The Hospitals and Medical Practices of Tewkesbury



THE HOSPITALS AND MEDICAL PRACTICES OF TEWKESBURY FOREWORD

Welcome to our updated book which I'm sure you will find fascinating. We are now entering the fourth generation of our hospitals with a purpose built, state-of-the-art facility, which secures the future of a hospital in Tewkesbury for further generations.

As the book shows we were sad to see the demise of the first one which then moved into the second; and I know the affection we hold for our present hospital will create mixed feelings with its closure. However, I'm sure the people of Tewkesbury will soon embrace and appreciate what a fantastic facility the new Tewkesbury Hospital is and come to hold it in the same regard. With the continued support of the community of Tewkesbury for their hospital, I'm sure the staff will enjoy working in their new environment allowing them to maintain and increase their very high standards of patient care.

As with the previous edition of the book the authors are kindly donating the profits of sales to the Hospital Friends for us to keep the equipment updated.

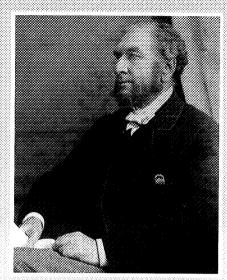
I look forward to a bright future for Tewkesbury's Hospital.

Kevin Cromwell

Chair, Tewkesbury Hospital League of Friends

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MR WILLIAM ALLARD - PRESIDED AT THE MEETING WHICH RESOLVED TO SET UP A RURAL HOSPITAL

view of their opinions, they would not wish to be involved in the proposed Hospital.

Their opposition was brushed aside by the meeting since those attending were convinced that the necessary finance would be forthcoming. There was more debate on a proposal from Mr Sargeaunt, that the proceeds of the sale of the aftermath of the Ham should be diverted to be used for the Hospital, rather than being distributed to residents of the houses facing the three main streets. On being advised that this would require an Act of Parliament, Mr Sargeaunt withdrew his proposal. Another suggestion was made that the proposed hospital should be merged with the Tewkesbury Dispensary which had been founded in 1815, but this too was rejected.

The eventual outcome of the meeting was a resolution "That it is desirable to establish a Rural Hospital for the Borough of Tewkesbury and its vicinity, and that a Committee be appointed to devise a suitable scheme for such a purpose." Appointed to the Committee were the Mayor, the Vicars of the Abbey and Holy Trinity, Rev C W Grove, Alderman John Surman, Doctor Hitch, and nine representatives of the gentry and business men of the town. Doctor Devereux was appointed as Secretary.

Events moved rapidly over the following three months, and when the first Annual General Meeting was held on 26th June 1865 with John Surman in the chair, he was able to say that the Hospital could now "be regarded as fairly launched and was destined to be of great and lasting benefit to the town and neighbourhood." Doctor Devereux had

been appointed as the first Surgeon to the Hospital and Churchill Romney, a Solicitor partner of C W Moore was the Secretary.

In his report to the meeting, Romney listed the achievements of the Committee:

- A property in the Oldbury had been procured for conversion to the Hospital, and had been open to receive patients since 17th April.
- Six inpatients had been admitted.
- The house had been well adapted for the purpose of the Hospital and had been thoroughly cleaned and adequately furnished, thanks to the kindness of friends.
- The Committee had purchased equipment, and a library had been established from donations of volumes from well wishers.
- An efficient nurse had been appointed.
- Meetings of the Committee had been held each Thursday and the Hospital was partially self supporting, thanks to the generosity of subscribers and contributions from patients.

CHAPTER 2 THE OLDBURY ROAD HOSPITAL

Ev. 1870 the Governors were considering ese corchase of land on which to erect a purpose built hospital to replace the wouse that was found to be too small and inconvenient for the range of meatment which was provided. At the ACM in July 1870, the Secretary's enort mentioned that several supporters et the Hospital had "offered liberal Monations towards the erection of a Hospital". The AGM, after debating the amoused new Hospital, decided to open building fund and that as a start, it was agreed to transfer £200 from the Hospital deposit account to the new building fund.

Register for 16 June 1870, an invitation was issued to "those desirous to subscribe" to communicate with the Hospital Secretary, Ralph Chandler. The Committee had such confidence that the necessary funds would be raised, that they purchased land in the Oldbury and commissioned John Middleton to draw up plans for the erection of a new hospital. Middleton was the designer of the Delancey Hospital and several churches in Cheltenham.

