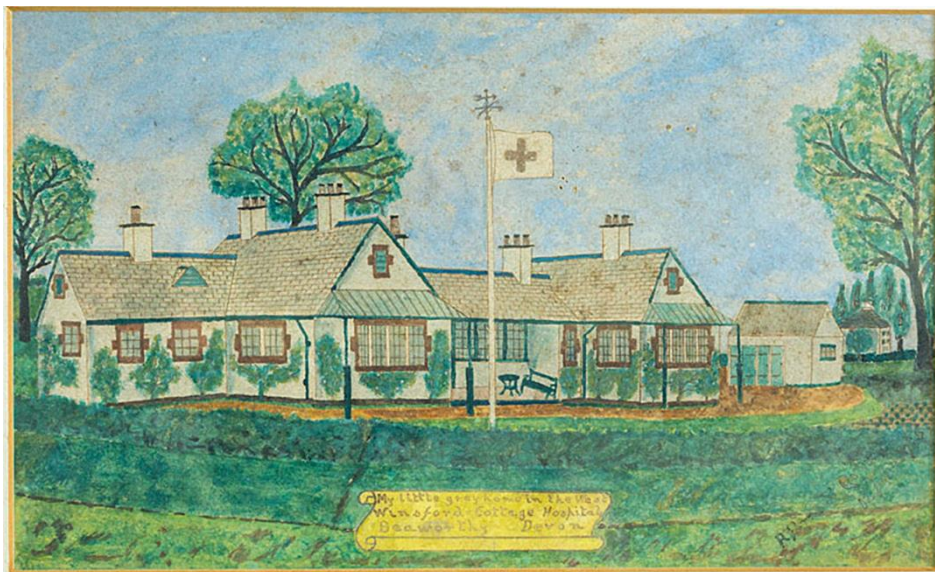


The Landmark Trust

WINSFORD COTTAGE HOSPITAL History Album



My Little Grey Home in the West - Rifleman John Gilmour, patient, 1915.

Written by
Caroline Stanford
October 2019

The Landmark Trust Shottesbrooke Maidenhead Berkshire SL6 3SW
Charity registered in England & Wales 243312 and Scotland SC039205

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BASIC DETAILS

Built:	1900-1
Listed:	Grade II*
Architect:	C. F. A. Voysey
Opened as a Landmark:	October 2019
Tenure:	Freehold
Restoration architect:	Benjamin & Beauchamp of Wedmore, Somerset (John Beauchamp, Sophie Ledgard, Michael Vaughan)
Quantity Surveyor & Project Manager:	Adrian Stenning
Restoration Contractors:	J. E. Stacey & Co of Holsworthy, Devon
Conservation consultant (floor):	Lynne Humphries of Humphries & Jones of Crewkerne
Paint analysis:	Lisa Oestreicher Architectural Paint Research of Bath

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National Lottery players, through the National Lottery Heritage Fund



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Dr & Mrs R Jurd supported the provision of the Landmark books.

We thank all who have supported the appeal, including other Guardians, Patrons and trusts who have chosen to remain anonymous.

We also thank our volunteers on this project:

Wenderlynn & Iain Bagnall, John & Belinda Canning, David Clark, Jackie Clift, John Copping, Alana Devereux, Amos Donohue, Paul & Elizabeth Gomme, Valerie Goodwin, Katherine Hoare, Tony Hough, Sue Isaac, Susanna & Alastair Jacks, Bob Mark, Michael Nelson, Christopher Pancheri, Maggie Robshaw, Lindsey Shaw, Lesley Strong, Meg Galley-Taylor, Nigel Timms, Mick & Maggie Walthow, Sandra Ward, Kevin & Val Waterfall, Sally Wilkinson.



Maria 'Molly' Medley (1848-1919), who founded Winsford Cottage Hospital in memory of her husband George, and (below) as a younger woman.



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Acknowledgements

This album has profited especially from the knowledge and prior research of Jo Cox of Keystone Historic Buildings Consultants, Wendy Hitchmough, who gave the 2017 Landmark Lecture on Voysey, Dr Ray Ward and the Winsford Trust, Nigel Webb, relative of the Medleys, and his wife Caroline.



Front and rear elevations of Winsford Cottage Hospital after restoration in summer 2019, landscaping still in train.



Summary

Winsford Cottage Hospital, listed Grade II*, was designed by the influential architect and designer, C. F. A. Voysey (1857-1941). Voysey designed many houses for his private clients, but Winsford is his only hospital, and its style is entirely representative of his distinctive approach. A century before the National Health Service was created in 1948, the prospects for the sick or elderly in rural areas were bleak. Doctors' fees were high and the few general hospitals were large and often unsanitary places in distant cities. For want of proper care, many ordinary people died at home from entirely treatable conditions. Hospitals and workhouses were often combined in the same impersonal large institution, providing treatment for the sick alongside shelter for the poor and needy.

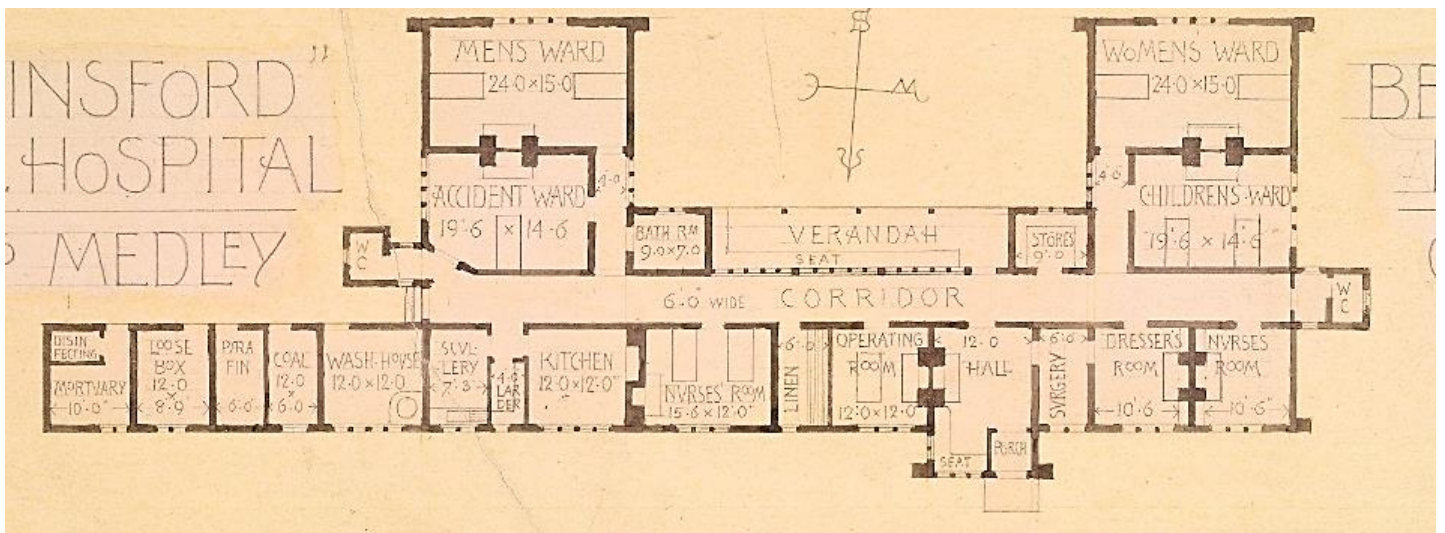
Representing a more humane approach, the advent of cottage hospitals from the 1860s transformed the lives of hundreds of thousands of people, providing clean and homely settings for care close to home. The first cottage hospital was in Cranleigh, Surrey, founded in 1859 by a GP called Albert Napper. Cranleigh featured in detail in *Cottage Hospitals, General, Fever and Convalescent: Their Progress, Management and Work*, a popular book by Henry C. Burdett. It became fashionable for wealthy philanthropists to build and endow such establishments on their own estates. The Halwill Junction cottage hospital, built 1899-1900, was quite a late example.

Winsford Cottage Hospital was named after Winsford Tower, the estate of its benefactress, Maria Medley. Winsford Tower was an undistinguished late-Victorian pile, developed in the 1880s by George and Maria Medley, close to the railway that arrived in 1879. The Medleys were a wealthy London couple: George had made his money on the Stock Exchange, much of it from railway shares. When George died in 1898, Maria (known to all as Molly) built this cottage hospital in his memory, to serve twelve parishes in this remote part of North Devon. Until then, locals had to travel to Okehampton or even Exeter for medical treatment, or stay at home. Rural living conditions as recorded in 1880 by the local medical officer, Dr. Thomas Linnington Ash, were dreadful. He found many dwellings 'literally hovels of mud.' At the Winsford hospital, they could receive medical treatment closer to home for the first time.

The Winsford hospital reflects, on a modest scale, all the characteristic features of the private houses Voysey built for his wealthy clients. It feels like a house rather than a medical institution in scale and design detail, low and horseshoe-shaped. The long ribbon of simple stone mullioned windows gives a strong horizontal emphasis; its sweeping Delabole slate roof with rendered chimney stacks and prominent eaves give a sense of warmth and welcoming shelter. Inside and out, white walls are accented by woodwork painted a dark green. Voysey liked to design every detail of his houses, and this was also true for Winsford Hospital.



Voysey's presentation drawings of the hospital for his client Maria Medley in 1899. The disposition of the rooms evolved slightly in the final construction. Note too the west end as built, which was extended by 1910. (RIBA 81042)



His fireplaces (with his signature elongated hearts) and doors and window latches have survived decades of NHS use, as has the mosaic floor of golden limestone tiles, running up to form a skirting for ease of cleaning. The hospital's single storey floorplan reflects the needs of the patients. The wards face south towards the views and the sun; treatment and consulting rooms lead off a central corridor. In scale, the hospital could easily be mistaken for a middling-sized house rather than a medical institution, and Voysey's plans show only seven beds in the four wards, very small even by cottage hospital standards. By 1906 this had risen to nine beds, and by the time the hospital closed in 1998, to fifteen. Men and women were cared for in different wings and the washhouse, mortuary and fuel store were placed beyond the main hospital range, all as recommended by Henry Burdett.

Visitors from across England flocked to see the hospital when it opened, and the Visitors' Book records their reactions. One wrote 'If I am to be ill, please may I be brought here'. Many said how much they would like to live here permanently.

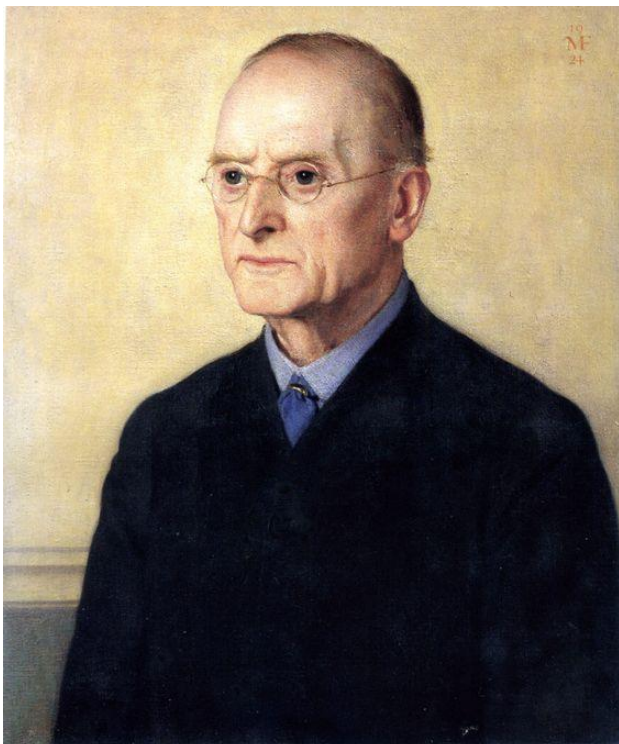
When war came in 1914, Winsford tended the sick and wounded from the Front. They convalesced sitting peacefully on the sunny, south facing veranda, looking out across a rose garden to the rolling Devon countryside beyond. When peace resumed, the hospital returned to serving the community and a charitable trust was set up in the 1920s. After the NHS was founded in 1948, Winsford Cottage Hospital was absorbed too, primarily as a maternity and geriatric unit. It remained in use as a hospital until 1998, when the local health authority prioritised Holsworthy Community Hospital and put Winsford up for sale, to the distress of local residents. A League of Friends was formed and managed to raise the deposit and then the purchase price and the Winsford Trust founded to keep the building in community use. Despite their best efforts, the struggle to cover their running costs proved too great and in 2012, they turned to the Landmark Trust for help.

Voysey's original design survived surprisingly unaltered but serious maintenance was long overdue. With a generous grant from the National Lottery Heritage Fund's Heritage Enterprise scheme, Landmark has restored Winsford Cottage Hospital, creating a holiday let for six people at the west end of the building. The east end is reserved for community use, providing an information room about Voysey, and a meeting room and a treatment room for hire by ancillary health practitioners. The building has been re-roofed and a great deal of render and internal plaster have been replaced. During the NHS years, the golden mosaic floor that runs the length of the hospital had been covered by fitted carpet laid on a hard screed, and all this has been painstakingly chipped away by a loyal band of volunteers. Many of Voysey's original fixtures and fittings remain, and we have reinstated them where they were missing, to present the building's fabric more or less as it was at the outbreak of the Great War.

From now on, maintenance costs will be chiefly met by the hundreds of Landmarkers who stay in the building each year, as Winsford Cottage Hospital continues to play a part in the life of the local community, just as Molly Medley originally wished.



Charles Francis Annesley Voysey (1857-1941). RIBA



Portrait of Voysey by Meredith Frampton. He wears his signature starched blue collar. (Art

C. F. A. Voysey: architect of Winsford Cottage Hospital

Winsford Cottage Hospital was designed and built in 1899 by Charles Francis Annesley Voysey, one of the greatest Arts & Crafts architects and designers. He was born in Hessle, near Hull, in 1857, and died aged 84 in 1941. His long life saw great change in architecture, design and production, from Gothic Revival to Modernism. Voysey was literally and temperamentally a man of the 19th century, with a firm sense of his own destiny. He believed in symbolism rather than slavish naturalism in his design, and in history and heritage as contributors to the individual character of a place or a person. Voysey rejected the Modernist label given to him by others, yet the clean and personalised lines of his buildings had significant influence on Modernist architects between the Wars. His work is permeated by a 19th-century innocence and optimism even as the horror of the Great War took hold. In *Individuality* (1915), Voysey set out his personal creed: 'let us assume there is a beneficent and controlling power... perfectly good and perfectly loving and that our existence here is for the purpose of growing individual character'. There is something in his architecture that reflects this perception of general beneficence.

Voysey cultivated his own personal style with the same consistency that he designed his buildings, designing his own clothes and always wearing an immaculately starched, bright blue collar. According to his niece's husband, the Hollywood actor Robert Donat (star of *The 39 Steps* and many other popular films of the day), Voysey had 'a rooted objection' to any clothing design feature that could harbour dust or dirt, like lapels or turn-ups. We will meet the same phobia of dirt in his design of Winsford Cottage Hospital, entirely appropriately in the case of a hospital.

In 1885 Voysey married Mary Evans and they had four children together, but his wife's later letters reveal a husband mostly elsewhere and providing scant funds for the household. There was perhaps an intensity to Voysey that some found off-putting, and it is interesting that from his peak in the 1890s and early 1900s, his last successful house was built in 1911. He had lost most of his clients by the time the Great War came, and his later career depended upon his designs for interiors rather than the architecture of buildings.

Voysey was born the third child and eldest son among the twelve children of the Reverend Charles Voysey (1828-1912) and his wife Frances Edlin. The Reverend Charles Voysey was a remarkable and controversial figure and plays his own part in the tale of Winsford Cottage Hospital. He was an Anglican clergyman, proud to claim descent from John Wesley, and independent and unorthodox in his thinking.



The Reverend Charles Voysey, and as caricatured in *Vanity Fair*, 21 October 1871.

The Reverend Voysey insisted that God's purposes were good and that belief was a matter of reason. He publically challenged the orthodox interpretation of the Bible, Christ's divinity and miracles, and denied the doctrine of eternal damnation. His trial for heresy in 1871 was a national cause célèbre, leading to his expulsion from the Church of England and the loss of his living.

