known relatives of the patient, and degree of relationship (if known)....) Can the relatives pay anything towards maintenance, and, if so, how much? Degree of education Previous habits_ Date of Medical Certificate, and by whom signed 27 flely 89 STATE ON ADMISSION. Generals health NA robust. Dody ill-nowished If les very adminations below the Ame intal condition fent marine - oursey of In this places, and distructive. I shing of In this and refring book. Speak guite ander Pilly - her habits

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WE,	•	and		
the undersigned Justices of .tl	ne Pcace for the Province	of South Austra	lia, having called	to our assistance
and having seen and examined			. a Me	dical Practitioner,
			havina	. and the said. leposed upon oath
that in his opinion the said		•	naving (teposed upon oath
is a dangerous	and heing satisfied that t	he said	-	•
	is a day	ngerous	hereb	y commit the said.
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Dangerous Visitors of such Asylum, or any	until he may be	ler your charge, the discharged theref sed in that behalf.	rom by the order	of any two of the
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Date the	day bi	is		
	The second second second			
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Duration of existing attack		: :		
Supposed cause	<u> </u>	• •		
Whether subject to epilepsy			<u> </u>	:
Whether suicidal		<u> </u>	·	
Christian and surname, and place of nearest known relative, and relationship (if known)	degree of	· · ·		

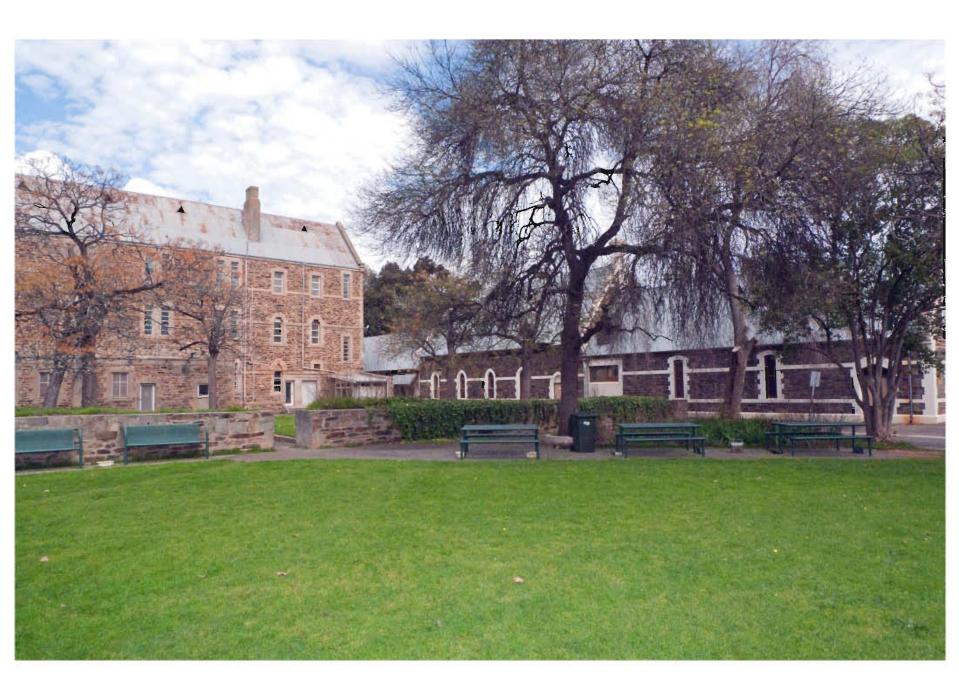
Date of Medical Certificate, and by whom signed (if any)_