In July 1871, the Committee reported to the AGM that already a total of £572 had been promised, in addition to the £200 transfer authorised at the 1870 AGM. The suggestion, that building work commence as soon as the final drawings and specifications were received from Mr Middleton, was accepted. The following week, the 'Register' published the first list of donations actually received amounting to £170. From that date onwards, the weekly meetings of the Committee received reports of the donations which were flooding in from many sources. The popularity of the Hospital was obvious, since the donations came not only from the wealthy residents, but also from the collection boxes in the churches, workshops and shops. The building contract was awarded to the local firm of Collins and Cullis.

The 30 November 1871 was the day chosen for the laying of the Foundation stone of the new Hospital. The ceremonies to mark this event started with a service in the Abbey, the preacher being the Reverend Hemming Robeson, the incumbent of Forthampton. The 'Register' reported that "a numerous congregation assembled in our venerable old parish church, and a



THOMAS COLLINS - OF COLLINS & CULLIS THE BUILDERS OF OLDBURY ROAD HOSPITAL

congregation more devout we never saw within its walls".

After the service the Governors and other friends of the Institution, met in the Town Hall and then processed to the building site where a crowd of over 500 had gathered to watch the laying of the Foundation stone. The Vicar, Canon C G Davies, led a short service and then John Surman, the President, laid the Stone, under which was placed a bottle containing a florin, a shilling, a sixpence

the Committee and the patients word give him the highest possible and for his treatment."

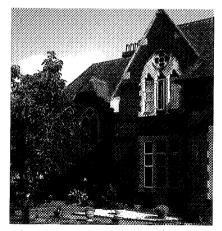
properties responded and disclaimed credit for the Hospital idea, that credit should go to Mr Surman, and before High assisted by Mr Yorke and Mr Sarasaunt. These gentlemen had taken the trouble to visit other places to see for penselves what could be achieved.

The Register gave a detailed description of the building and commented that "the enoie building is fitted up in the latest and most approved manner, leaving nothing to be desired".

The AGM held in 1873 received a report that the building had cost £1882 14s 104 and there was a deficiency of £402 34. In order to clear this deficiency. the wives of the Committee members had set upon the idea of holding a grand maxaar. This had taken place over three days in April 1873 and "thanks to the zealous exertions and great liberality of several ladies in the town and neighbourhood" the bazaar had raised the sum of £660 2s 4d. Thanks to this effort, the Hospital was free from debt. On a rather gloomy note, it was said that the running costs were such that it was necessary to consider a change of rule to

increase the subscription. The meeting accepted this point and imposed greater contributions from subscribers and donors to qualify for the right to recommend patients to the Hospital.

During the following year, the committee used the remaining balance of £37 in the building fund, to add a porch over the front door, purchase a linen press, and provide a hot water supply to the upper wards. Costs of running the hospital were beginning to be of concern, since several generous subscribers had passed away and had not been replaced.



GRAHAM COURT THE OLD HOSPITAL IN OLDBURY ROAD

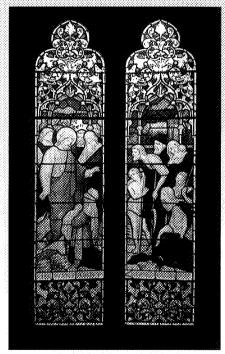
CHAPTER 3 EXPANSION AT OLDBURY ROAD

The Hospital was more fortunate in the year 1875, when it received a bequest of £100 in Consols from the estate of the late Miss Mines. The Committee recommended the employment of an Assistant Surgeon to relieve some of the burden falling on the shoulders of Dr Devereux. This was readily agreed by the 1875 AGM.

It is significant that whenever there appeared to be a financial crisis or if new equipment were needed, the people of the town and neighbourhood responded by direct giving or by organising events. As an example, in 1880 an evening concert was arranged in aid of the Hospital by Mr W H Gray and Mr George Watson. Amongst the soloists engaged to perform was Mr A Von Holst, the father of the composer, Gustav Holst.