The case made national headlines, reported as an exemplary case of a progressive cleric refusing to preach the official doctrine of hellfire and damnation. As Wendy Hitchmough, Voysey's biographer, points out, Voysey retained an affection for wicked devils for the rest of his life and those in one of his early wallpaper designs bear a certain resemblance to his father's profile.

Nevertheless, for an adolescent boy, the humiliation of the family being cast out of their vicarage was great. The young Voysey was traumatised by the scandal and yet always admired his father. For all the scandal of his heterodoxy, Reverend Voysey's gentler and still broadly Christian teachings found many sympathisers, and he founded a Theistic Church that was based at a former French Protestant church on Swallow Street, behind the Royal Academy in London. His supporters ranged from John Ruskin to Charles Darwin. Voysey remained close to his father, and retained a theistic faith throughout his life. He saw his architectural philosophy as an extension of his father's teaching, uncompromising clarity married with reforming simplicity.

Voysey had been privately educated until the move south, but was now sent to Dulwich College. He survived there just 18 months and was never a great scholar. A fortnight before his 17th birthday, Voysey joined the office of John Pollard Seddon with whom he did his articles to become an architect over the next five years. He later claimed he chose to become an architect because it was the only profession for which no exams were needed (although in fact his grandfather and namesake, Annesley Voysey, had also been an architect).



High Victoriana: Ettington Park Hotel, Warwickshire (1858-62).



The Battle of the Styles was waged throughout the 19th century.

Examples of houses by George Devey, in whose office Voysey worked when newly qualified. Above: Post Office, Penshurst (1850). Below: The Mere, Slough (1887).

Seddon was a successful architect, a leading proponent of modernised Gothic for the scientific, industrialised, age. To be a pupil of Seddon's was a fair start for a young architect of indifferent education.

After taking his articles in 1879, Voysey moved on to spend a few months working for architect Henry Saxon Snell, before taking up a position in George Devey's office. Devey, who was a keen member of Reverend Voysey's Theistic Church, worked mostly on country houses for liberal grandees and was famous for his attention to detail, a trait with which Voysey found himself entirely in sympathy. Voysey must have realised that there was not only a living to be made in this field, but also the extent to which the creation of homes for people to live in chimed satisfyingly with his own careful but idiosyncratic synthesis of what made for a homely home. Devey did a lot of work building and renovating estate workers' cottages for great landowners, which gave Voysey plenty of experience in, and scope for reflection upon, what made a building feel homely.

In 1881, Voysey set up his own practice in London, although commissions did not flow in his early years. He initially earned his living from textile and wallpaper designs under the guidance of his friend, Arthur Heygate Mackmurdo who taught him how to put a pattern into a repeat. In 1896, *The Studio* magazine claimed that Voysey's name was to wallpaper what Wellington's was to the boot.

Voysey's first commission for a house did not come until 1888. The Voysey mythology has it that the client Michael Lakin spotted a speculative design for a cottage by Voysey in *The Architect* and this led to a commission for The Cottage in Bishops Itchington, Warwickshire. However, Lakin, a cement manufacturer, also attended the Reverend Voysey's church, to which he made a sizeable donation. Lakin also perhaps had a professional interest in encouraging Voysey's plain white, roughcast surfaces: a cement-rendered, 9-inch wall was

the cheapest way to build a watertight house, and The Cottage also featured cement roof tiles.



74 *Voysey. Cottage, Bishop's Itchington, Warwickshire (1888)*



Top: Voysey's first house.

Below: Another early example, 14 South Parade, Bedford Park, London (1891). His distinctive approach to both line and materials is already apparent.

By the early 1890s, Voysey had developed his own, highly distinctive style of architectural design. His individuality as an architect was based on an interpretation of the modern country cottage, and his practice flourished in a time of economic flux that was challenging the viability of the great country estates. Landowners found it more profitable to sell off parcels of land at the fringes of their estates to the increasingly affluent middle classes who, thanks to the railway, could now aspire to a modest country retreat themselves, whether at a daily commutable distance or as a weekend bolthole.

Voysey was adept at self-publicising, and published most of his plans in one or other of the architectural journals of the time. Through print, their simple distinctiveness was quickly picked up at home and abroad. In 1891, *The Studio* enthused about his 'exquisite sense of proportion, and the reticent use of even purely architectural features in the elevations.....It is rare to find personality revealed by simplicity ... Mr Voysey has no superfluous stroke, no affected detail, and yet his individuality stands clearly revealed.'

By contrast, Voysey himself later claimed arch-Victorians William Burges, G. F. Bodley and Mackmurdo as his influences. He admired John Ruskin but he was not involved with William Morris and the foundation of the Society for the Protection of Ancient Buildings. He did once go into the Morris & Co. shop on Oxford Street, but never returned, saying in later life that he was so impressed by Morris's work that he feared his own would become mere copies if he ever went back. Although he recognised that his own career would not have flourished in the same way had Morris and Philip Webb not realigned late-Victorian taste, Voysey had little in common with Morris and Webb, both atheists and socialists. Voysey, by contrast, was an arch Tory – although he was firm friends with C. R. Ashbee.

Voysey's milieu was rather The Art Workers' Guild, to which he was elected a Brother in 1884, the year it was founded, when he was just 27. He remained an

enthusiastic supporter for the rest of his life, and served as its Master in 1924. He is even said to have designed the red robe still worn by the Master today. The Guild's key tenet, that Art is Unity, could just as well be applied to Voysey's own prolific and multi-disciplinary career.

Still thriving today, the Guild was also founded in response to the challenge thrown down by men like Pugin, Ruskin and Morris to the state of art, architecture and indeed society in an industrial age. Men and women seemed separated from the products of their own hands, and both art and human existence were the poorer for it. Voysey himself subscribed absolutely to the Arts & Crafts movement's emphasis on the revival of traditional handicrafts, and on improvement in the design of ordinary domestic objects to create a better living environment in an industrial age. However, Voysey did not share William Morris and C R Ashbee's belief that such championing of craft skills and of good, simple design, necessitated a return to a simpler way of life where all men and women were equal. Voysey himself sought to shore up, rather than reinvent, the social order, and almost all his architectural designs were for private homes for the upper middle class. This social conservatism makes the endearing intimacy of his work at Winsford Cottage Hospital all the more intriguing.

The inclusion of Voysey's work in German architect Hermann Muthesius's books, especially *The English House* (1904), ensured his fame beyond Britain, as the philosophy of the Arts & Crafts movement found resonance in other countries too. Voysey is also cited as an influence on the Bauhaus movement, which revolutionised architecture and design in Germany in the 1920s and 30s. In the Art Workers' Guild's rooms in Queen Square, Holborn, the by now elderly Voysey conversed with youthful proselytes like John Betjeman and Nikolaus Pevsner. A prolific architectural historian and commentator, Pevsner similarly claimed Voysey for Modernism in his book, *Pioneers of Modern Design From William Morris to Walter Gropius* (1936). While we must remember that Voysey

rejected any such label himself, there is no doubt that his work had a strong influence on many of the Modernists.

Pevsner's analysis of Voysey's contribution to British architecture perceptively captures the freshness it represented. It was 'Not that [Voysey] aimed at novelty; his modifications and progressiveness, it would seem, were almost unconscious. Doctrines and hard and fast rules were not his way. In the controversy between supporters of naturalistic and stylised ornament, he did not take sides.' Voysey admitted plants and beasts in his designs only on condition they be reduced to 'mere symbols', and Pevsner identified 'an unmistakable kindness in his stylized trees and affectionately portrayed birds and beasts.' His patterns were happily near to nature, and at the same time full of decorative charm, 'a decisive step away from 19th-century Historicism into a new world of light and youth.'¹ As commissions for country houses flowed in, Voysey's appreciation of English traditions only strengthened. The 'candour and simplicity' in his designs, 'has become too much of a standard ineptly imitated by hundreds of speculative builders along all the arterial roads and all over the suburbs.'²

¹ Nikolaus Pevsner, *Pioneers of Modern Design from William Morris to Walter Gropius* (1936, 1991 Penguin edition), pp. 148-50.

² *Ibid*, p. 156.



**Further examples of houses by Voysey:
Moorcrag,
Windermere (1898-
1900); Holly Mount,
Penn (1907);
Perrycroft, Malvern
(1902)**



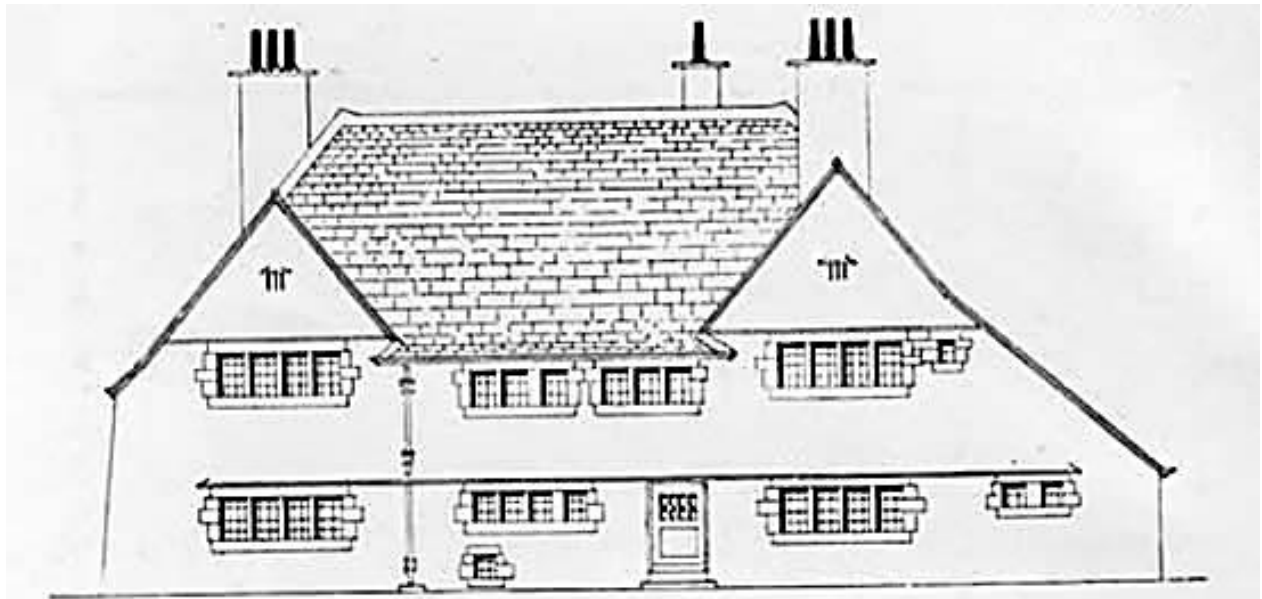
Between 1890 and 1904, Voysey's practice flourished, building almost exclusively country houses, apart from an extension to Sanderson's factory in Chiswick (1902, now offices and apartments) and Winsford Cottage Hospital. He did most of the work himself, relying only on pupils rather than partners for support, although at Winsford he employed a local project architect.

Voysey had very clear ideas on how his houses should be lived in, and stuck to them rigidly. His principles in this respect apply just as much to Winsford Cottage Hospital, which was, by its cottage definition, intended to subscribe just as much as any country house to Voysey's idea of what 'home' should feel like.

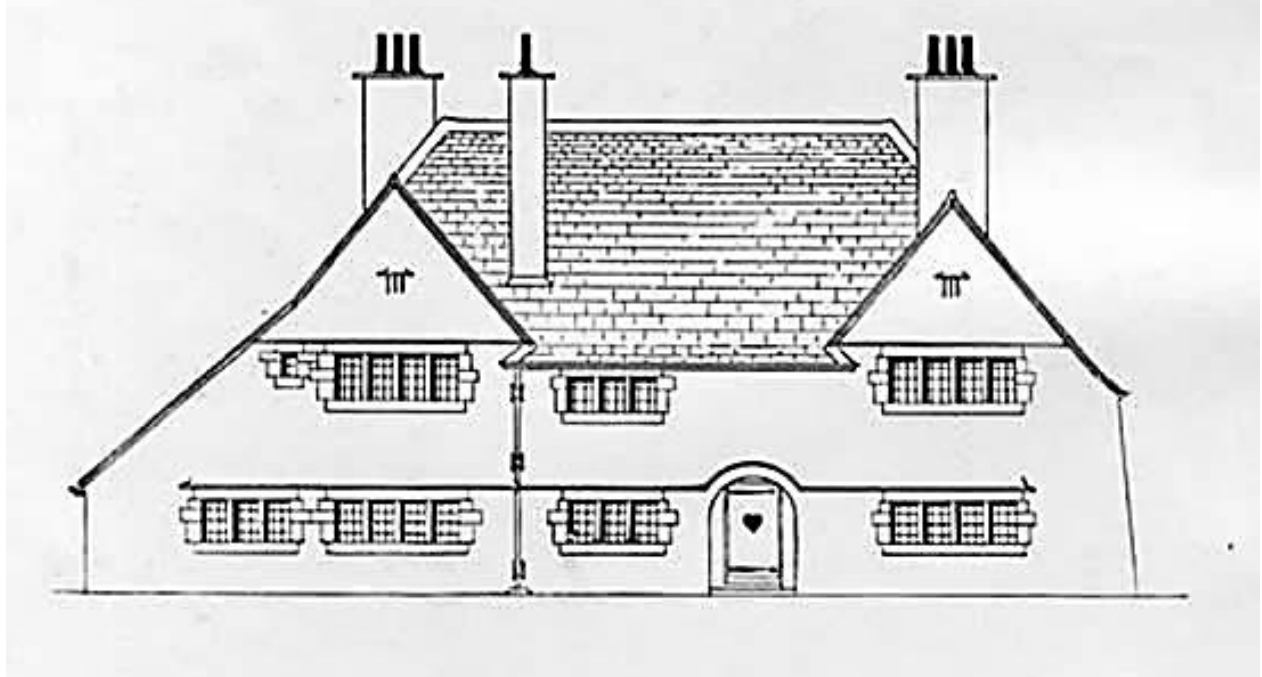
The hall, for example, 'should receive its guests with composure and dignity, but still with brightness, open arms, and warmth'. In a reaction against late-Victorian clutter, it was not to be 'dotted all over with bazaar and museum articles, and tables and chairs that repel you.'

Voysey liked to design every item in a house, furniture and wallpaper included, right down to hinges, door latches, furniture, clocks, and even coffee spoons.

By the time he built his own house, The Orchard in Chorleywood (1899, the same year that he received the commission for Winsford Cottage Hospital), Voysey was a household name. His buildings all share the same features: a steeply pitched roof, hunkering down to blend the building with its landscape; angled buttresses to express shelter; strong, horizontal accents intended to induce a sense of calm and repose, and of reassurance that every detail has been considered. Everywhere is order and reason, the client regarded, in Voysey's words, 'as a precious thing, to be protected from all violent intrusion' – and no less patients in the case of Winsford.



"THE ORCHARD." SOUTH ELEVATION, TOWARDS THE GARDEN



Voysey's designs for his own house, The Orchard in Chorleywood, which he was building at the same time as he was working on Winsford Cottage Hospital.



The Orchard, Chorley Wood.