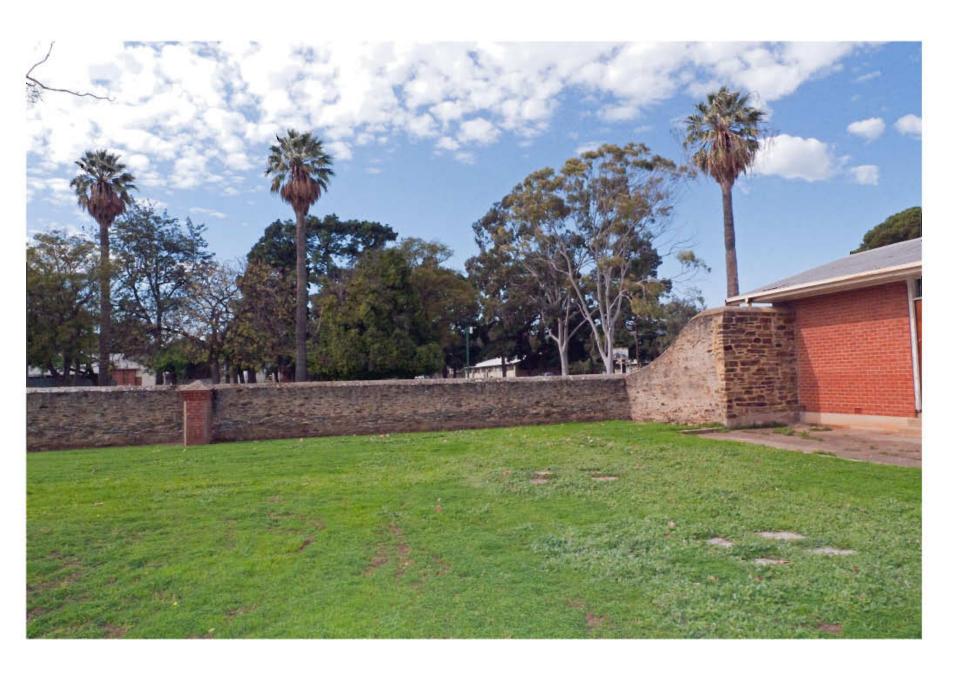


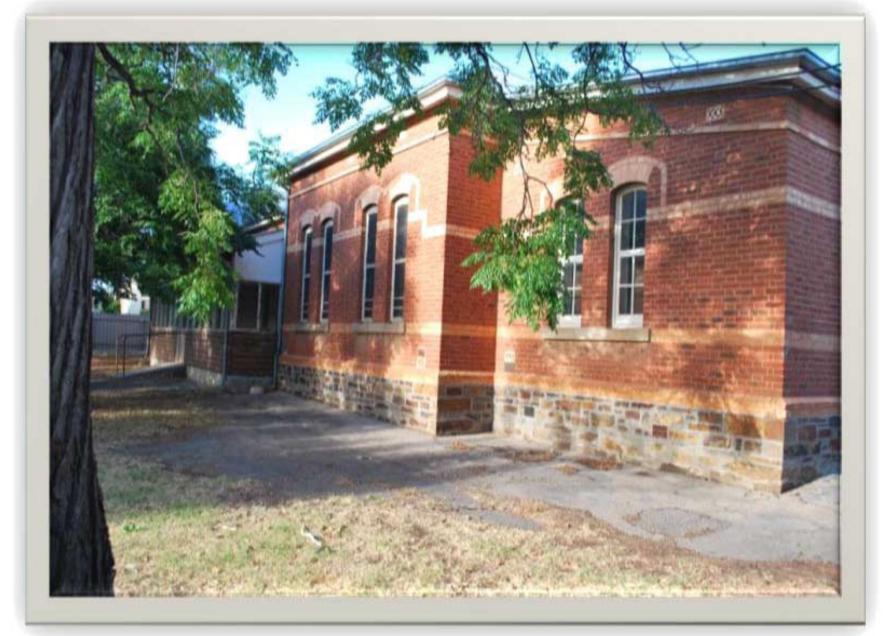




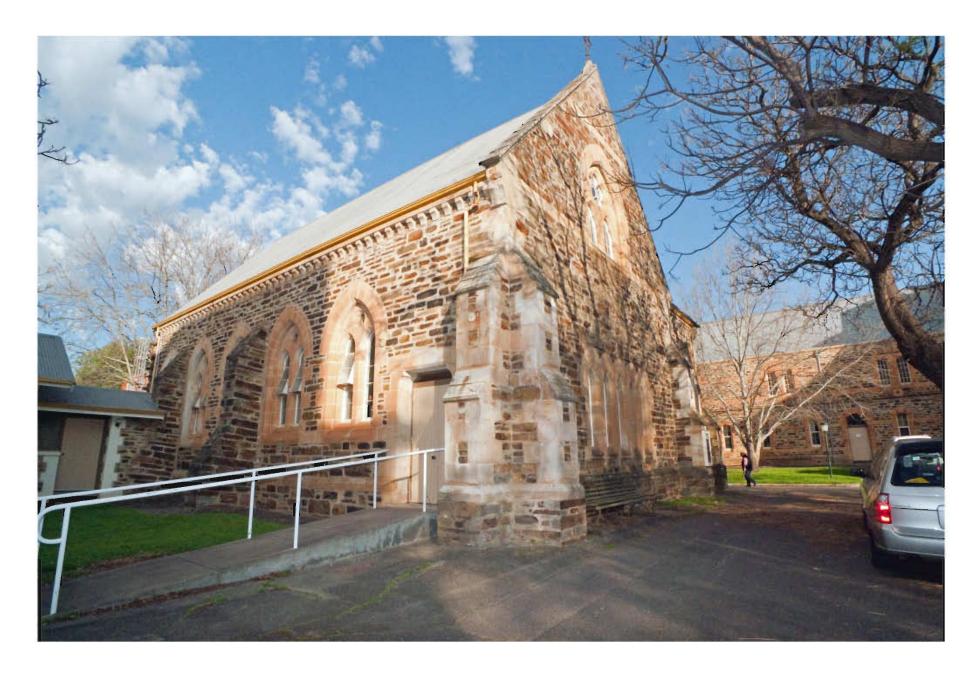


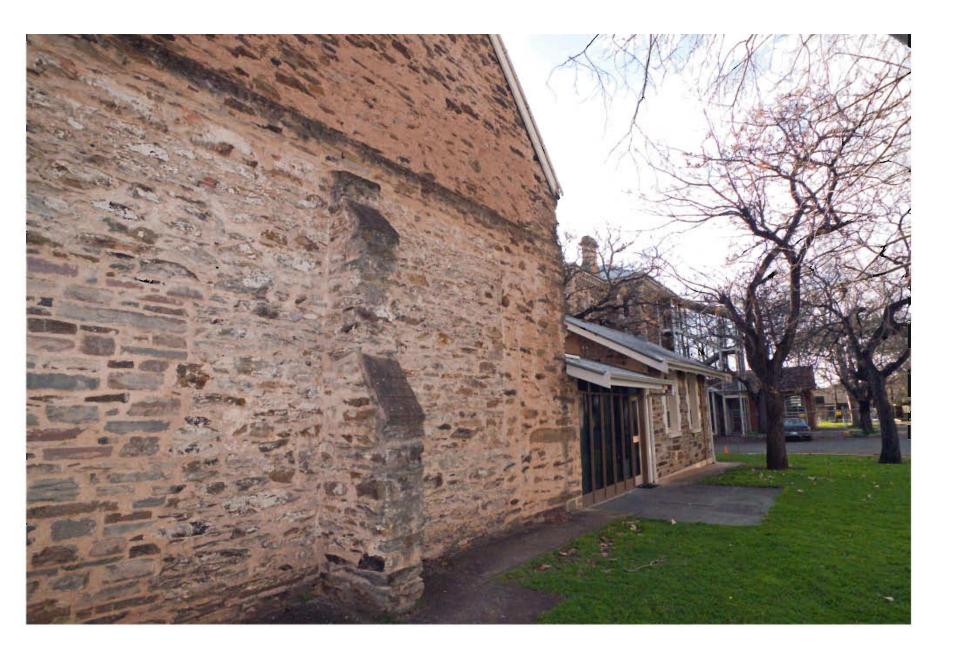






- They are the 2 remaining of 6 'cottages' built between 1880 and 1891 and represent a significant departure from the aggregation system for the management and treatment of patients in large wards in multi-storeyed buildings in lunatic asylums, to a much more therapeutic 'Cottage System' of segregation, diagnostic steaming and with a healthier domestic scale environment.
- The cottage system model of care evolved in other asylums located in England and America and was advocated by medical leaders of the day as best practice.
- Drs Paterson and Cleland (both respectively Colonial Surgeons and Superintendents) of Parkside Lunatic Asylum were always conscious to provide the best care and in doing so significantly contributed to the evolution of public mental health services. Despite increasing clinical demand and fiscal restraints they were able to depart from the original plans and previous prevailing wisdom of accommodating patients in large industrial sized buildings for economies of scale, to implement a more therapeutic and contemporary model of care.
- As it turned out the cottages not only provided a better clinical and more homely environment as intended, they were more economical as well. (Cleland, Report on Hospitals for the Insane, 1888)







WOMENS DINING ROOM & CHAPEL 1963