The Hospital carried on its useful services for a number of years, but improvements in the treatments available, coupled with the design problems of the building were the factors which regularly exercised the minds of the Committee. In 1880 the Hospital received a donation from Mrs Townend

an apt text, and is appropriate to describe the character of Dr Devereux. Both of his sons obtained medical qualifications, and the eldest took over the practice and the duties of Medical Officer at the Hospital.



THE STAINED GLASS WINDOW MEMORIAL TO DOCTOR DEVEREUX

CHAPTER 5 THE NEW HOSPITAL IN BARTON ROAD

The AGM of Governors held in 1911 received a report in which the Treasurer drew attention to a fall in the income in the previous year, especially in the church collections. However, he was able to report that the balance in hand had increased by about £26. Attention was also drawn to the proposal of the Committee to improve the heating arrangements by installing new systems which would be guieter and cleaner, vet requiring less labour. The Medical Officer supported the proposal even though, through lack of money, only part of the premises could be improved at present. He was confident that the money would be forthcoming, as it had on every occasion when the people were asked to support their Hospital.

In January 1929 a railway accident at Ashchurch, in which 4 people were killed and many more were injured, stretched the resources of the Hospital, and highlighted another deficiency in equipment. There were no facilities for taking X Rays, which would have been extremely useful in treating the types of injuries sustained by passengers on the train. The Tewkesbury Chamber of

Commerce took it upon itself to raise £450 to purchase the X Ray, and backed by an appeal from the Vicar, the people of the town raised much more than the target.

The people of the town and its surrounding parishes were well served by the Hospital, but medical science is constantly moving forward. By 1925. the Hospital was described as being "a dreary and desolate looking place". The demands of new forms of treatment and surgery required the Committee to look at the possibility of adapting the premises to meet these demands. After a thorough investigation, the committee decided that the building could not be adapted and so they looked around for a site to build a modern Hospital. It was not until 1929 that the opportunity arose to buy Orchard House in Barton Road. The property was put up for auction on 15 May 1929 and was sold for £1650 to Mr T Weldon Thomson. acting for the Hospital Committee.

Ambitious plans were prepared to convert the house into a nurse's home and build a new Hospital. But before work could start, a great deal of money would be needed. After purchasing Orchard House the Building Fund only had a balance of £435.

THE HISTORY OF TEWKESBURY COTTAGE HOSPITAL PART TWO 1935-PRESENT DAY

CHAPTER 6 EARLY DAYS IN BARTON ROAD

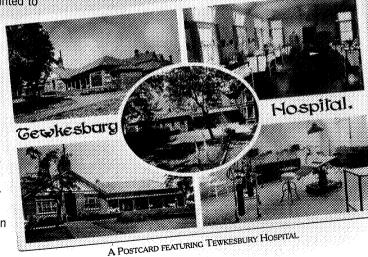
The third hospital to be opened in Tewkesbury had been designed and built to conform to the best practice of those days, and was opened on 20th July 1935 in a heavy rainstorm by the Hon. Mrs Vincent Yorke, wife of the Chairman of the Hospital Board. It had 22 beds but there were no maternity beds, a matter of some considerable discussion at the time. The first matron was Miss Hutton who was helped by a senior nurse, Sister Parry, who married Fred Gyngell, a garage owner at the Cross in the centre of Tewkesbury. Over the next thirty years the hospital became established as an essential part of Tewkesbury life, and a source of great affection for the people of the town and surrounding area. Together with Holm Hospital, the old workhouse on the Gloucester Road that had been adapted as a hospital for the care of the elderly, and the old fever isolation hospital at Tredington, the town could call on nearly 100 beds for the care of the infirm and

elderly from Tewkesbury and the Cheltenham areas.

The hospital was run by a House Committee, for a long time chaired by Mr Vincent Yorke of Forthampton Court. At these meetings the Hospital Secretary came over from Cheltenham with his Treasurer, so establishing a close link with Cheltenham General Hospital. So many patients wanted to

contribute something for their treatment, especially after the establishment of the NHS in 1948, that a Doctor's Equipment Fund was started, but later contributions were given to the League of Friends.