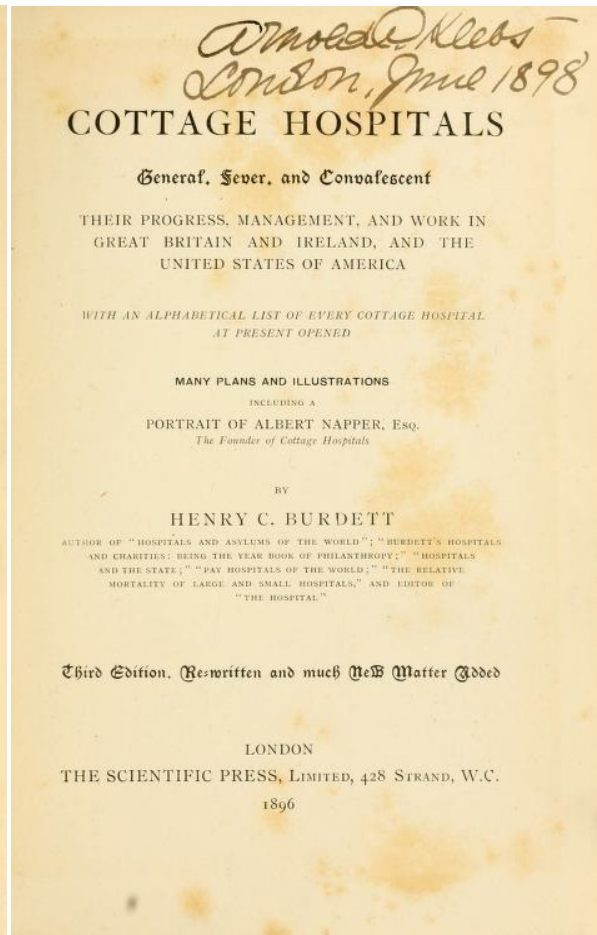
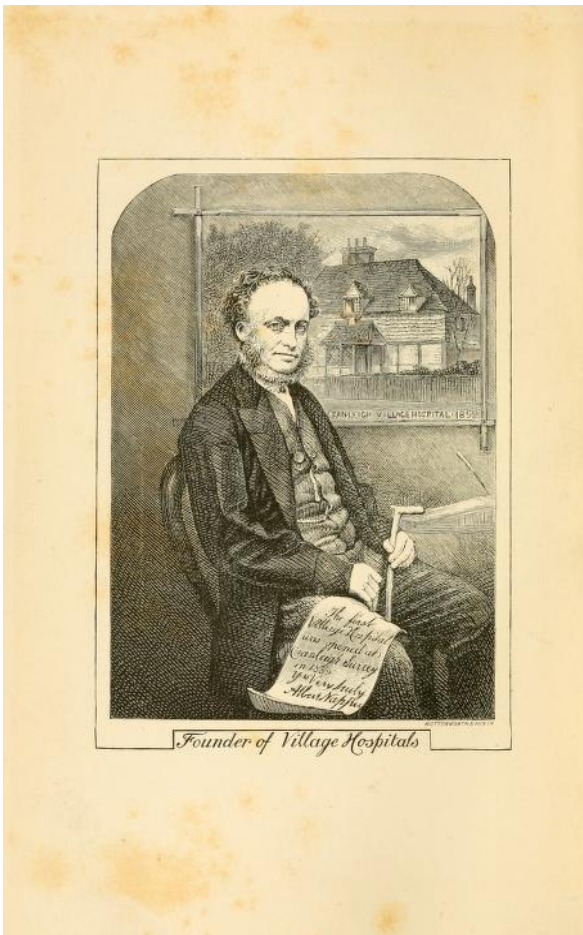
After the Great War, Voysey's architectural commissions fell away, and he turned entirely to design. Many of his wallpapers and fabrics are still in production today. Despite the marked playfulness in many of Voysey's designs, he was not an easy man to live with. He eventually became estranged from his wife, choosing from 1917 to live alone in a service flat above St James's and spending much of his time in the nearby Arts Club, where he enjoyed the company of artistic friends, who included Arthur Rackham and J. M. Barrie.

On Voysey's 70th birthday in 1927, the RIBA organised a tribute, signed by many famous contemporaries. It read, 'We, the friends of Charles Annesley Voysey wish, in the Jubilee year of his practice as an architect & craftsman, to record our admiration of his devotion to his art. Throughout a long life, a pioneer in his prime, he has always been governed by the highest artistic impulses. By his teaching, his example and his character he has won the esteem of his critics and the affection of his friends'.

He died at his son's house in Winchester in 1941, aged 84.



The first cottage hospital was a cottage in Cranleigh, Surrey, adapted for its new purpose in 1859, founded by Dr Albert Napper and the Revd. Sapte.



The Cottage Hospital Movement

Vast institutional buildings, whether hospitals, prisons, law courts or town halls, are one of the defining features of the Victorian Age. Such buildings as were in residential use were notorious for their crowded and impersonal accommodation, often seemingly designed as much to punish and deter as to nurture.

The notorious 1834 Poor Law Amendment Act had encouraged the establishment of local authority workhouses where conditions were worse than the worst ones found in the outside world. As the century wore on, greater compassion and private philanthropy emerged, the upper and middle classes becoming more concerned with alleviating the distress around them, and the medical profession more aware of needing to rise to the challenge of ensuring that advances in medical practice were extended to rural settings.

While there were short-lived pre-cursors to the Victorian cottage hospital from as early as the 1740s, the first cottage hospital identified as such came about by accident in 1859, in Cranleigh in Surrey, where lived a doctor called Albert Napper and the local Rector, the Reverend J. H. Sapte. Their mutual concern about the lack of adequate medical facilities for the parishioners was highlighted one day, when a major accident occurred and a man was trapped under an overturned cart. The victim was carried into the nearest cottage, where Mr Napper performed an amputation on his leg, assisted by the local policeman and a druggist, who promptly fainted. The incident so affected the Rector that he immediately offered the use of a small cottage, rent free, to be used as a hospital.

The example was well-publicised and soon spread, enabled by the parallel advances in hospital treatment: the use of anaesthetics in surgery from 1845,

higher standards of nursing care under Florence Nightingale's guidance, and the work of Joseph Lister and Louis Pasteur on germ theory and antiseptics.

By 1877, Henry Burdett had written the first of several editions of his seminal work on purpose-built cottage hospitals, *The Cottage Hospital: its Origin, Progress, Management and Work*.³ The trend for cottage hospitals as an expression of local philanthropy was already well-established by 1877, but the book became the bible for the movement in its recommended practices. Further enlarged editions followed in 1880 and 1896. Burdett was an enthusiastic advocate and did much to disseminate best practice and advice on everything from bedpans to drainage, record-keeping to exemplary layouts.

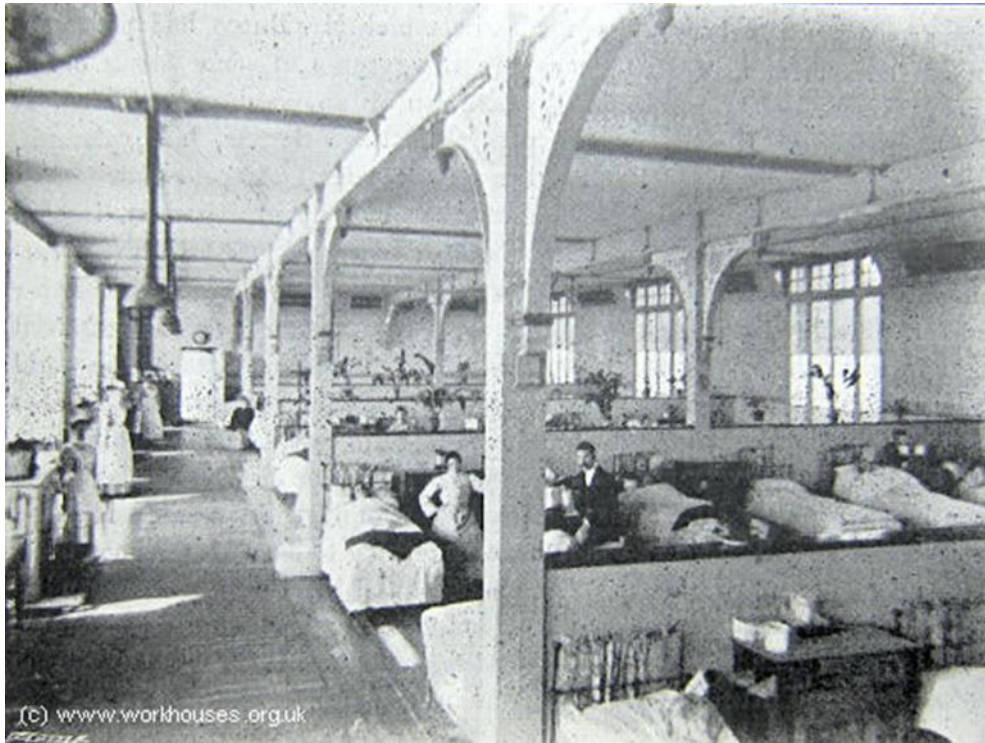
Cottage hospitals were considered economical, whether purpose built or adapting an existing building. In 1867, it was considered that a six-bed hospital could serve a population of 4-5,000. They also brought obvious advantages, and indeed enhanced status, to local general practitioners, all of whom had to earn their livelihood through fees. Competition for wealthy patients was fierce in these pre-NHS days, for all the strength of most doctors' vocations. Cottage hospitals meant GPs could admit their own patients, share costly instruments and gain surgical experience on the sick poor in relatively hygienic conditions. 'The lessons learnt by day in the cottage hospital become in time of need of real value in the ancestral home', wrote Burdett laconically. Visiting specialists from a larger hospital for more complicated procedures also provided welcome educational links.

³ In 1896, Burdett published an enlarged work, *The Cottage Hospital: General, Fever and Convalescence, their Progress, Management, and Work in Great Britain and Ireland, and the United States of America*.

Cottage hospitals in fact came early to the West Country. Dispensaries to provide cheap medicines and free advice sometimes developed into cottage hospitals by offering emergency beds, as at Wilveliscombe in Somerset in 1804. By 1896, Burdett recorded twelve cottage hospitals in Devon – but there was a black hole for such provision around Halwell Junction.

This background leads neatly to the circumstances that led to the building of Winsford Cottage Hospital. But to set the scene fully, we should rewind to the few months Voysey spent with architect Henry Saxon Snell in 1879. As an architect specialising in hospitals for the poor with one of the largest practices in London, Henry Saxon Snell was well-positioned to benefit from the continuing boom in building such large institutions. Most accounts of Voysey's life skim past this brief interlude, as fleeting and therefore unsuccessful, and probably a mistake. And yet in the context of Winsford, there is much of interest for us here, for Snell was an architect specialising in hospitals and workhouses.

Voysey was with Snell just as he was starting work on site for an Infirmary in Marylebone, and completing the Archway Road Infirmary, until very recently still a medical campus for University College London. Snell therefore had great command of a hospital's underlying technology. Yet while serving the same basic purpose, these mid-Victorian, publicly funded institutions were very different from the privately-funded cottage hospital that Voysey built twenty years later. Given the philosophical emphasis Voysey placed on the individual, he was clearly at odds with the scale and impersonality of Snell's work, but working even briefly for Snell must have introduced him to the issues and challenges of building for healthcare, and perhaps helps explain the success of Winsford Cottage Hospital was Voysey's only healthcare commission. (Voysey designed two other health-related buildings, a sanatorium in Teignmouth and a second cottage hospital in Holmbury St Mary, but neither were built.)



Henry Saxon Snell, Voysey's first employer, was an architect of hospitals & workhouses. Top: St Marylebone Infirmary (1881 - today St Charles hospital). Below: men's ward at Holborn Infirmary, Archway, both designed by Snell. The cottage hospital movement was founded in part to counter such crowded and impersonal wards, seeking to provide more personalised care in familiar surroundings.

A further point of distinction for Voysey compared to the high-Victorian architects is the extent to which his own architectural style broke free from the Battle of the Styles that raged for much of the nineteenth century. As late as 1891, Henry Burdett wrote that the first question to be asked when building a hospital or asylum was 'Is the style to be Gothic, Italian or classic, or any of the manifold modifications of these?'

Eight years later, this question did not remotely figure for Voysey. He built Winsford Cottage Hospital to no style but his own, with consideration for the patients leading the design, residents who, no less than the wealthy clients who commissioned his country houses, were to be considered precious things, to be protected from all violent intrusion.

As we have seen, Winsford's philanthropist, Maria Medley, was participating in a trend rather than initiating one. A single-storey cottage hospital was being built about 30 miles away at Moretonhampstead on Dartmoor in the same year, with a central porch and two balancing wings with wards, facing into an inner courtyard. The philanthropist here was the Hon. Frederick Smith, part of the family who founded newsagents W. H. Smith & Sons.

Smith gave land, paid for the building, and provide an endowment of £2,000 in bonds for running expenses as well as some furniture and surgical instruments. The hospital was supplied with a large basket of vegetables each week from his gardens. He stipulated that a member of his family should always serve on the Hospital board, and this was done until the NHS took over in 1948. The Winsford hospital is exactly analogous – perhaps Smith and Medley shared a dinner table, or even a solicitor. Still in use under the NHS in 2019, Moretonhampstead Hospital is one of twelve surviving community hospitals in East Devon.



Molly Medley, here resting her hand on her face in the doorway, enjoyed entertaining her younger relations and artistic friends at Winsford Tower.

George & Maria Medley

Winsford Cottage Hospital was built as 'A Lady's Noble Gift' in the words of a journalist for the *Western Evening News* who attended its opening in 1901. This lady was Maria Medley, known to all as Molly. She married George Webb-Medley in 1871, relatively late in life for them both: she was 32 and he 45, and they would have no children.

George's father, George Bowley Medley, became a slave owner in Jamaica, where George spent his early years. While the trade of enslaved people was abolished in 1807, the vast majority of plantations continued to rely on slave labour until the Slavery Abolition Act 1833. Bowley Medley's father-in-law John Racker Webb had a plantation in Manchester, Jamaica and when the former got into financial difficulties with his Stock Exchange dealings, he sailed in 1828 with his wife Hester and two-year old son George to help out his ailing father-in-law in Jamaica.

When Racker Webb died in 1830, Bowley Medley became administrator and co-proprietor of his Keynsham estate, worked by 110 slaves, and Shirehampton estate, worked by 97 shares. After abolition of slave ownership, under the misnamed Slave Compensation Act of 1837, the Keynsham estate was compensated at £1,998 2s 11d and Shirehampton at £2,086. Bowley Medley's wife Hester received a third of the value of the Keynsham enslaved and 1543 acres, and half of the value of those at Shirehampton and its 568 acres. They owned a further estate at Chew Magnam, St Elizabeth by the time they sold up and returned home around 1840. By 1845, Bowley Medley no longer appears to

have owned any property in Jamaica, but Hester's compensation payments laid the foundation for her son's eventual wealth.⁴

There is a further layer of connection to Jamaica. Hester's mother, Winsford's George Medley's grandmother, was Mary Wint, who had lived all her life in Jamaica. Mary was a 'quadroon', a term now considered offensive, meaning that she was a quarter African by descent. She was an owner of the enslaved herself, receiving significant compensation in her own right that she left to her family in Jamaica. George Medley's family history serves only to underline the complexity of past colonial connections.

The Medleys were Baptists, and in 1850 George heard Dr James Pennington preach in Liverpool. Pennington was an African-American minister and abolitionist and former escaped slave, and he impressed Medley as 'an intellectual and well educated man...with all the philosophy that might be required even from one of our popular preachers.'⁵

George now became a member of the Stock Exchange, where he proceeded to make a fortune. Molly's uncle was chairman – perhaps they met in these circles. George dealt primarily in railway shares across the world. He was an accomplished chess player and a prominent member of the London Chess Club, a source of both friendship and networking for him. It was George who instigated the time-limit in chess matches, to avoid games of 'portentous duration.'

⁴ This account of the early Medley family history is based upon *Mr Sugar Face and his Moll*, by family historians Nigel & Caroline Webb. As well as family research, it includes lengthy passages from George's diary of travels with his younger sister Amelia (hence the title). A copy of which can be found in the bookcase at Winsford Cottage Hospital.

⁵ Ibid, p. 38.

Molly came from a family of artists: her father, Henry Courtney Selous, was a successful painter and illustrator of epic scenes, best known for his depiction of *The Opening of the Great Exhibition* (1851). Her mother was also descended from several generations of distinguished enamellers. Her uncle, Frederick Lokes Selous, was chairman of the Stock Exchange and, like her brothers too, another keen chess player. Perhaps these were the networks that introduced her to her husband.

When in London, the Medleys lived at Park Street in Mayfair. George was by now very wealthy, much of this wealth based on railway investments in Britain and America. He owned houses in Kent and Surrey as well as Mayfair, and is described in the 1871 census as 'Landowner.' He later became interested in politics, and stood unsuccessfully as a liberal MP under the Free Trade banner for East Surrey in 1880 and in 1884 for Devonport, again without success.



Winsford Tower, the Medleys' country seat, stood a few fields north of the cottage hospital. It was demolished in 1951.

