Provision of medical care

Introduction

In terms of availability of medical and nursing care, Chinnor appeared to have been well served; help being provided historically and traditionally by a wide range of practitioners. This was actually a mixture of: lay intervention, community support, midwives with varying degrees of competence, and general practitioners who, although provided a caring and personal service to the residents, still charged a fee to the uninsured. In addition, fees were needed for nursing and midwifery services, and it was cost which informed the level of service available.

In 1911 Chinnor benefited from the development of the welfare state from the 1911 *National Insurance Act,* which provided for basic income during illness culminating with the *National Health Service Act, 1947.* The 1911 Act went some way towards alleviating the burden of medical costs and unemployment, but it would be another 40 years before these were addressed fully. During the intervening 40 years before the 1947 *National Health Act,* established community medical practices continued.

Early practitioners servicing Chinnor

The first recorded instance of medical help was in the hamlet of Crowell, one mile south of Chinnor within the parochial parish, where the inhabitants were served by Richard Fellowes, (spelt Fellers) Professor of Physick at Oxford University who grew and collected his medicinal herbs in Crowell Wood and died in either 1704 or 1716. In 1801, the death of Benjamin Copeland (1759-1800), described as an 'apothecary of Chinnor', was reported in the *Oxford Journal*. He had apparently died in December 1800 in straightened circumstances having contracted a fever whilst administering to the poor of the Parish. An appeal was launched for funds to support his family of six children, who had no mother and were now destitute, to prevent them going into the workhouse.

TO THE CHARITABLE AND HUMANE A CASE OF REAL DISTRESS IS HUMBLY SUBMITTED.

THE late BENJAMIN COPELAND, an Apothecary at Chinnor, having caught a Fever by his unremitted Attention to fome poor People in the Neighbourhood, which occalioned his Death, has left Six fmall Children WHOLLY DESTITUTE, their Mother being alfo dead, and having no Relations in Circumftances fufficient to maintain fo large a Family -

The Minister of the Parish requests the Affistance of the Benevolent, to enable him to provide them with prefent Necessaries, and to place them in fuch a Situation in future as to prevent them from being fent to a Workhouse.

The fmaileft Donations will be thankfully received at each of the Banks in Oxford; at Mr. Cooke's, and at Meffrs. HANWELL and PARKER's, Bookfeilers. In the parish records Copeland is designated, Mr. a title which does not occur on any other records. No occupation was recorded beside Copeland's entry but this title suggests that he would have been a surgeon-apothecary, a fusion of the roles of all branches of medicine which was common in the country. Local records and newspapers did not yield any further records of an apothecary attending in Chinnor, only one advertisement for an apothecary in Thame who appeared to have treated some Chinnor residents successfully.¹

Also from Thame was Henry Lupton, a physician, who visited Chinnor regularly, conveyed variously by horseback, landau, or bus, and who always commented in his diary on the prevailing weather conditions. Another early reference to medical help occurs in the 1851 Watlington Petty Sessions, when a Thomas Walton (1792-1867) was named in a civil case and referred to as a 'herb doctor of Chinnor'.² In 1857, John Heeley of Chinnor, described as a surgeon, was fined for shooting five pigeons. No record of him has been located in either the 1851 or 1861 census. Later, the Reverend Howman, Rector of Chinnor Parish from 1875, who was by all accounts a great and kind benefactor to the village, and who, in addition to providing food and blankets to the poor of the Parish, also mixed his own simple medicines himself.³ This was not an unusual role for a rural clergyman. The social historian Pamela Horn records that in Oxfordshire during the 1870s there were at least three instances of clergymen qualifying and practising as doctors.

The Rectors of Chinnor included in their parish duties the support of the 'poor and needy'. The *Rectors' Record of Services, 1902* included the amount of the offertory and how it was to be disbursed, most frequently it being allocated to the sick, poor and needy. For example, the Parochial statistics of the 1st January to the 31st of December 1934 divided the disbursements into a number of groups such as the sick and poor of the parish who were allocated £11 19s. 4^{1/2d},' whilst hospitals (unspecified) were to receive a donation of £3 15s. 8d. Five years later, the records show that the sick and poor of the parish received donations totaling £27 18s. 9d, the hospitals, £9 7s. and the Nursing Association, £5. The following year in 1940, the grants were reduced in amount; for example, the sick and poor of the parish £26 18s. 5d., hospitals, £4 18s. and the Nursing Associations £2.