In 1969 the hospital featured in a leading medical magazine 'World Medicine' and was held up as an example of how small units, then still called Cottage Hospitals, were able to cope with many of the routine ailments for about half the cost of treatment in the major hospitals. Townspeople of Tewkesbury used an expression that is as common at the present day as it was then,

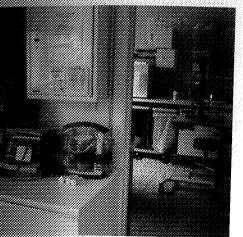


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CHAPTER 7

LIPCRADING AND CONSOLIDATION

in 1976 the casualty department, which was far for small for the work that was generation there 24 hours a day, was anlarged and updated, but in the process the hospital boardroom became the centing area. With the demise of this coun, the regular Friday afternoon meetings or local GPs with the senior surgeon came to an end. These meetings erved as a regular forum at which hospital politics and the national medical some could be discussed over tea and



THE WELL EQUIPPED MIIU

cake. They were probably one reason why the medical community of Tewkesbury worked so well in harmony, while maintaining three, and eventually four separate GP practices in and around the town. The casualty department was dealing with 10,000 patients each year in 1969, and nearly 15,000 a year by 1990. It was equipped for the GP anaesthetists to give general anaesthetics while their colleagues manipulated fractures or lanced abscesses. In 1973, the hospital was equipped with Pye Pocketphone radio telephones, so that the on-call doctor could be contacted if required urgently. The ambulance service started using this system to summon participating doctors to help out at medical emergencies and serious road accidents around Tewkesbury, a service that predated the national BASICS Immediate Care schemes by several vears.

For many years the physiotherapists in Tewkesbury, under the supervision of Miss Billings, covered all three hospitals, and worked from a wooden hut in the grounds of Holm Hospital. Mr Leslie Webber was one of these and was greatly respected for his services to the town. He had been blinded while working for the London Auxiliary Fire Service during



THE PYSIOTHERAPY DEPARTMENT

World War II, had trained at St Dunstan's as a physiotherapist and moved to Tewkesbury. As well as being the senior physiotherapist for many years, supported by his long serving assistant. Mrs Ward, he was also a member of Tewkesbury Borough Council and served as Mayor for two years between 1969 and 1971. The hut was in poor state of repair, and in 1981 a futuristic design for a new department at Tewkesbury Hospital was approved and built next to the outpatient building. It nearly materialised as another temporary structure and positioned in the wrong part of the grounds, until Dr Graham Shephard reminded the authorities that a permanent structure had been proposed, and a site agreed in accordance with a general development plan for Tewkesbury Hospital.

There was just enough room in the grounds of Tewkesbury Hospital running down to Swilgate Road to accommodate a replacement unit for the care of the elderly, but it was within the potential flood area of the Swilgate River. By raising the building above the 1947 flood level, a new block was added to the hospital in 1988 and remained above flood level during the July 2007 floods. The public were asked to suggest names for the new ward and the existing acute ward. The name Avon Ward was chosen for the new unit and the Duchess of Gloucester opened it on 13th October 1988. This block also included a day hospital and accommodation for the Occupational Therapists and social workers. The architect for the physiotherapy department, the new outpatient block and Avon Ward was Mr Richard Sharp, who unfortunately died before the ward was completed, but who is commemorated in a special garden feature created adjacent to the new building. The original acute ward was named Severn Ward.

Tredington Hospital was closed after the patients had been transferred to Avon Ward, and the buildings were sold to a private developer. After prolonged negotiations over the derelict Holm

Hospital, principally over the site of a 19th century cholera burial pit in the grounds, this extensive area was also sold for private development. In recognition of former professionals who had worked there for many years, the whole area became known as Shephard Mead, after Dr Hopper Shephard, a former partner in the Barton

Road practice, and the main building was named Webber House after Mr Leslie Webber, the physiotherapist. At the time of the operating theatre suite redevelopment, a new mortuary had been built, and in 1988 a stained glass window was commissioned for this building, with a contribution of £500 from the League of Friends.