One of George's investments in the mid 1870s was an experimental farm, at Dreybury near Okehampton, and around 1880 near this farm he bought 'about 500 acres of bogland' (as he put it), relevant to local railway developments as well as farming practice. The land included a country seat called (for reasons unclear) Winsford House.

North Devon was not an obvious destination for such a couple, and no prior links with the area are known for either of them. However, the area had just been opened up by the arrival of the railway from Okehampton to Holsworthy in January 1879, with a station halt at Halwill. The Medleys decision to settle at Winsford Tower certainly seems linked to the railway's arrival in the area, enabling them to get up to London easily, and guests down to stay. George probably also invested in shares and relinquished land for the line. The line was built by the Devon & Cornwall Railway Company and then sold on almost immediately to the London & South Western Railway, connecting Holsworthy to the main line to London. The line was soon pushed south to Launceston, and then on to Bude on the north coast.

The Medleys proceeded to extend the house over the next five years into a country seat fit for this late-Victorian equivalent of a multi-millionaire couple, and Molly enjoyed entertaining her artistic relations and friends there. They took a leading role in local affairs and events, supporting a wide array of good causes. The house had all modern conveniences: electric light and heating generated by Hornsby oil engines with backup storage batteries. A striking battlemented octagonal block was added to hold a water tower, visible for miles around, and the house was re-named Winsford Tower. It had twenty bedrooms, all with dressing rooms. There is an intriguing and striking contrast between the fussy aesthetics of the Medley house and the studied simplicity of Voysey's designs. Was Molly, the daughter of an artist herself, striking out after her own tastes when she commissioned Voysey to build a memorial hospital to her husband's memory?



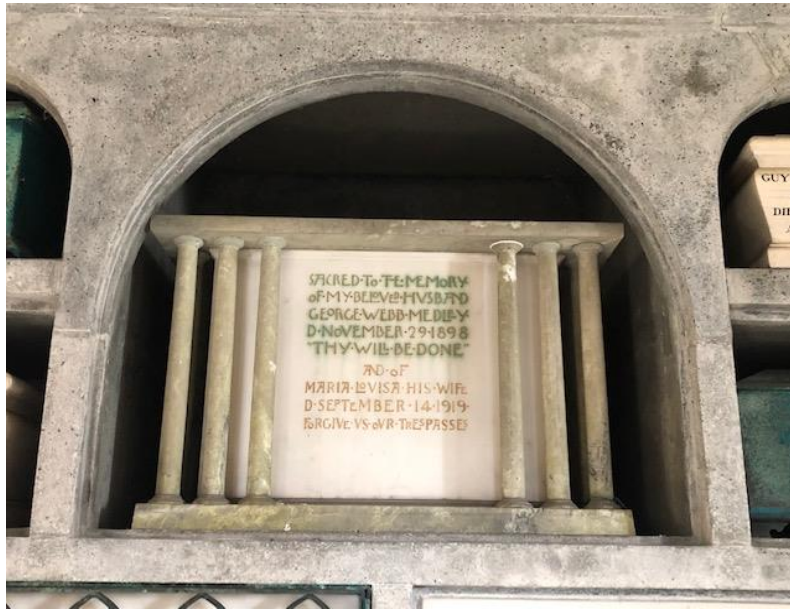
Inside Winsford Tower. The fussy late-Victorian interiors are in marked contrast to the simplicity of Voysey's buildings and designs.



The servants of Winsford Tower, and one of the many elaborate place settings they would have laid.



At leisure at Winsford Tower.



George Medley was cremated at Brookwood Crematorium, the first British crematorium, to which a cortege could depart discreetly from London on the dedicated Necropolis Railway, which had its own terminus near Waterloo.

According to her wishes as expressed in her own will, when she died in 1919 Molly's ashes were mingled with George's and reinterred at Golder's Green Crematorium, where they lie in the East Columbarium, 2nd Floor, East Wall. The font of the inscription is clearly Voysey's, although sadly the silver urn Molly commissioned from him in 1898 for George's ashes is not inside the niche. Its whereabouts is currently unknown, and no design has survived.

The building of Winsford Cottage Hospital

George was worth £260,000 when he died in 1898, an enormous sum. Most was left to his wife, but he bequeathed £1,000 to the Reverend Voysey's Theistic Church. The Reverend Voysey also took the funeral service and delivered a fine eulogy, at Brookwood Crematorium, the first such crematorium in Britain. It seems entirely plausible that it was this association with the Reverend Voysey's church which led Molly to commission C. F. A. Voysey to design a silver urn for her husband's ashes in December 1898. The choice of cremation is an interesting one as it was only declared legal in 1884, and reflects the Medleys' liberal outlook and interest in new technology. Voysey's White Book, of his expenses, records in March 1899 that the urn was made by one 'G. Hart'.⁶ This silversmith could just conceivably have been a young George Hart, then still living in Hitchin but soon to join C. R. Ashbee's Guild of Handicrafts as an apprentice, first in London and then in Chipping Campden, where his descendants still run the family workshop there. However, Hart was then only 17 and not yet apprenticed so it seems the name is merely coincidental. The design and whereabouts of the urn are both yet unknown.

Molly also chose Voysey to build a more public memorial to her husband, a cottage hospital just south over the fields from their house and conveniently near the railway junction. It was named after the country seat they had created together.

According to its founding deeds, the hospital was intended for the relief of the poor 'not being inmates of a workhouse or in receipt of Poor Relief', who lived in

⁶ RIBA, VoC 1/ 2,4. The last entry in Voysey's White Book for the project was for gilding in March 1899. It cost £25, and the gilding 9s.

the scattered rural parishes of Halwill, Beaworthy, Ashwater, Black Torrington, Bradford, Cookbury, Clawton, Hollacombe, Pyworthy, Tetcott, Ashbury, Highampton and Northlew, with a preference to Halwill and Beaworthy. Bideford had a District Dispensary and Infirmary, but local directories indicate no hospital in Okehampton or Hatherleigh, so the sick poor had to go as far as Exeter for any treatment – or else be treated at home.

Rural living conditions in the area were pretty dreadful, as recorded in 1879 by a young Medical Officer of Health, Dr. Thomas Linnington Ash, who would later be the first surgeon-in-charge at Winsford. In 1879, he found many dwellings

‘generally damp, deficient in room, ill-ventilated, without drainage, closet accommodation, or good water supply; and they are for most part in a state of dilapidation. Many are literally hovels of mud, which, in the present day, most gentlemen would consider unfit even for the housing of cattle.’



Dr Thomas Linnington Ash highlighted the poor health and living conditions in North Devon as a young medical officer. He may have advised Molly Medley and Voysey on the design of Winsford Hospital and became the first surgeon-in-charge at the hospital, a much loved and respected local practitioner. This portrait, painted by Molly’s relative and protégé, Gerard Leigh Hunt, has always hung in the hospital. Donated to Landmark by the Winsford Trust, it still hangs in the community wing of the building.

The following year, Linnington Ash's report was picked up by the *British Medical Journal*, who praised his 'long and unusually interesting' report, and drew attention to the very high death rate in the area: 21.2 per 1,000. Of the 200 deaths that year, 20 were from contagious illnesses like diphtheria and diarrhoea; a third were pulmonary, and a sixth due to bronchitis. Sixty children under five had died, 'an unduly high proportion for a rural and sparsely peopled district like Holsworthy. The account of an epidemic of diphtheria, which killed nine persons and was chiefly spread by attendance at the village schools, is interesting and instructive.'⁷ Forty years after Cranleigh acquired its cottage hospital, it was high time such social philanthropy penetrated these remote parishes.

Being a rural GP required strong nerves and professional dedication. In 1884, for example, Linnington Ash was called upon to attend an unfortunate workman called Branch whose right hand was cut off while feeding a chaffcutter. Another chance vignette surfaces from 1883: the Reverend John Russell, in his 80s, rode 'a poor hack' from Black Torrington to the Williams at Scorrier, to judge some puppies. He was clearly very unwell on his arrival and Mrs Williams urged him to return by train, but the next day he insisted on riding the 70-mile return journey home. He later died at Black Torrington, 'in the arms of his medical attendant, Dr Linnington Ash.'

According to Voysey's own notebook, Winsford Cottage Hospital cost £2,215 to build, a relatively modest sum for such a rich widow. Dr Linnington Ash was an adviser on the project, and became the 'surgeon in charge' when the hospital opened.

⁷ *BMJ*, 1st May 1880.

The selected site was the corner of a large field next to the railway line, a few fields from the grounds of Winsford Tower. The proximity to the station helped with both medical supplies and patient access.

1899 was one of the busiest and most lucrative years of Voysey's long career. He designed eight new buildings and was managing at least five major building projects during the year. By now he employed a small team of assistants, but the beautifully drawn plans and elevations for the Hospital that he drew for Molly Medley betray no sense of this busy-ness (no other specifications or building accounts survive beyond a few sparse jottings of dates and expenses in Voysey's White Books in the V&A).⁸ There are three sheets of colourwashed elevations and plans: one, undated, shows the building in perspective and was probably the initial presentation for his client. The second, dated April 27th 1899, is very similar but shows less perspective. The third sheet, dated July 1899, is more worked up and is signed by the architect, client and contractor. It presents the side elevations and drainage, and shows slight amendments to the previous two, in the proportions of the wards and arrangements of the rooms on the north side of the corridor. Unlike his Arts & Crafts contemporaries, Voysey was not dedicated to using local materials and vernacular styles for his buildings. However, he did like to use local builders. He advertised for tenders in *The Builder* on 19th August 1899 though according to Voysey's White Book, construction lasted from April to November 1899. The contract to build the hospital was won by Medland White, address The Station, Halwill, who therefore either won it in advance or perhaps proved unsatisfactory, prompting a re-tendering exercise mid-project.

⁸ RIBA Drawings & Archives Collections at the V&A, SB106 / VOY
[47] 1-3.

In October 1899, 'Mr Ash' (presumably Dr Linnington Ash⁹) was sent a copy of the 'agreement and stamping' that concluded the final plans, suggesting that he may have been consulted over the design of the hospital.

The White Book also tells us that Voysey visited Beaworthy eleven times in 1899-1900, apparently only visiting Winsford Tower once. He also visited Mrs Medley seven times in London. He used Noel D. Sheffield (1876-1955), to supervise the work. We know this only from Sheffield's entry in the hospital visitors' book almost 50 years later, in which he says he 'supervised the erection of the Hospital 1900 under the direction of Mr C. F. A. Voysey.' Later, during the Great War, he was articled to Voysey and became a fully qualified architect.

The Winsford hospital reflects, on a modest scale, all the characteristic features of Voysey as a mature architect. It is built of roughcast brick painted white, with Hatherleigh stone dressings, one of his favourite treatments. His specifications for roughcast were generally detailed: the previous year, for Broad Leys on Lake Windermere, he had specified for two coats of roughcast,

'With well-washed gravel or stone chips finished to a very rough surface with pebble or stone chips as approved; the last coat to be mixed pebbles or stone chips and cement mixed together and applied with a spoon while the second coat is soft. The first coat to be scored over to form a key for the second.'

The plan provides for every medical function, with the ward windows facing south towards the views and the sun.

⁹ If Linnington Ash was a member of the Royal College of Surgeons, Mr would of course have been the correct form of address, but he seems to have been known as Doctor in Devon).



The hospital shortly after the First World War, already extended at its western end and with the additional glass canopies in place. The well-kept gardens are planted with roses and apple trees. There are surprisingly few early photographs of the hospital.

There is a strong horizontal emphasis to the building, with a long ribbon of unornamented stone mullioned windows: the long, low silhouette is dominated by the sweeping Delabole slate roof with rendered, slightly tapering chimney stacks and prominent eaves. The slates are laid in traditional diminishing courses, and while re-roofing, we found that horse hair had been laid above the boarding under the slates, offering insulation as well as sound proofing (this has been left in place). The design and materials all speak of Voysey's overriding belief in simplicity.

In scale, the hospital could easily be mistaken for a middling-sized house rather than a medical institution, and Voysey's plans show only seven beds in the four wards, very small even by cottage hospital standards. By 1906 this had risen to nine beds, and to fifteen by the time the hospital closed in 1998.

Men and women were attended to in different wings, as recommended by Henry Burdett's book on cottage hospitals, with wash house, mortuary and fuel store placed beyond the main hospital range. The main corridor, with a mosaic floor of polished golden limestone blocks, is the axis of the whole design, allowing ease of circulation and direct access from all the rooms. The floor tiles rise up to a high skirting board height with curved corners, edged throughout with black Connemara marble. Voysey recommended the general use of glazed skirtings in buildings, to avoid the dust trap of a right angle. At a later date, the wooden skirtings in the wards at Winsford have an applied beading to avoid this, as well as providing a practical edging to prevent the beds on their india rubber wheels from crashing into the walls.

There were flushing WCs, and sewage and storm water were dealt with separately. Fresh water came from a well in the wash house in the east wing, as indicated on Voysey's drawings. Wards and service rooms were heated by coal fires, and hot water for baths and other domestic purposes came from a hot water system connected to a boiler behind the kitchen range. The hospital

seems to have electricity from the outset: it was reported in 1930 that the batteries for the 'Electric Lighting Plant' had been renovated 'after having been in use for 30 years.' The plant's existence at the hospital since the outset means Voysey at least oversaw the construction of the generator shed in 1899, in allowing for the inclusion of the cables in the construction.

Accidents were dealt with in a ward next to the men's ward (the equivalent of an A & E ward today), with a children's ward next to the women's. There were two nurses' rooms; to the left of the main entrance was an operating room with a linen cupboard adjacent, and a smaller surgery to the right, with a dresser's room beyond that. The two little rooms in the cruxes of the wings were a stores and bathroom, with a WC at each end of the corridor. The mortuary was decorously placed at the end of the range of outbuildings at the end of the east end.

Voysey had thought carefully about every detail. The children's ward (today's dining room) was positioned to overlook the passing steam engines, which he said 'was the only entertainment near the site.'¹⁰ The floors of the wards 'are boarded on solid beds of concrete, so that there is no cold damp air or harbour for rats below...I mention these points as the hospital faddists are apt to forget them.'¹¹ The windows were given specially designed vertical hinges to ensure plenty of fresh air, boosted by open fires. In his advice on cottage hospitals, Burdett advised the nurse of the importance of 'the circulation of pure fresh air throughout the wards', recommending that a nurse kept ward windows open 'in spite of the remonstrances of her patients, who are bound to object.' The air vents are archetypal Voysey, a whimsical, stylised design of birds and trees, and

¹⁰ *Builders Journal & Architectural Record*, XVII, 1903.

¹¹ *Ibid.*

the cast iron fireplaces similarly bore his signature, slightly elongated hearts that are an endearingly succinct expression of love and healing.

The local correspondent of the *Western News* of 3rd December 1901 gave the new hospital an enthusiastic eye witness review that is worth reproducing in full:

WINSFORD COTTAGE HOSPITAL A Lady's Noble Gift

There is probably no finer or more bracing air in Devon than that which is to be found on the tract of country high above sea level which adjoins the South-Western Railway near Halwill and Holsworthy. It is in that pleasant district – close by Halwill junction station and commanding to the southward, a pleasant open view of field and woodland right away to the distant Dartmoor Hills – that a site has been found for Winsford Cottage Hospital.

The building with its grounds occupies just one acre. Seen from the road hard by, there is something of the Continental look about the long one-storey structure with its bright white walls relieved by the green of doors and windows and so on. Green, that most restful of colours, has in fact, in various shades, entered freely in the architect's 'scheme' all through. As you enter the bright central hall, in which a fire is blazing cheerily, an inscription tells you that the hospital was erected 'to the memory of George Webb Medley of Winsford Tower, Beaworthy, by his wife, Maria Louisa Medley, 1899.'

Mr Medley will be remembered as a candidate, some years ago, for the representation of Devonport and as a writer and authority on Free Trade and kindred questions. His wealth was acquired in the London Stock Exchange and at his North Devon mansion whose beautiful grounds stretch to within a few fields' length of the hospital where he was wont to spend part of the summer months, as Mrs Medley does now.