The rise of General Practice

With reference to general practice in Chinnor, the village enjoyed good medical coverage. Unfortunately, there were some gaps in the archive collection of *Kelly's Directory* for Oxfordshire, but working on the evidence available there was no record in the 1903 *Kelly's Directory* of any visiting doctors, see Dr. Lupton above. However, by 1907 the village was served by two visiting doctors, Dr. Matthews from Princes Risborough who attended on Wednesday and Saturday, and Dr. Bell on Tuesday 1-2 pm. Both doctors set up temporary surgeries in a resident's front room. In 1911 there were three sets of doctors visiting Chinnor, Drs Hawkesworth and King-Edwards attended on Monday and Friday 12 to 1 pm. Drs Lee and Summerhayes attended on

Tuesday and Fridays, and Drs Watson and Richards attended on Tuesday and Friday 12-1 pm. All medical officers were designated as physicians and surgeons and would have undertaken surgical procedures in the local hospitals. In addition, Dr Summerhayes had taken over from Dr. Edsell of Thame as public vaccinator and medical officer to the workhouse and factory surgeon. This compares with provision in similar size villages in South Oxfordshire. For example, taking 1935 as a midpoint, Chalgrove had no resident or visiting doctor, Benson had one resident doctor and one district nurse/midwife. In 1920 Benson had two resident doctors, Garsington, had one resident doctor listed under private resident (so possibly retired), Marston had no record of a resident or visiting doctor.

By the outbreak of the First World War Chinnor was attended by two doctors, Dr. Bell and Dr. Matthews, who was 38 in 1914, and is noted on the Army List as a temporary captain. No record could be found for Dr. Bell who was also eligible for call up as he was under the age of 41. In spite of the heavy demand for doctors in the army during the war, Chinnor still had some medical cover. In 1915, Drs. Hawkesworth and King-Edwards were still attending on Mondays and Fridays, 12-1 pm, Drs. Lee and Summerhayes on Tuesdays and Fridays as well as Drs. Watson and Cooper on Tuesdays and Fridays 12-1 pm. However, there are clear gaps in provision. One of the consequences of doctors being called up to the Royal Army Medical Corps was that medical care became fragmented amongst the civilian population. For example, by 1918 it was reported in *The Times* that many people were unable to obtain medical care due to the shortage of doctors.

No account of the medical provision in Chinnor would be complete without the history of Dr. Dorothy Leverkus, her memoirs offered an informative snapshot of the times. Dr. Leverkus trained at the London School of Medicine for Women qualifying, M.B., B.S. in 1923 and M.D, in obstetrics in 1927 and came to the village in 1928 to set up a single- handed practice and became Chinnor's first resident doctor. In her memoirs, she recalled that she was given a warm welcome by the Parish, 'the village being pleased to see her even if she was a woman'. She recalled that many babies were born with just the help of the handy woman, Mrs Munday, who was also the 'layer outer in chief' Home births which were common at the time, involved several risks and Dr. Leverkus recalled using brandy to revive babies. On one occasion she had to take the mother to the cottage hospital in Thame and, since her own car was a two-seater, she roused the owner of the garage opposite her house at one am for the trip as he had a four-seater car. The baby was born in the car on the way to hospital.

In 1930, she moved into a large house called Hempton Field and took convalescent patients into her own home. Hempton Field is still in use today as a nursing home. In common with many panel doctors of the time she augmented her salary by taking outside appointments, in her case, as an anaesthetist at Watlington and Thame hospitals. She also started the infant welfare clinics in Chinnor through the Women's Institute of which she became President. In her obituary in the *British Medical Journal,* her colleague Dr. Reedy suggested that because of her qualifications in obstetrics and her 'particular interest in midwifery her assistance and advice was frequently sought in difficult cases by her colleagues for many miles around'. He reported that 'She carried out regular scrupulous ante natal care to a standard that must have been very rare in the days before the Second World War'.

The war led to other potential sources of medical help or information which can be identified from the *Absent Voters List 1918*, which lists two Chinnor residents as serving in the RAMC. These residents were John Capel and Thomas Trendall, neither of whom appear on the Chinnor war memorial. However there is a record of a burial for Thomas Trendall aged 87 in 1968. Although it is impossible to record whether their medical knowledge gained in the service was ever called upon. Mr. W. Brazell, who was a general merchant, listed in *Kelly's Directory* during the 1930s, sold patented medicines, and *Kelly's Directory* also listed a Mr Ball, MPS as a chemist in 1928 and 1931 although, in general, the local doctors made up their own prescriptions.⁴ John Neighbour recalled a shop in Station Road run by Miss Hicks in the 1930s and 1940s which sold sweets and drinks on one side, and over-the-counter medicines and her own medications consisting of bottles of pink liquid, on the other

After the war the Cross Keys NHS practice started up in Chinnor and consisted of Drs Cooper and Edwards later to be joined by Dr Fordham. In spite of the importance of the NHS, following a talk on the Beverage Report in March 1943 no mention is made of it in either the WI nor the Parish Council committee minutes however, copy in the Thame Gazette of March 16th 1948 gave information about the provisions under the new National Insurance Act and in July announced that all the local doctors had joined the newly formed National Health Service.⁵ In June of the same year the paper carried a notice from the Oxford County and City Executive Council urging any medical practitioners who had not yet registered and who wanted to be included on the Executive Councils Medical List to apply and give details of the arrangements. A similar notice was published addressed to registered pharmacists who wished to provide their services in the new Health Service should apply to be included in the Executive Council's Pharmaceutical List. A report of the meeting on 6th July regarding Thame Victoria Hospital's change over from being a voluntary hospital to the new Ministry of Health the Oxford and District Hospital Management Committee stated that representatives on the new management committee should include members from Chinnor, Long Crendon and Haddenham