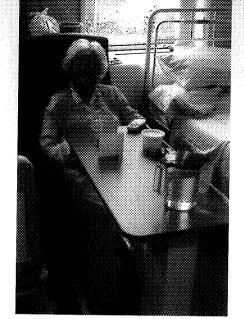


ELMBURY SUITE AND HOSPITAL GARDEN

CHAPTER 8 REORGANISATION

The mid 1990's saw many changes in the NHS. The change that affected the hospital most was the establishment of Family Practitioner Committees, which eventually became Primary Care Trusts (PCT) in April 2002. PCTs were given the task of running Community Hospitals, Tewkesbury Hospital had previously been run by the acute hospital at Cheltenham. The new organisation had no experience of running hospitals. so for two years they contracted the management of Tewkesbury Hospital. along with Winchcombe Hospital, back to what had now become the East Gloucestershire NHS Trust. In 2004 the Cheltenham and Tewkesbury PCT eventually took over full control of the hospitals, and in 2006 the three Gloucestershire PCTs combined to form the Gloucestershire PCT.

General Practitioners had traditionally organised rotas for night time and weekend working within their own practices. In the mid 1990's many GPs were organising co-operatives involving a number of practices to cover out-of-hours emergencies. The Tewkesbury practices decided to join with those at



A HAPPY PATIENT

Staunton and Newent for out-of-hours work, and SALDOC co-operative was formed in September 2000. This was named after the rivers Severn, Avon and Leadon for the Doctors On Call. The duty doctor, drawn from these practices, was based at Tewkesbury Hospital with a night time driver and car, and gave emergency cover for a wide area of North Gloucestershire, as well as for the hospital. A further reorganisation in 2004 removed out-of-hours work from

GP practices altogether, charging PCTs with the task of organising medical cover for the county and the Community Hospitals. This service is still based at Tewkesbury Hospital until 10.30pm each night. In 2006 the Minor Injuries Unit, now renamed the Minor Injuries and Illnesses Unit and officially nurse led, was closed from 8pm until 8am the next morning.

In order to accommodate the revised out-of-hours service, and to take the opportunity to upgrade the X-ray service, a new department was planned. X-rays have been available at Tewkesbury for many years, and prior to 1973 the casualty sister, Margaret Gilson, and Dr Philip Holding took most of the films. When this was reported in another magazine article there was an instant reaction from the Association of Radiographers in London pointing out that this was illegal practice, and Mrs Margaret Davies was recruited as radiographer. The new X-ray department was equipped with the latest digital imaging equipment, and was rehoused in what had been the linen room. The linen store moved to part of the old X-ray room, and the former X-ray office was turned into an office for the out-ofhours doctors and the phlebotomist.

peaceful, but the PCT were left in no doubt about the feelings of the townsfolk for 'their' hospital. Within a few days they rescinded the closure threat on the undertaking that Tewkesbury would expand its role, and take more patients from the Cheltenham area. Tewkesbury Hospital had been looking after Cheltenham patients for many years already! So Severn Ward was saved, and the Day Surgery Unit, which was staffed by nurses from Severn Ward, was also able to continue. The cataract lists, the orthopaedic and general surgical lists could also continue.

The hospital also weathered the onslaught of the worst floods seen in Tewkesbury for many years in July 2007. Avon ward had to be evacuated because of drain problems, and many staff were trapped at work by the mundation for several days.

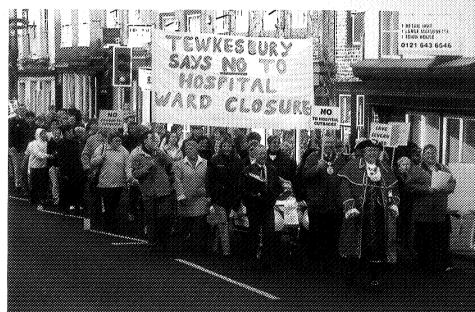
Community hospitals have always drawn on the generosity of their local communities and many people give generously of their time. However, in the present day climate it has become more difficult to volunteer on an occasional and unsupervised basis in a hospital. Many hospitals rely on groups of volunteers to man the reception desk, to

meet and greet patients and visitors and to undertake errands and tasks such as handing out drinks to patients.

handing out drinks to patients. Tewkesbury had never had a formalised group of volunteers, but in 2005 a retired member of staff saw this deficiency and set about organising the intricacies of CRB checks and references for the 60 or so people who were keen

to help. The Tewkesbury volunteers eventually started work in their red tabards in June 2006.