In the entrance hall of the hospital and indeed throughout the whole place, there is a cosy, homelike air which must be doubly comforting to the sick folk who are to be its inmates. Running left and right as you emerge is a long, admirably lighted corridor terminating in two wards which form the wings of the hospital. Stepping out from the middle of the corridor, you find yourself on a covered verandah where the patients may sit, and beyond that again are the garden and orchard grounds, now in the process of being laid out for grass and fruit trees. Here, in the open air

and yet sheltered, convalescents may enjoy the practically unlimited prospect that stretches away for miles and miles in front and on either hand.

The foundation of the hospital has had special care; sewage and storm water are treated separately; an abundance of pure water comes from a well¹² and pump on the premises, and the sanitary arrangements seem excellent. The wards and all the rooms are heated by ordinary fires – there is nothing more cheerful than the old-fashioned blaze – but for baths and other domestic purposes a hot water system is connected with a boiler behind the kitchen range.

Returning to the central hall for a more leisurely inspection of the hospital itself, one passes to the right into the surgery and the adjoining committee and consulting room in which the nucleus of a surgical library will probably be of value for reference to neighbouring practitioners as well as the hospital staff. Passing a bedroom, bathrooms and other apartments, one finds oneself in the children's ward. The bright white little beds with ingenious bedtrays and several other mechanical arrangements for the comfort of the little occupants and the convenience for the nurses impress one as pleasantly as do the beautifully finished wooden floors and tiles in this as in all the wards.

As to the wards there are three of them arranged pretty much alike internally – this for children, another near it for women, and a third at the other end of the building for men – each making up two beds; and besides there are two beds for accident cases (one reserved for special emergencies) making a total of eight beds for the whole hospital.

The bedsteads, ambulance chairs, movable bath and other furnishings that have to be taken from their position, are all on India rubber tyres on which they run noiselessly, and this is but one of a hundred little details where thoughtful foresight has been exercised without regard to cost. The comfortably furnished sitting room for the matron sister, and a linen closet heated for drying purposes with hot water pipes are noticed as one goes toward the little operating room. This apartment, like the corridors and verandah, is tiled. It is provided with an operating table of the latest kind, specially obtained from New York.

The arrangements for hot and cold water supply and for securing that all the numerous surgical appliances shall be aseptic are complete. In the

¹² The well is shown on Voysey's drawings and sited in the wash house in the east wing.

accident ward is a Gorham Accident Bed, which allows of the patient's position being raised or lowered at any angle, and there is also a fracture bed of the usual type. A stretcher ambulance, also capable of being raised or lowered to any degree is among the other equipments [sic].

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ADJUSTABLE
...BED...**



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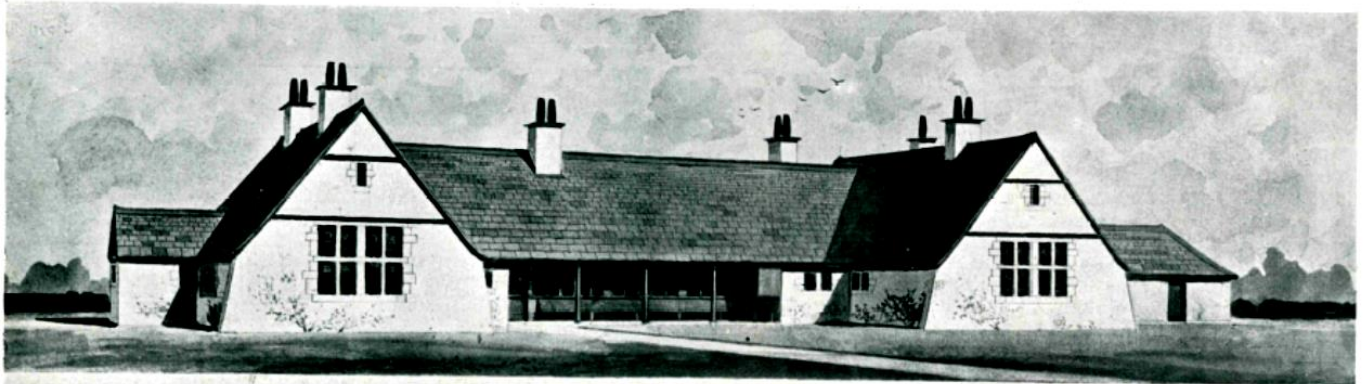
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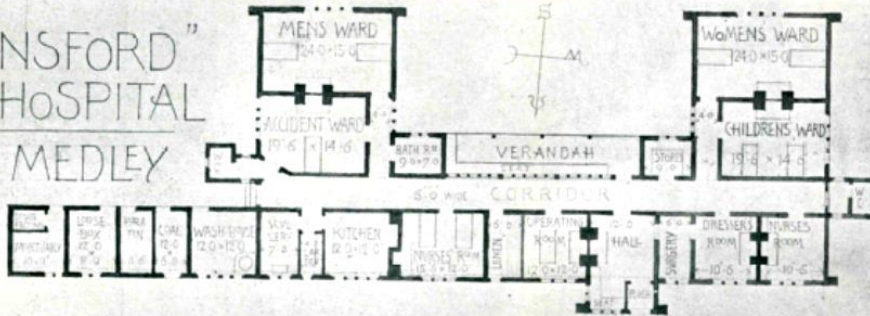
A 1903 advert for an adjustable 'Gorham' bed of the type used at Winsford.

Country Life Illustrated, June 23rd 1900:

A COTTAGE HOSPITAL.



THE "WINSFORD"
COTTAGE HOSPITAL
FOR MRS MEDLEY



BEAWORTHY
DEVON
G.F. VOYSEY
ARCHT



WE are deeply indebted both to Mr. Voysey, the architect, and Mrs. George Webb Medley, the founder, for permission to reproduce the very complete and thoughtfully-designed cottage hospital which that lady is erecting in memory of her husband; and our obligation is made the greater in that the particulars given enable us to state the materials of which the hospital is being constructed, and the cost which is being incurred in its erection. There may be many others, and it is to be hoped that there are such, who would like to build similar hospitals in their own neighbourhoods, and to them it will be a practical advantage to know that this hospital, of which they see the plans and dimensions before their eyes, is being erected at Beaworthy, in the county of Devon, from Mr. Voysey's plans, by Mr. M. White of that place, at a contract price of £2,215 5s. Very few words are necessary to explain the design, of which it may be said, with more truth and

significance than usual, that it speaks for itself. In fact, apart from the observations which it occurs to us to make with regard to internal arrangements, there is very little for us to do save to state the materials used, and to paint in words the colouring which cannot be shown in black and white illustrations. The walls are of brick, rough cast, and, we fancy, whitewashed. The dressings are of local stone of a yellowish colour, the windows are iron casements with lead glazing, the roof is of Delabole slate (which is a green slate), and the hips and ridges are of imperishable lead also. The paint of doors and of gutters—or "landers," as they sometimes call them in the West Country and in Wales—is green, and there is a strip of border along the front wall which may be gay with flowers. The internal arrangement strikes us as being excellently thought out. On entering the visitor finds himself in a sufficiently spacious hall, with a seat for patients, on the right of which are the surgery and the dresser's

room, communicating with one another, and having an exit into the long corridor. Beyond is the nurses' room, opening directly into the corridor, and having no direct communication with the dresser's room. On the left of the hall are—first, the operating room, fairly spacious; then a nurse's room, kitchen, and all sorts of offices and storehouses, ending with a loose box, entered from the outside only, and a mortuary with disinfecting room attached, the former having an entrance from without and from within. This great long corridor, 6ft. wide and running from end to end of the building, is the dominant feature, the watershed, so to speak, of the whole; it divides the patients from the rest of the world, and the two wings behind, the sunny half-quadrangle facing nearly south, with its verandah and its seats, where the heat of the sun may be escaped, are their true domain. One wing is appropriated to men and another to women, an accident ward of large size, rendered necessary, perhaps, by the character of some neighbouring industry, being carved out of the men's wing, and a children's ward out of the women's wing. Specially commendable is the fact that there are clearly no stairs, an advantage which can be secured only where abundant ground space is readily available.



Detail of the veranda c.1912, showing Voysey's high backed slatted bench plus a simple bench and deckchairs for patients to sit out.



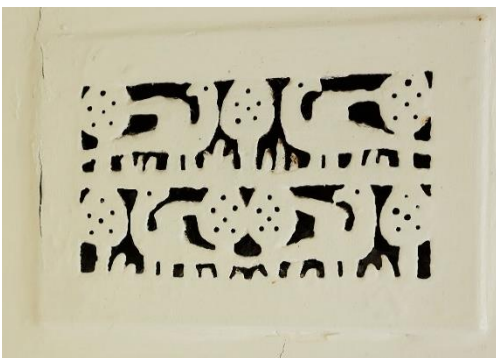
This tiny snap of Rita Warne, 'Holsworthy housemaid' in the 1940s, also shows Voysey's slatted bench, similar to the one he designed for Moorcrag in Windermere.

18 Sept 21 st Sept 23 rd	Thomas Smale 52 Thomas Anthony 50	Germanus weeks Lweldale bet	Nil Laborer	bet 9 th bet 10 th	Cured Cured	Ecthyma of legs Ulcerated legs.
bet 3 rd bet 3 rd bet 8 th bet 8 th bet 14 th bet 14 th bet 19 th bet 22 nd bet 24 th	Clairia Gipe 16 William Jurrant. Jane Mather 28 William Clark writing? Reginald Pale 18 John Farnell 34 Ada Claydon 33. W.D.H.W. William Knight 23	Halwilt Wusford Not working Halwilt Ashley Court. Not working Packer Germanus week Halwilt	Servant Gardener Servant 7 Lab. School boy Laborer Nursing School boy 7 Laborer	bet 6 th bet 7 th Oct 29 th bet 16 th bet 14 th bet 31 st Dec 15 th Nov 13 th bet 28 th	Cured Cured Cured Cured Cured Cured Cured Cured Cured	Needle in hand. Ulcerated leg Phimosis Big toe abscess Pilonus thumb Eczema. Fractured arm Laguna 6-9yr.
Nov 2 nd Nov 9 th Nov 16 th Nov 17 th Nov 22 nd Nov 23 rd	Leslie Ford 8 James Hocking 15 Ray Brent 20 14 th Normal Henry James Fred Newcombe	Not working Not working Pre working Halwilt Halwilt Sheep bank	7. Parthenia Apprentice Teacher H. Pale lawyer Butcher Butcher	Dec 12 th Nov 19 th Dec 24 th Dec 7 th Dec 3 rd Dec 3 rd	improved Cured Cured Cured Cured	Tubercular ankle. Ecthyma toe Cut arm. Shingles Laguna 6 fingers. Cut hand.
Dec 2 nd Dec 18 th Dec 25 th	Richard Day 47 George Fumbridge 18 Thomas Smale 52	Atla Court Killahee, Pyeworthy Germanus weeks	Laborer 7. Lab. Man Nil	Dec 10 th Dec 31 st	Cured Cured	Fractured arm Phimosis Ecthyma of legs
1999 Jan 4 th Jan 13 th Jan 15 Jan 18 th Jan 19 th Jan 20 th	Samuel Barrett Rose Dart 12. 14 th Bushell 50 Thomas Smale 54 Sidney Pale Ella White	Pyeworthy Halwilt Ashwilt Halwilt New Down	Father School girl W. F. Banker Gardener Laborer Laborer	Jan 13 th Feb 2 Jan 18 th Feb 8 th Jan 23 rd Jan 26 th	Cured. Cured Cured Cured Cured Cured	Ulcerated leg. Cut hand. Debility. Cut hand. Cut hand

Pages from a facsimile copy of the Patient Record Book (this one from 1909). The book runs from 1900 to 1948, and intermittently to 1968. A copy is kept in the interpretation room - see www.landmarktrust.org.uk for opening arrangements.

The two glazed canopies added at the end of each ward appear in pre-1914 photographs, as extra sitting out areas (and perhaps weather shelter for the ward windows). At some point in these early years, the west end was extended at least once and possibly twice, and is shown in its current form in Rifleman Gilmour's little 1915 painting. The extension added a sluice room on the northern side with a lobby as an extension of the spine corridor, and a WC at the far west end. The evidence that this was an extension rather than a change of heart during the initial construction is apparent in the roof space, where the roughcast of the original external west wall survives. There are minor differences of details: the former sluice room has barley twist window stays, not found elsewhere in the building; there are two tilting windows, again unlike the casements used elsewhere. Landmark has placed the current cast iron fireplace, which is not a Voysey design, in this bedroom, relocating it from the single bedroom to the east of the entrance hall to reinstate the Voysey design this latter room must originally have had. Otherwise, the extension fits in perfectly with the rest of the building. From map evidence, it seems to have been present by 1906; there is also an early photograph dated 1905-10 that shows the extension already in place.

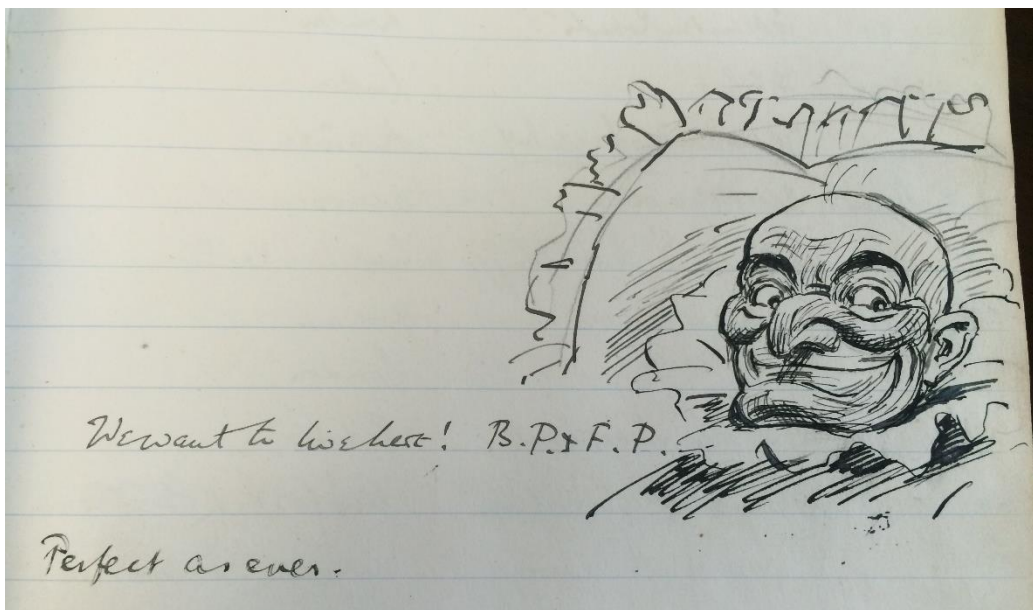
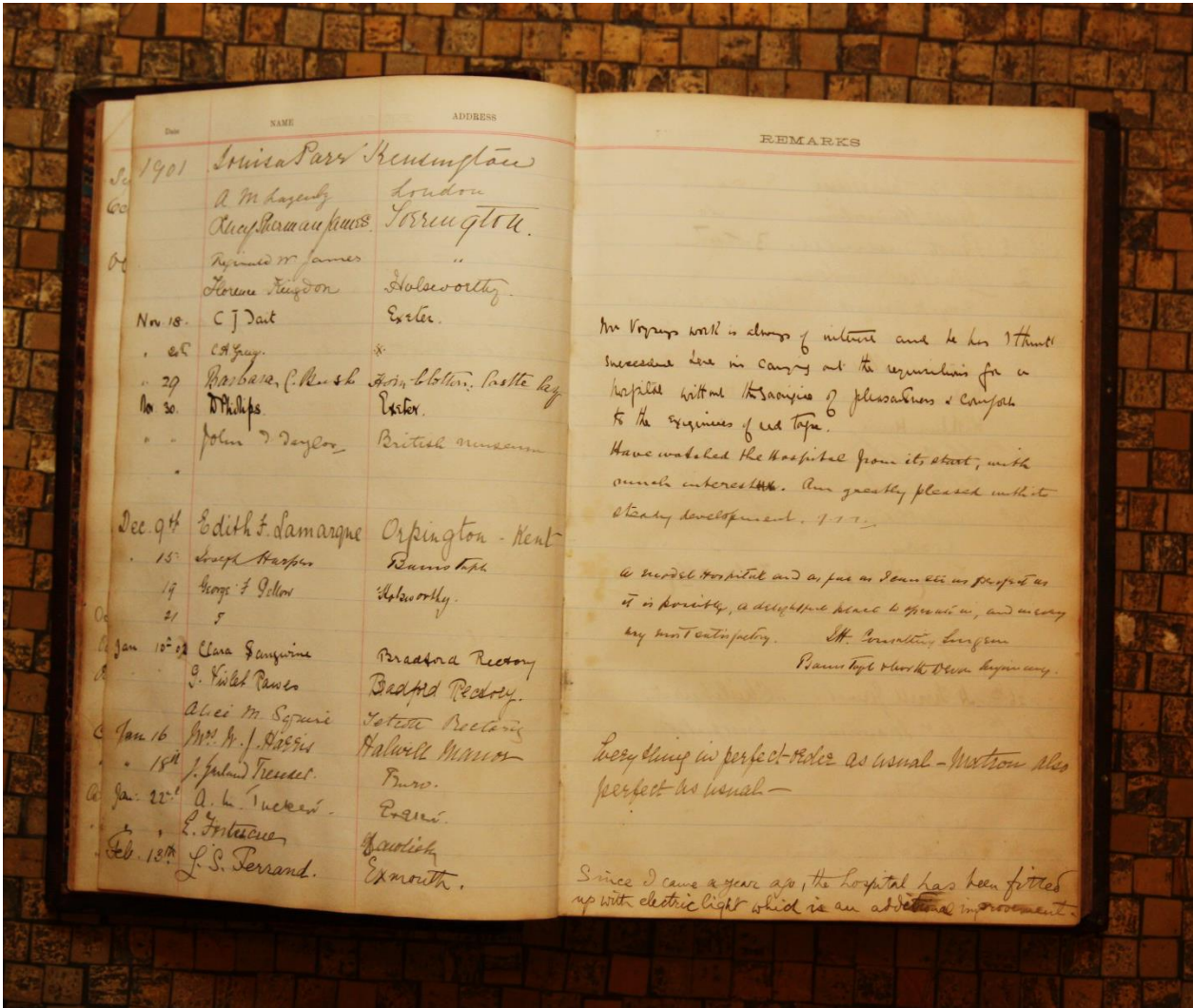
Landmark's philosophy of repair has been to present the hospital as it was in at the outbreak of the Great War, and so both the canopies and extension remain, even if they were not part of Voysey's original conception.¹³



One of several identical air vents in the hospital, designed by Voysey.

This extension was wrongly identified with the original design in the original list of works RIBA VoC/1/1, which records in 1924 'additions to Winsford Cottage Hospital Beaworthy for E. B. Medley Costin', Molly's nephew, who took on the running of the trust after her death. However, there is no physical evidence of what these additions were, and the hospital's annual report records only that £9 17s 6d was spent on maintenance.

Winsford Cottage Hospital History Album



The Winsford Hospital Visitors' Book records the accolades of all who visited, including Bernard Partridge, cartoonist for *Punch* magazine. 'We want to live here!'

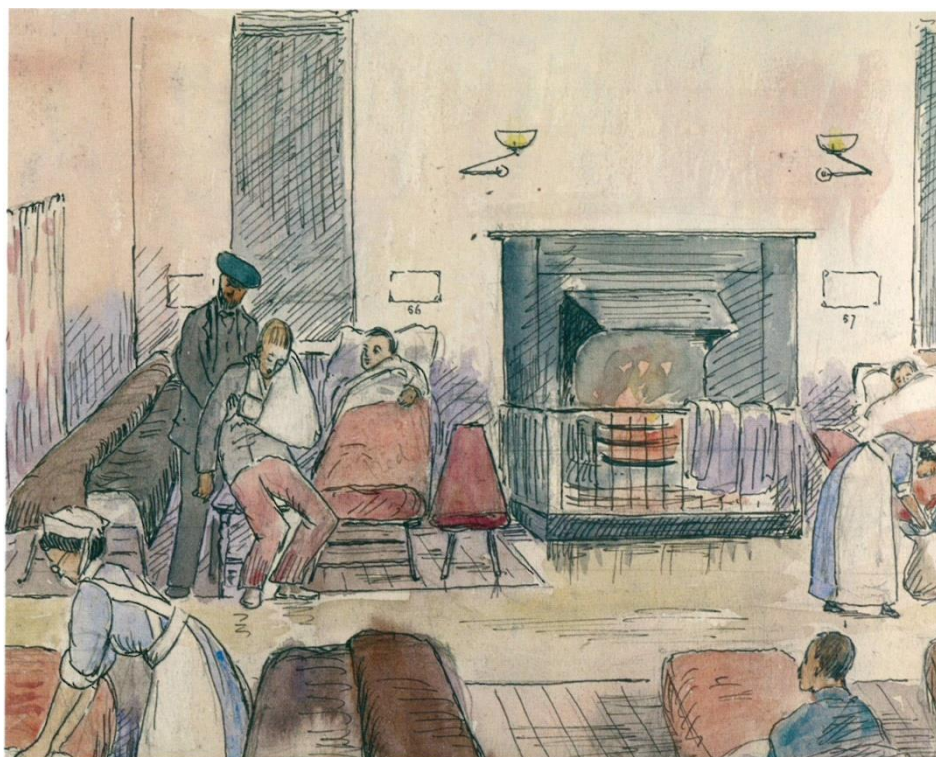
Winsford Cottage Hospital 1900-1947

Kelly's Directory for Devon in 1906 records that the hospital was staffed by four medical men, a matron and a nurse. Thomas Linnington Ash was surgeon-in-charge, assisted by Dr. Henry Davy as a consulting physician of the Royal Devon & Exeter Hospital and Mr. William Swain the consulting surgeon. Edward Kingdon was assistant surgeon, with Miss Hainsellin as certified matron and Miss Blackler as certified nurse. A leather-bound Visitors' Book records that visitors came from far and wide to admire Molly Medley's memorial; most were probably her friends, brought over from Winsford Tower, since they hailed from the USA, Canada, Australia, Nigeria, Kenya, Egypt, New Zealand and Southern Rhodesia as well as closer to home. The Visitors' Book records many a glowing comment; Bernard Patridge, cartoonist for *Punch*, drew a little picture of Mr Punch on a frilly pillow, saying simply 'We want to live here.'

Other guests recorded their reactions with equal enthusiasm – 'One feels inclined to pretend to be ill, to come here'; 'A noble and lasting gift'; 'It is no exaggeration to say, that this is the most perfect institution of its kind I have ever seen: a true model! Maximum in parvo!', and so on, for pages and pages.

Meanwhile the Patient Record book, covering 1900 to the late 1960s,¹⁴ of which there is a copy in the bookcase, records the constant stream of admissions and for what ailment, in an entire and most valuable social record of a rural community and its inhabitants. Most left Cured, Relieved, Improved or Benefitted, with only a handful of deaths or transfers to larger hospitals each year.

¹⁴ The more recent records are still held by the NHS.



While not of Winsford specifically, these contemporary watercolours by a nurse of a convalescent hospital in the Great War evoke the life of the grateful soldiers who found rest at Halwill Junction. (Paintings by Nurse Edith Drummond Hay, from Glencarse in Perthshire, who worked as a Red Cross nurse during the war with the Voluntary Aid Detachment.)

The outbreak of war in 1914 brought a change to the hospital's use, when the Red Cross took it over as a convalescent home. The first wounded soldiers arrived from Flanders just three months into the fighting: in November 1914, the first batch of eight soldiers appear in the Patients Record, initially suffering from minor complaints as various as asthma and varicose veins alongside 'injury to shoulder.' Thereafter, there are regular influxes of soldiers - French, Dutch and Belgians as well as British - alongside the more usual scattering of schoolboys and labourers. They were treated for the usual travails of that war: shrapnel wounds, malaria, trench foot, shellshock, gas poisoning and rheumatism.

Records show 283 soldiers were treated at the hospital before it returned to community use in May 1919. Rifleman Gilmour's painstakingly executed watercolour captures the hospital in these years, the Red Cross flag flying and the southern end of the garden glimpsed in use as a vegetable plot (see title page). The title he gave it, '*My Little Grey Home in the West,*' is a reference to a popular music hall song of the pre-war years that was taken up by the tommies in the trenches:

When the golden sun sinks in the hills,
And the toil of a long day is o'er,
Though the road may be long,
In the lilt of a song
I forget I was weary before.

Far ahead, where the blue shadows fall,
I shall come to contentment and rest,
And the toils of the day
Will be all charmed away
In my little grey home in the west.

There are hands that will welcome me in,
There are lips I am burning to kiss,
There are two eyes that shine
Just because they are mine,
And a thousand things other men miss!

It's a corner of heaven itself,
Though it's only a tumbledown nest,
But with love brooding there,
Why no place can compare
With my little grey home in the west!

It is almost unbearably poignant to think of the traumatised men, many little more than teenage boys, finding rest beneath the veranda in the sun, looking out over the Devon countryside, only to be sent back to the trenches once nursed back to some kind of health. Rifleman Gilmour turned out to be one of the luckier ones. He was born in Bow in London in 1882 and was a printer by trade, for the *Daily Mirror*. Aged 32, he enlisted in the London Regiment with the 17th County of London (Stepney & Poplar Rifles) Battalion, on 10th August 1914, just two weeks after the declaration of war. In those days of heady patriotism, it was common for battalions to be recruited from very localised groups of young men who already knew each other, for ready made camaraderie.

Like so many others, Gilmour was wounded on his very first visit to the trenches after his training, a so-called acclimatisation visit at Festubert with the Worcestershire Regiment, on 9th April 1915. He was admitted to Winsford Cottage Hospital on 14th August 1915 with a gun-shot wound to his right leg, and discharged from there on furlough (leave) four days before Christmas in the same year. He returned to active duty, and received his final army discharge on 30th December 1916, 'No Longer Medically Fit.' He died ten years later aged 44.

Dr Linnington Ash, presiding spirit of the hospital from its very conception, did not live to see the end of the war, dying at Holwsorthy in December 1917, at the age of 71.

Molly Medley died at Winsford Tower in September 1919, aged 80. She too wished to be cremated and her ashes were mingled with George's in the same

Voysey-designed urn. Her estate was worth over £373,000 (some £15 million by today's value). Her will both re-stated and expanded the function of the cottage hospital, adding that as well as the poor of the fourteen parishes, the building was also to serve 'for the relief of Sailors of his Majesties Fleet, when leaving any naval hospital at Plymouth, Devonport or Stonehouse and requiring convalescent help', presumably prompted by the use of the hospital during the War. Molly left extensive and detailed bequest instructions for her enormous fortune, including £20,000 to endow an Economics scholarship at Oxford University in her husband's name. The George Webb Medley Prize still exists today, offering small prizes to the best graduate and undergraduate theses in Economics. The future prime minister, Harold Wilson, was one of the prize winners.

She left a very generous bequest of £55,000 and a London House to her cousin and protégé, Gerard Leigh Hunt, whose artistic talent and training she had encouraged and funded since he was a boy. Hanging in the Landmark, there is a striking pastel portrait by Gerard of his wife (then fiancée) Thyra, done in 1896.¹⁵ Leigh Hunt was also the artist of the portrait of Dr Linnington Ash.

Another principal beneficiary was George Medley's nephew, Edward Boyd Costin, who both inherited Winsford Tower and took over the running of the trust that was to be set up to manage the hospital. Molly endowed the trust with £17,000, together with a requirement to apply to the Charity Commissioners for an order vesting the land, hospital and buildings in the Official Trustees of

¹⁵ We are grateful to Leighton House Museum in London for donating this drawing to hang in the hospital, as part of a de-acquisition project during the restoration.

Charity Lands. At Molly's request, Edward eventually took the name Medley-Costin, although he sold most of the Winsford Tower estate land in 1920.

The Devon Record Office now holds Costin's detailed annual reports to the Charity Commissioners, up to 1947. The endowment was not enough to meet costs, and patients paid small contributions towards the cost of their care. There was also a local Nursing Association – presumably funded by patient subscription - and its nurses carried out hundreds of home visits each year. This lasted until 1935, when a District Nurse was added to the hospital staff.

Covering costs seems to have been a challenge even then and the 1920s saw various imaginative fundraising initiatives – a football match between Exeter City and Holsworthy, kicked off by Medley-Costin in front of 1,000 spectators; flower shows, pigeon shoots, a 'Pound Week' among all the parishes, church fetes, flag days and dances. The tradition would continue in aid of the building after closure of the hospital by the NHS in 1998 (and, we hope, continue in aid of village funds when the community is welcomed in to use the site during future Landmark days).

All sorts of minor complaints were treated at the hospital (and some not so minor). Bicycle accidents figure largely in the Patients Record as do 'poisoned finger' and such like; also broken limbs and sprains, respiratory diseases, ringworm and ulcers. Routine operations for appendicitis, tonsillitis and even amputations were also carried out on site.

In 1926 a dental surgeon was appointed, and by now there was an X ray machine (funded by Edward Medley-Costin) and oxygen cylinders had been acquired. In 1927 the annual report recorded that 'The urgent need for a more commodious X Ray Room has been supplied by the conversion and readjustment of existing outbuildings at a cost of £137 11s 4d.' One survives

today, known as the generator shed. A lean-to porch and covered walkway were added at the east end at some stage (these have been removed).

When Edward Medley-Costin died in 1933, he left the hospital £1,000 and a cottage in Dreybury Lane. The second copper plate attached to the fireplace in the entrance hall records his generosity. Winsford Tower and its remaining estate were put up for sale but failed to sell even as separate lots. Another attempt to sell in 1938 also failed, and Winsford Tower remained in limbo until the outbreak of the next war.



Edward Medley-Costyn, Molly's nephew and heir, who took on the running of the hospital trust after her death.

Winsford Cottage Hospital History Album

1933 also saw the arrival of Dr Richard Gwynne (1902 - 1971), a young GP who arrived with his wife to live and practise medicine at The Larches, Black Torrington. He devoted the rest of his professional practice to the area and became 'medical officer and public vaccinator' for Winsford. Patients still settled their accounts with him when they were able, often in kind - a brace of pheasant or a sack of potatoes. The poorest might be let off their charges altogether. During the restoration Dr Gwynne's daughter Katharine Matthews donated his portrait to hang in the hospital. She also provided some examples from his wife's appointments diary, which give a small flavour of his activities:

Thursday 10 May 1933	Dick [Dr Gwynne] to inquest at Halwill Hospital 5.30pm
Monday 29 May 1933	Tea at the Hospital
Thursday 3 July 1933	Mr. & Mrs. Medley Costin called 6pm
Monday 4 Sept 1933	Mr. Medley Costin's funeral 3.30pm
Saturday 12 May 1933	Dick to remove T[onsils]'s and A[denoids]'s (Master James)
Saturday 12 Jan 1935	Sister Francis left Winsford Hospital
Monday 22 July 1935	Winnie, bad finger, opened under gas, Winsford
Thursday 2 Feb 1950	Matron Fairhurst leaves Winsford which is now closed
Thursday 4 Oct 1951	View of Winsford (Tower) sale
Friday 5 Oct 1951	Winsford (Tower) sale
Wed 9 April 1952	Dick to attend meeting at Prince of Wales Hospital, Plymouth to choose a Matron for re-opening of Winsford.



Dr Richard Gwynne, the local GP who attended Winsford Hospital from 1933 until 1971. This portrait now hangs in the community wing.

When war broke out again in 1939, Winsford Tower was requisitioned, first in December 1940 to barrack American troops and later as a prisoner-of-war camp. By December 1944, it was owned by a Frank Sherwood. He seems to have invested in it, for by August 1946, it had re-opened as the Winsford Tower Hotel, advertising:

'First-class holiday accommodation, h & c water all bedrooms; own golf course, trout fishing, 200ft swimming pool, dancing two evenings weekly, chef cooking. Daily trips to the seaside. From 5 ½ guineas.'

Two years later, for reasons unclear, Sherwood's licence was revoked. In 1950 Winsford Tower was once more on the market, but again it appears not to have sold. It was demolished in 1951 and all that remains today are the walls of its garden, revived and carefully tended by more recent owners.