Throughout the past forty years, the townspeople of Tewkesbury have supported 'their' hospital through the League of Friends. Through individual money raising efforts, through donations from town organisations, from the



THE PROTEST MARCH AGAINST WARD CLOSURES

offered it to the PCT. They purchased the site and took the opportunity to build a new hospital in the town.

Despite great affection for the 1935 hospital and its comparatively new extensions, the buildings were inefficient to heat, difficult to maintain, could not be adapted to modern requirements any further and infections were difficult to control. And then there was the flood. At the time Gloucestershire PCT were developing new hospitals at Moreton in Marsh and Dursley, the latter to replace Berkeley Community Hospital, The PCT had ruled that the number of beds for each new community hospital should be sufficient for the population they serve, and should no longer be used as overflow services for other areas. Thus the total bed numbers at Tewkesbury should be reduced from 48 to 20. This caused great concern and several petitions within the town. It so happened that the hospital being built at Dursley was also to have 20 beds, so the basic design for Tewkesbury could be adapted, by adding an operating theatre and a few other modifications, from the Dursley design. This would reduce costs and be acceptable to the planners.

After many complex meetings the plans, which included new ways of providing

services in the town, were approved and submitted to the Borough Council. On 20th December 2011, almost 15 years since the GPs had originally expressed concerns about limited space in their premises, the plans for the hospital were passed. Two months later demolition work started on Greenbank bungalow, and Seddons had been chosen to build the new hospital. Archaeological work had to take place before ground works could commence, and apart from some possible Roman drainage channels there were no memorable findings.



THE NEW HOSPITAL DECEMBER 2012

The building work proceeded rapidly despite a very wet summer, and a cold spring, and by Easter 2013 the

reduction in bed numbers, and reduction in staffing had started as the move to the new premises approached. The move into the new building eventually took place in summer 2013, the fourth hospital in Tewkesbury.

During the building works, the GPs were able to negotiate for the site of the old hospital which was to be knocked down, and plans for a new General Practice complex involving the three practices were submitted with the approval of the PCT, which was wound up in March 2013. The future for Community

Hospitals and for General Practice will have changed in ways that will not affect the basic principle of offering a good community service to the people of Tewkesbury and the surrounding villages.

Let us hope that Tewkesbury Community Hospital

continues to be a leader among Community Hospitals, showing that small hospitals can offer an excellent service close to home.

was staffed by VADs (Voluntary Aid Detachments), as the volunteers were known in 1918 Mrs Devereux was awarded the MBE for her work at the WAD hospital at Mitton, and later the MRF as the Commandant. The 1925 Directory lists Dr Devereux still at North House. Dr Liston living at Hereford House and A G Elder Esq, veterinary surgeon and brother of Matthew, as living in High Street, William Devereux resigned from Tewkesbury Rural Hospital in 1927 having been elected in 1891. according to one source, although elsewhere he is said to have qualified in 1892. He and his wife retired to Cambridge in 1931 and he died in 1935 aged 69.

The Barton Road Surgery

By Turner arrived in Tewkesbury in 1883 as a partner to J H Boughton and was being at Newton House at the Crescent in 1901. His wife was the daughter of Dr Moore of Moreton in Marsh who was one of the very early instigators of Cottage Hospitals in this area at Bourton on the Water. Another of the earliest named practitioners was Dr Liston who worked from Hereford House in High Street. In 1894 there was an inquest on Harold Ramsey of Longdon when death from Chloroform at Tewkesbury Hospital was

recorded, and Drs Wrangham, Allard, Devereux, Turner & Liston were cited in the coroner's report. Dr Arthur Fowell Turner is recorded as living at Newton House, Church Street "working on own account" in 1901. Dr Liston joined Dr Turner in 1905 when they rented 73 Church Street and were working there in 1914. Dr Turner died in 1918 at Hereford House, the home of his partner Dr Liston, after 35 years in practice, Dr Liston and his wife played golf and he was president of the Black Bear Angling Association. In 1919 he was an Honorary Medical Officer at Tewkesbury Rural Hospital along with Dr William Devereux, Dr Norman Devereux and Dr M Elder, In 1922 Dr Liston had an accident on his motorcycle at the Northway Turn and broke his leg which was subsequently amoutated. He worked on until he died in London in 1927 aged 59 when Dr Laurie Smith purchased the practice. Laurie Smith practised in Tewkesbury until November 1933 when he was compelled to retire because of his son's illness.