The hospital, meanwhile, survived better than the Medleys' former mansion, and continued to serve the local community. During the war, the patient records show the occasional evacuee admission, but the hospital was not used for convalescing soldiers as during the First World War. Instead, it was developing into a specialist maternity unit. In 1943, 64 out of 78 admissions were midwifery cases; by 1946, all 106 in-patients were maternity admissions. The hospital was overcrowded in these years, often dealing with eleven cases at the same time, and it had to be closed for three weeks in 1946 due to an outbreak of puerperal fever. There was only one midwife ('a most remarkable woman – how she gets all the work done is a mystery to me', a local doctor told the *Exeter & Plymouth Gazette* in March 1946) and an untrained staff. During the 1940s patients paid a normal rate of £2 2s, and £4 4s for mothers once they had given birth, the rate reduced if their husband was in the Forces. The charges for out-patients had not changed since 1925 and still stood at 1s for the first appointment and 6d for any thereafter.

The NHS era

The ending of the Second World War saw a new dawn in health provision. The Labour Party had been committed to establishing a State Health Service since 1934. In 1942, the Beveridge Report recommended the creation of 'comprehensive health and rehabilitation services for prevention and cure of disease.' This was acted upon by the Conservative Health Minister Henry Willink in 1944, when a White Paper was published for a National Health Service offering free healthcare for all, which duly received cross-party support. Legislation was passed for the service to begin in England and Wales from 1946 and in Scotland from 1947. Then Labour swept to power in 1945, and Clement Attlee appointed Aneurin Bevan as Health Minister. It was under Bevan that the form of the NHS finally took shape. The founding principles were that services should be comprehensive, universal and free at the point of delivery. There was disagreement between the parties about whether the NHS hospitals should be nationally owned or administered through existing arrangements with local authorities. The Labour government implemented the NHS as it remains today; a single large national organisation (with devolved equivalents) to which ownership of trust hospitals like Winsford Cottage Hospital were transferred. The new health service was formally inaugurated on 5th July 1948.

Elsie E. Batten of Holsworthy, visiting on 6th Nov 1948, wrote in the Visitors' Book, 'It was a pleasure to visit Winsford Hospital again after having been associated with it as a private hospital for just 40 years. It looked just as it used to, clean, comfortable & attractive. When it is better equipped and brought up to date – as under the new health scheme it ought to be – it will be one of the best Maternity Hospitals in the County. I hope that under the change of management, it will lose nothing of its home-like character.' On 24th August 1952, in a careful but shaky hand in black fountain pen, 'Noel D. Sheffield, FRI, B Archit, of Budleigh Salterton' helpfully recorded his own involvement in supervising 'the

erection of the hospital under the direction of Mr C F A Voysey, the Architect.’ Through the 1960s and 70s, the ‘Hospital Chaplains’ took over the Visitors Book, recording their weekly visits and the number who took Holy Communion.

Many local women still remember giving birth in the hospital. It also acted as a base for local GPs, with an increasing emphasis on care of the elderly. At some stage, probably in the 1960s, the veranda was enclosed and extended to create a flat-roofed sun lounge or day room, a rather ugly thing that eventually leaked, and it troubled no one when it was removed early in Landmark’s restoration; similarly a long porch that had been added to the east door.

During the restoration, several former nurses at the hospital visited on our open days and shared their memories of life at the hospital. They included Carol Stratton, who worked first as a part-time staff nurse and eventually became hospital manager; Rose Martin, who arrived in 1974 initially to make teas for the patients and later became the hospital cook, and Sylvia Langton who arrived in 1980 as an ancillary nurse. Before the maternity provision and then care for the elderly became dominant, Winsford continued to provide for minor procedures like skin grafts, respiratory support, rehabilitation and respite care.



Left to right: Sylvia Langton, Carol Stratton and Rose Martin in 2019 during restoration. All three were long-serving members of the hospital staff. Carol, as hospital manager, locked the door as it finally closed to patients in 1997.

In Carol's words, it did 'massive service to the community, and kept them out of acute hospitals – exactly what a community hospital should do.'

There was a strong team spirit, and a room reserved for a visiting consultant or GP. The consultant came out once a week – 'they were like one of us.' Post-operative patients were sent to Winsford from the major hospitals in Exeter, Plymouth and Barnstaple, and rehabilitation was a key service, with occupational therapists and physiotherapists frequently involved at the hospital. The long corridor was ideal for those finding their legs again after a stroke or surgery and 'the traffic got a bit busy in the corridor sometimes.' The day room (since removed) was a very sociable place: 'if someone had just learned to walk on their frame, all the rest would be cheering, saying "well done" It was rehab on a very personal level.' Rose provided freshly cooked meals each day from locally sourced ingredients, and the food was dished out from a trolley that toured the wards. The hospital was adopted by a big grey cat from a couple of doors away, whom they christened Misty. 'They all wanted him...on the doctor's round, the cat would be all around his legs. He was a major part of the patients' day.'

Inevitably, there were pragmatic adaptations to Voysey's fabric during the NHS years, despite being listing as a historic building in 1978. The golden tiled floors in the corridor had been covered in 'Flotex' carpet as recently as 1997, as the standard recommendation for upgrading the NHS's historic buildings. Lino had been laid in the operating theatre, firmly stuck down onto a hard screed. The partition between the linen cupboard and the operating theatre was removed and a small larder removed to make the kitchen and scullery one room, whose slate floor survives (today this is a treatment room for hire by health and wellbeing practitioners). Two windows, opposite the doors to the children's and emergency wards, were turned into fire escape doors.



Emma Nicholson, then the local Lib Dem MP, leads a Christmas sing-song at the hospital in the 1990s.



Misty the cat, who adopted the hospital and was much loved by the patients.



A few of the many friendly faces that welcomed patients to Winsford Cottage Hospital during the NHS years.





Marjory May
Cook

Margaret Rice
Staff Nurse
1944-9.



Dr Asad Al-Doori from the Black Torrington surgery was a regular visitor at the hospital before its closure.



In 1998, locals travelled to London to join the national protests in their vigorous campaign to save Winsford from closure.

Other changes were also happening in the community during the hospital's 50 years of NHS service. In 1965, after the Beeching Report, the line north to Torrington was closed to passengers, and the line south in 1966. A village hall and its car park now stand on the site of the WW2 railway sidings, with a primary school beyond. The Devon Wildlife Trust bought the disused railway track in 1990 and turned it into a cycle path connecting Halwill Junction to Cookworthy Forest and creating a 6-acre nature reserve.

The hospital continued fulfil its gentle purpose, much-loved by all who were treated or worked there. On 17th March 1995 local MP Emma Nicholson attended an optimistic 'Tree Planting for the next 100 years.' However, within a couple of years the hospital's future was in doubt, a candidate for closure by the North and East Devon Health Authority as part of the NHS reforms in train under the Labour government, led by Frank Dobson as Health Secretary. The impact of Winsford Cottage Hospital's closure was to be tempered by the upgrading of Holsworthy Community Hospital, eight miles away. It was said Winsford cost £338,000 a year to run, and an average cost per bed per night of £61.

There was a vigorous campaign of local protest, their bitterness captured in this comment from a frustrated local doctor in the Visitors' Book on 5th June 1997:

'Yet again petty minded, short sighted bureaucrats threaten this working community hospital. They have no concept of the implications in terms of the people of our community or even the knock on effect on beds and service in Barnstaple.'

The campaign was initially to save the hospital's valued services and locals marched in London as part of more widespread protests about such closures. Local people formed a League of Friends chaired by Sandra Willetts and worked alongside Age Concern for Okehampton and Torrridge, arguing that the NHS had no right to sell a building endowed upon the community.



Winsford Hospital found a new community role and vitality under the Winsford Trust, with the annual Christmas party a particular highlight. The day room, the flat-roofed extension added to the veranda in the 1960s provided a room large enough to gather in.

That it was by Voysey attracted other supporters among architectural historians and campaign groups (the campaign to save Winsford Cottage Hospital led directly to the formation of the Voysey Society).

Despite this campaign, the hospital was put up for sale on the open market 1998, for a price range of £160-180,000. There was fury in September 1999 when the local Health Authority were said to have removed original fittings from the building 'with the declared barbarous intention of displaying them, out of context, at Holsworthy Museum', according to the *Western Morning News*.

Landmark was already aware of its significance as Voysey's only cottage hospital and even put in a cautious offer (a very rare event for the trust). However, in the nick of time, the League of Friends raised the deposit and with the help of individual supporters, charities and especially the Tudor Trust, they were able to buy the hospital in order, through the newly formed Winsford Trust, keep it in community ownership and use. The Health Authority were found to have removed all modern fittings, even the baths – but happily many of Voysey's original fittings were left in situ.

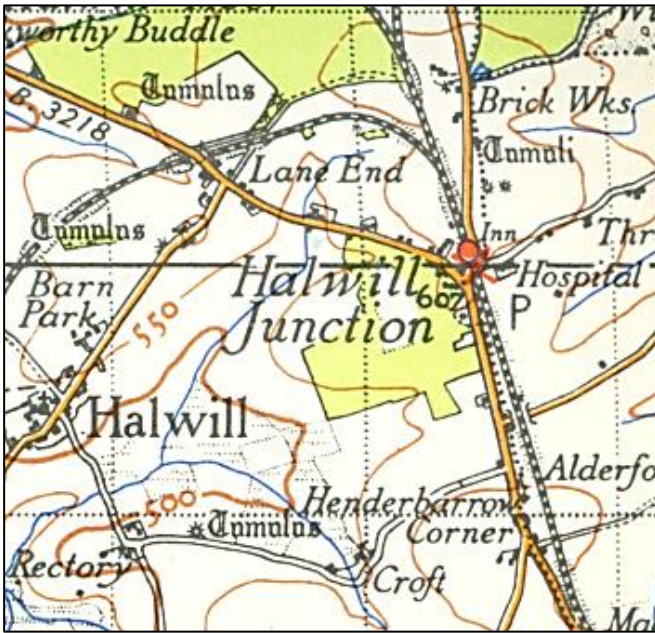
The Winsford Trust soldiered on for more than a decade. Every form of community re-use was tried. A catering kitchen was put in to host a weekly lunch club for over 55s, and a bath with a lift was installed for the frail elderly. Consulting rooms were proposed for the Benefits Agency and Citizens Advice Bureau. An IT suite was installed, to help local farmers and others stay abreast of changing technology. Local GP Dr Asad Al-Doori, who had been a prominent campaigner against closure, established an outpost surgery, and ran a weekly prescription drop-off service. The centre was used by toddlers, Brownies and the Halwill History Society, and there was a popular annual Christmas party in the day room.

All the while, the building's fabric was deteriorating and it had become clear that for all the triumph of saving the building for the community, its long-term future was unsustainable under the current model. Rising energy costs mean it was not even possible to offer the lunch club because the cost of running the antiquated heating system had pushed the price of lunch beyond what the diners could afford. By 2007, this advancing dilapidation and lack of income forced a more realistic view of the building's future. A temporary reprieve came in form of grants from English Heritage in 2007 to cover the initial costs of survey and investigation ahead of repairs, and from the Pilgrim Trust in 2011 to help with administrative costs. A new biomass boiler was installed with a major grant from LEADER4 (a rural development initiative funded by the EU and DEFRA), topped up with grants from local councillors and others.

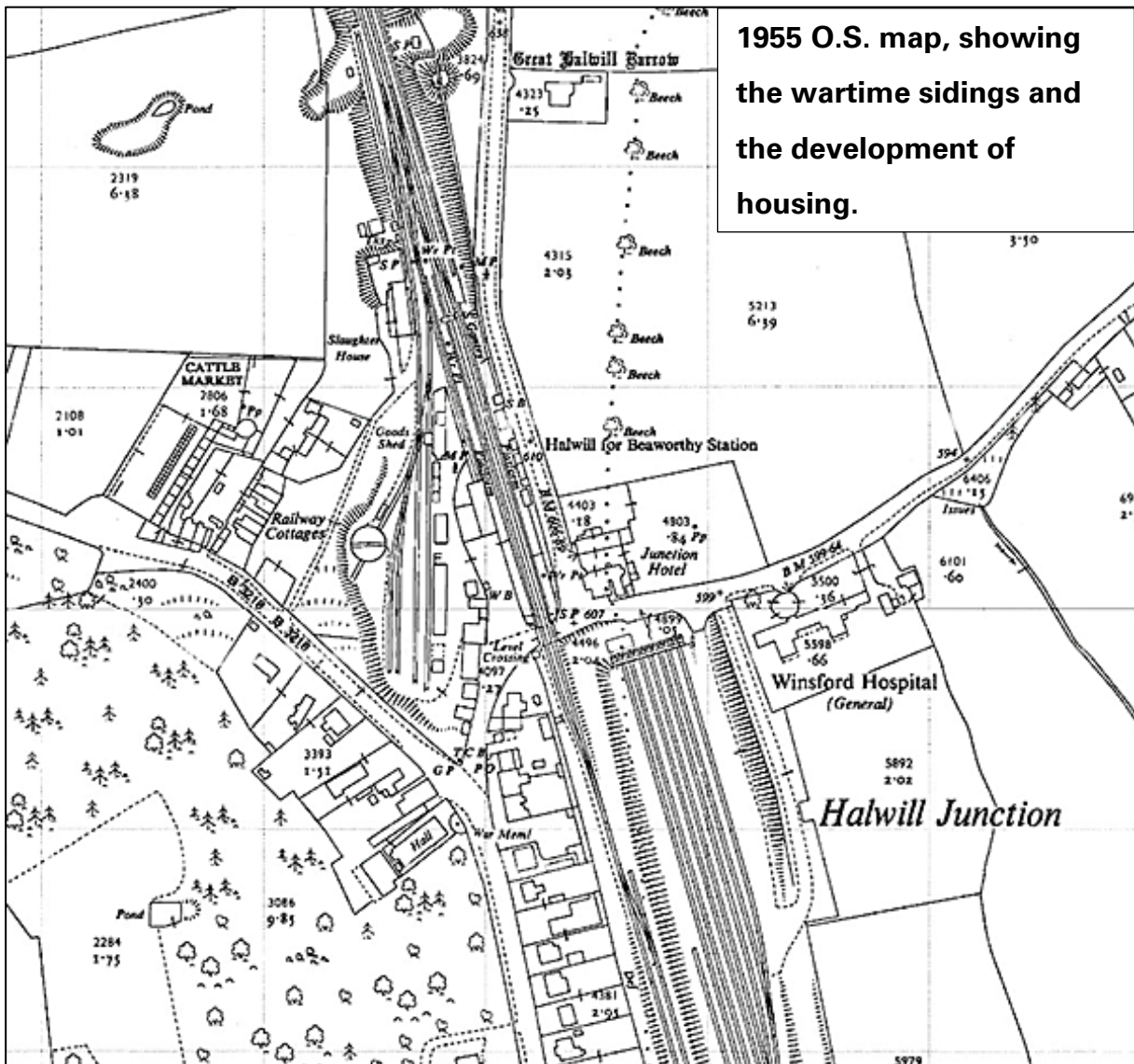
Eventually, the Winsford Trust had to face the hard choice: relinquish the building to others or see it decline beyond repair. They were keen to keep some kind of public access and, with the Grade II* building by then on the Buildings at Risk register, in 2012 their chairman, Dr Raymond Ward, contacted the Landmark Trust as a last resort. More than anyone, Ray had worked tirelessly to ensure the building's survival and he was invaluable as a link with the hospital's recent past and for knowledge of the building. While the project took several years to take shape and come to fruition, Landmark realised that the cottage hospital would make a wonderful place to stay, and that we could at the same time find a way to respect the wishes of Molly Medley's noble gift and of the Halwill community today. We decided to reserve the east wing for use by the community for talks and meetings, and for an information room about Voysey's work and the hospital's past. Another room off the east corridor is hired out for light therapeutic and wellbeing uses. We then set about raising the repair costs. Thanks in part to this willingness to consider the needs of local residents as well the building, Landmark was able to secure our first ever Heritage Enterprise grant towards the hospital's restoration, from the National Lottery Heritage

Fund, with the rest of the money raised by public appeal among our many supporters.