Laurie Smith was succeeded by Dr Wildman who in turn became seriously ill and sold the practice to Dr Hopper Shephard before he died in June 1934. Hopper Shephard lived at and worked

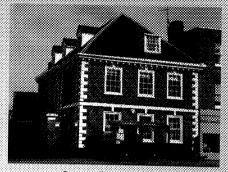
from Hereford House, 79 High Street, was chairman of the cricket club and President of the Philatelic Society in 1947. He was appointed Coroner. supported by a reference from his rival practitioner in town. Dr Holroyd, who added a note to say that he could "now kill with impunity". On being told that he had the job, the chairman handed him Dr Holroyd's note that had been inadvertently added to his references! He continued as Coroner for Tewkesbury until his retirement. Hopper Shephard was joined by his son Graham in 1954 and they both worked from Hereford House for a few years until they bought Watledge House in Barton Road and opened a surgery in the house as Dr. Hopper Shephard was 'winding down' his clinical work, finally retiring in 1966.

Graham Shephard took on an assistant with a view, Dr Glazier, but he did not fit in and decided that his choice between medicine and music was wrong, and he left to pursue his music. Edith Godwin, the wife of the vicar of the Abbey at that time, Rev Cosmo Pouncey, was a doctor as well as a mother of six, and she joined Graham as an assistant. A few years earlier Brian Gray from Bredon had sat in with Graham as a medical student which was an unusual attachment in

The Church Street Practice

Migriber 77 Church Street has been described as having "an early 18th contary front of brick" and in 1851 was ecopied by Ormwell Lloyd, a widower wen 84 and a Gentleman. By the time Mine 1861 census, W H Peacev (40) as a surgeon with his wife Mary 2 daughters and Charles Stevens (33) described as a 'Surgeon's Assistant and boarder' + 3 servants were living at no 77. They were still there at the time of the 1871 census with Thomas White (68) replacing Charles Stevens and described as a 'Surgeon in Midwifery. assistant surgeon and Man Midwife'. William Peacey died 1880, and in 1881 the house was 'uninhabited'. His elder daughter Florence was married in the Abbey in 1887, and by the time of the 1891 census Arthur F Turner (37) a General Medical Practitioner' was living in 77 with his wife Penelope + sister in law Eliza Moore (59) who died in 1892 # Francis Moore, brother in law (13) who was born at Moreton in Marsh + 3 servants. A newspaper report in 1893 mentioned that Dr Allard attended a drowning. The 1901 census lists Joseph HAllard (44) Physician and Surgeon as wing at 77 with his wife Harriet, who was born in Tewkesbury, the second daughter of Dr W H Peacey. Dr Allard

died in 1901 and his wife died in 1944 With major rivers a feature of Tewkesbury life water accidents have been often reported and in 1903 there was a newspaper entry stating that "Dr Elder assisted drowned child with artificial respiration". When Dr Matthew Elder had arrived in Tewkesbury is uncertain but by 1904 he was active on the Town Council and had moved into 77, the fourth General Medical Practitioner to live there in forty years. It was also reported that he lived at 77 until 1931, which was by then identified as 'Levens House', possibly after the town in Fife where Matthew was born. The property was still owned by Harriet Allard and at the 1910 valuation Dr. Matthew Elder (37) General Medical Practitioner was reported to have a 21 year leasehold on Levens House from 1901 at £50 per annum. On the ground floor there was a 'Waiting room, dispensary, surgery. Outside - garage, 2 stalls, 2 loose boxes. Rateable value: £720'. Whether the surgery in the house had been active since 1861 is unknown. In 1910 Dr Elder moved the surgery to 22 Church Street, and his brother the vet was living at 81 High Street. Strangely the many references to 22 Church Street during the inter war years fail to mention it as a surgery. It was occupied by



CHURCH STREET SURGERY

Mr Organ the photographer, and in 1923 by J H Dudley a dairyman; and in 1926 Mr Richard Wallington, an eye specialist, was "holding his final week of consultations" at the house. From 1915 onwards there are many reports of post mortem examinations being undertaken by Dr Elder and reported to coroner's inquests. During the war he was one of the medical officers at the VAD hospital at Mitton and was a magistrate. In 1918 he was appointed Medical Officer of Health for Tewkesbury Council and was busy with many other interests. He was Superintendent for St John's Ambulance. medical officer to the Isolation Hospital at Tredington (Matron Miss Oliver). medical officer at Tewkesbury Hospital (Matron Miss Hutton), surgeon for Tewkesbury to Gloucester Liberal Benefit

trainees for many years, and Dr Wilkinson was the trainer, in 1978 Dr Andy Rigby, a former trainee, joined the partnership. The retirement of Drs Holding and House in 1982 saw the appointment of Dr Elspeth Dunlop and Dr Michael Mulrenan, and in 1986 when Dr Wilkinson retired. Dr Robert Davis was appointed and joined Dr Lewis as a trainer. In 1996 Dr Dunlop wanted to work part time and Dr Janice Knott-Craig was appointed as her job-share colleague. The nature of General Practice was changing. Dr Lewis retired in 2000 to be replaced by Dr Saniay Shyamapant and Dr Crowther retired in 2005 when Dr Andy Wales, who had been a student. a trainee and an assistant with the practice, was appointed. Since then Dr Felicity Connolly and Dr Peter Amess loined as various partners reduced their hours, and when Dr Connelly left in 2011, Dr Nicola McCoillum joined the practice. Drs Sarah Roy and Joanne Johnson had been registrars and returned as assistants. Dr Mulrenan retired in 2013.

Reorganisation of the Practices

In the mid 1990s, re-organisation of the NHS services led to a co-operative venture to cover the out of hours needs of the area. The three practices in Tewkesbury joined with the Bredon Hill

practice and those in Staunton and Newent to form SALDOC (the Severn. Avon and Leadon Doctors on Call. service) based on Tewkesbury Hospital at night with a professional driver for home visits over a wide area of North Gloucestershire. This came to an end with yet another re-organisation in 2002 when out of hours services were removed from General Practices and organised by the PCT (Primary Care Trust). With the opening of the fourth Tewkesbury Hospital in 2013 the site of the old (1935) hospital became vacant and was purchased by the GPs from the three practices in the town. A new building on this site will accommodate all three practices but each group will retain their individual identity so that patients will still have the choice between the practices.

Bredon Hill Surgery

Although Tewkesbury is a Gloucestershire town it sits on the border with Worcestershire. During the 1950s two lady doctors, Joyce West and Margaret Wilkinson, ran a surgery at Kemerton (in Worcestershire) which was taken over by Dr Barrie Stringfellow in 1968. County boundaries did not matter so much in those days, and Dr Stringfellow was able to admit his patients to Tewkesbury

Hospital where he could look after them. even if they were registered in Worcestershire. The Kemerton surgery was therefore considered to be part of the Tewkesbury medical circle. The wooden surgery building was in the grounds of one doctor's house, the other living next door, and Dr Stringfellow bought the house with the surgery where he practiced single handed. He also rana branch surgery in Beckford from the front room of a private house, but the pressure of this constant availability to the practice and hospital soon told on his health. The introduction of radio telephone contact with the hospital in 1972 helped considerably. The branch surgery at Beckford closed in the mid 1970's.

In 1979 Dr Stringfellow negotiated to share out of hours work with the Barton Road Practice, which gave him some free time and shortly afterwards he appointed Dr Kevan Ashbridge as a partner. The Kemerton practice covered a wide rural area to the south of Bredon Hill and into Tewkesbury, and they dispensed from the surgery. They had one member of staff, Shirley Jones, who was receptionist, typist and dispenser all rolled into one. Morning surgeries were held without appointments, and the line of patients.

R has been an honour to work on this stand-new community hospital.
It completed work on the new Vale annuality Hospital in Dursley on time and on budget in 2011, and it has been enticularly satisfying to use our experience in healthcare construction to said this new facility in Tewkesbury. The new hospital will bring about major improvements for people in the area, providing state-of-the-art local healthcare services."

Jonathan Seddon Managing Director Seddon Construction Ltd

Seddon

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