With this plan and full funding in place, the Winsford Trust transferred the freehold to Landmark in February 2018. The Winsford Trust was delisted as a company in 2019, initially intending to continue as a small unincorporated charity. However, in passing the hospital over for restoration and a sustainable future under Landmark's care, it had effectively achieved its charitable purpose and transferred its sole asset. Unable to find a further community need to address not already met by other means, the trustees concluded that the most sensible course was to wind up the Winsford Trust. Its few remaining funds were distributed appropriately within the community, and Molly Medley's hospital began the next chapter in its life.



Early 20th-century map, showing Halwill Junction as simply a



1955 O.S. map, showing the wartime sidings and the development of housing.

Halwill Junction: outline history of its railways ¹⁶

The Halwill-for-Beaworthy Station opened in 1879 and became an important junction between the Bude Branch and the North Cornwall line. It closed in 1966 along with all the lines it served, a casualty of the Beeching Report. A housing estate stands near the site of the station, on a road named somewhat ironically 'Beeching Close' after the British Transport Commission Chairman, Dr Richard Beeching, on the basis of whose report the station was closed.

The Junction Inn (formerly the Junction Hotel) remains, close to where the level crossing used to be. A gradient marker stands outside, and inside there are several photographs of the former station. (While the Halwill Junction inn is clearly not designed by Voysey, as an aside, he did in fact design a railway inn in Leicestershire, in 1895. This was the Wentworth Arms at Elmesthorpe, where he also designed a row of workers' cottages, Wortley Cottages (today much altered). The client for both was local landowner Viscount Ockham, Baron Wentworth, for whom he was also working in Surrey at the time.)



The Wentworth Arms, a railway inn in Elmesthorpe, Leicestershire, and Wortley Cottages in the same village, were both designed by Voysey.

¹⁶Thanks to Kevin Waterfall, one of the volunteers who helped clean the mosaic floors at Winsford, and Landmarker Graham Thorne for their notes towards this chapter.

Development of the North Devon & Cornish railways (not to scale)

1879: LSWR to Halwill & Beaworthy Station

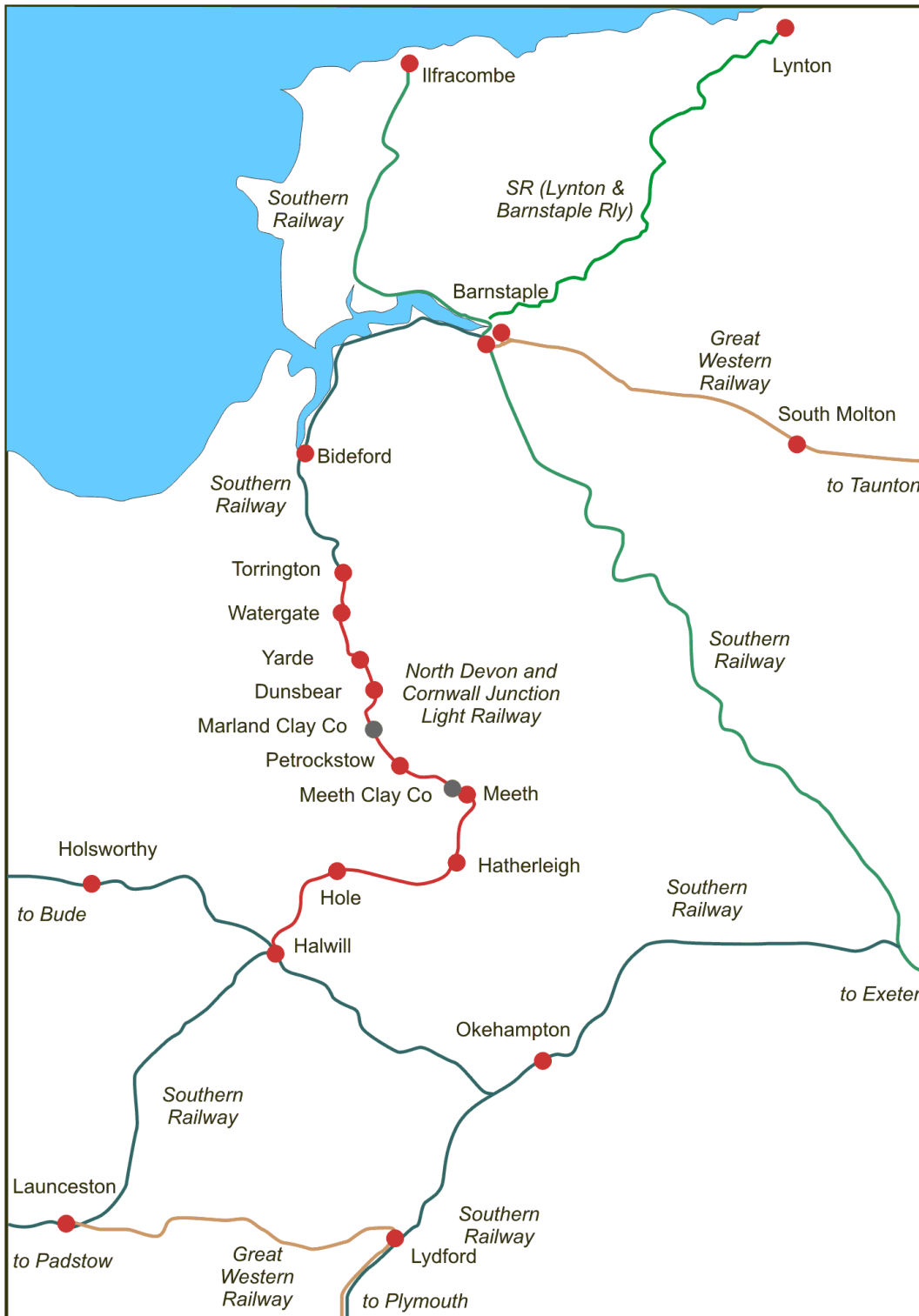
1886: LSWR line to Launceston

1898: NCR line to Bude

1899: NCR to Launceston to Bude

1925 Halwill to Torrington





The Halwill station was opened in January 1879 by the London and South Western Railway (LSWR), as Halwill-for-Beaworthy. The South West was a potentially lucrative territory and the LSWR continually competed with the Great Western Railway (GWR) to be the first to build a line in a new area.

The LSWR existed from 1838 to 1922. Starting as the London and Southampton Railway, its network extended from London to Plymouth via Salisbury and Exeter, with branches to Ilfracombe and Padstow, and other routes in Dorset, Hampshire and Berkshire.

In the south west, with the support of nominally independent local companies, the LSWR reached Lidford (now spelt Lydford) in Devon in 1874. This gave it access to Plymouth over the South Devon Railway, and in 1879 it built a branch from Meldon Junction, west of Okehampton, skirting the northern edge of Dartmoor to Holsworthy on the new Bude Branch.

In March 1887, Halwill became a junction station with the construction of a line south to Launceston by the North Cornwall Railway. The North Cornwall now had a direct through route over LSWR rails to all the way to London Waterloo. The station now became known as Halwill Junction from March 1887.

Now the LSWR had the opportunity to enter Cornwall, and to connect with its isolated Bodmin and Wadebridge line. Supported by the LSWR, the North Cornwall Railway Company was formed to develop the northern part of the Cornish peninsula. Its line left the Holsworthy line at Halwill and continued the 49 miles (80 km) through Launceston to Wadebridge. The Great Western Railway (GWR) already had a station at Launceston, opened in 1865, and so the North Cornwall Railway station was built adjacent to it. At Wadebridge, the line joined the Bodmin and Wadebridge line; the original station had been expanded when the GWR line from Bodmin was opened in 1888.

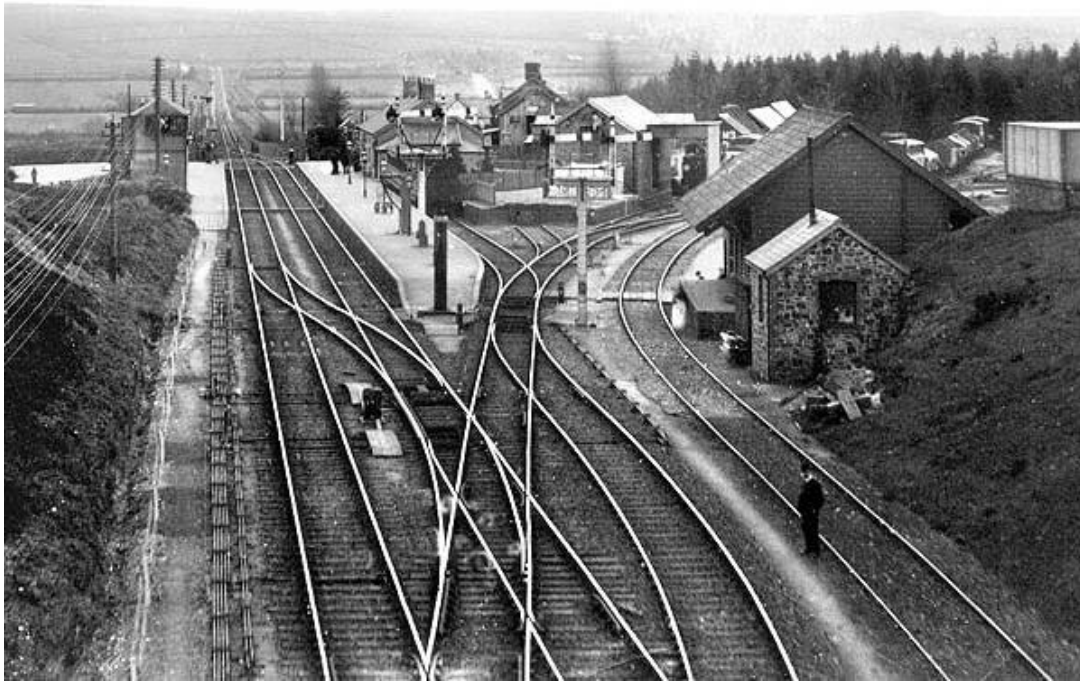
By the close of the century both lines had been extended. It took until August 1898 for the railway to reach Bude, enhancing its prosperity as a watering place

and holiday destination in the closing years of the century. The North Cornwall Line similarly reached Padstow only by 23 March 1899.

A third route north towards Torrington was opened on 27 July 1925 by the North Devon and Cornwall Junction Light Railway. This was served by a separate uncovered platform outside the main Halwill station building. The station now became officially known as Halwill, although its running-in board provided a fuller description of the routes available, proudly announcing 'Halwill for Beaworthy, Junction for the Bude, North Cornwall & Torrington Lines.'

Meanwhile, great changes came to the organisation of the railways with the Railways Act 1921. This amalgamated the railway companies of Great Britain into four 'groups'; the new Southern group was to include the LSWR as a 'constituent', and the North Cornwall Railway was to be absorbed. This process took effect at the start of 1923, although technical requirements meant the official transfer dates varied.

Further change came after the war, when the railways were nationalised as British Rail under the 1947 Transport Act. As prosperity grew after the war, increasing car ownership meant a rapid decline in passengers on the railways, and this led to the eventual closure of short and mid-distance branch lines after the Beeching Report. The remote sections of routes in the southwest peninsular were inevitable targets, and one by one they were closed. Halwill's line north to Torrington closed to passengers on 1 March 1965 and those to Bude and Padstow on 3 October 1966. The line north did, however, remain open between Torrington and Barnstaple for freight until 1982.



**Top: Looking north from Halwill Junction in the 1930s.
Below: The sidings during WW2: a Howitzer railway gun in 1944
The eight wartime sidings must have made the hospital very noisy.**

Passengers and services

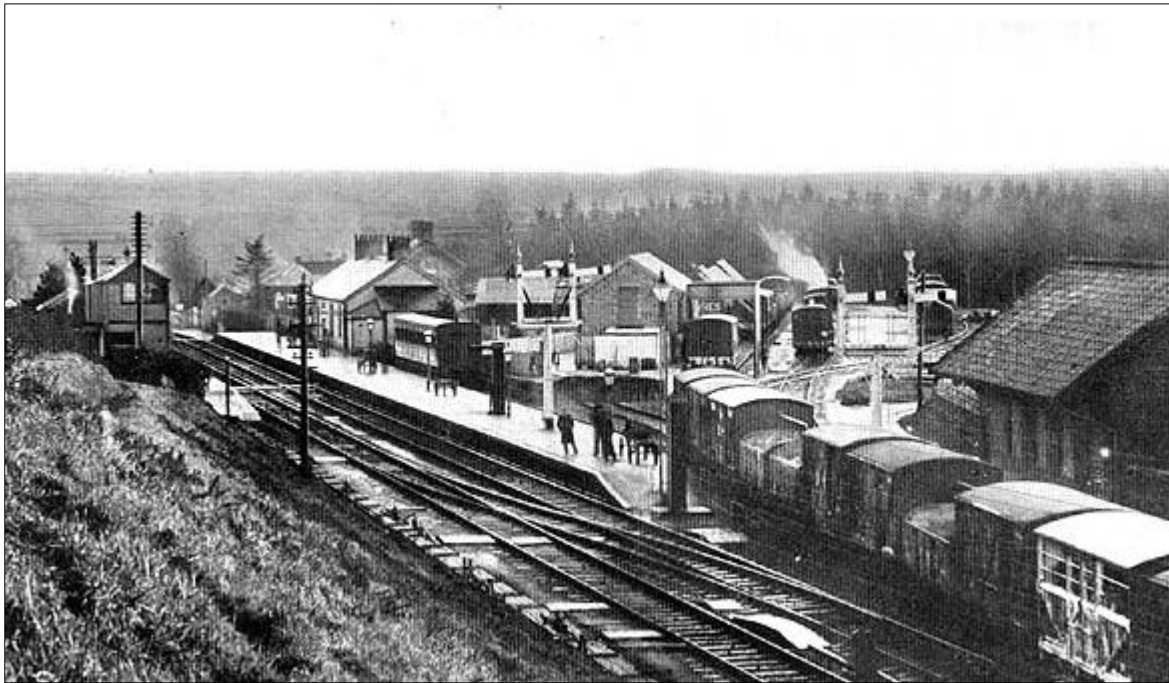
In Halwill's heyday, the most important train each day was The Atlantic Coast Express, or the ACE, which left Waterloo at 1035 or (later) 1100. It ran non-stop from Exeter St David's to Halwill, called at Holsworthy and arrived at Bude at 15:25. In the summer season, the ACE often ran as several trains to meet demand; otherwise, the train was split into its various sections at Halwill Junction on the Down and re-amalgamated into one train on the Up.

By summer 1958, seven stopping trains operated from Monday to Friday between Okehampton and Bude, with one of them conveying through coaches from London Waterloo. On summer Saturdays, three of the same seven stopping trains had through coaches from Waterloo, and most trains included through coaches as far as Padstow, usually coupled in front of the Bude coaches on the Down. Bus connections were also advertised to connect with the long-distance train services, from Bude to Widemouth Bay, Stratton and Marhamchurch, operated by Southern National. On the face of it, the south western services represented an effectively integrated transport network to far flung towns and villages. But it was not economic to run, and so exactly the sort of network for which Beeching recommended closure.

Most of the year, Halwill Junction was not exactly a bustling interchange. Summers of course were busier with holiday traffic, but for most of the year, bursts of frenetic activity when one of the large express trains pulled in alternated with long periods of quietude. Out of season, the children in the hospital ward can still not have had a great deal of entertainment from the trains. Railway enthusiasts came to call the Southern Railway's lines west of Exeter 'The Withered Arm', as conjured in T. W. E. Roche's book of the same name.

'It shunned the great tourist resorts of the south and sought out the high places and the lonely places; no other main line could look directly up to the towering peak of Yes Tor, no other railway called one of its engines

after it. It was the Dartmoor main line but it was also the railway which penetrated into King Arthur's land and two of its small North Cornwall stations are immortalised in Betjeman's poetry.'



Halwill-for-Beaworthy station: periods of expectation alternated with times of sudden activity when the trains arrived.

Probably the quietest line from Halwill was the link north to Torrington, the North Devon and Cornwall Light Railway that opened in 1925 with government subsidy. It was primarily built to serve numerous ball clay pits that lay between the LSWR's Torrington branch and Halwill. The ball clay had previously been transported by a 3 ft (914 mm) gauge tramway, and it was the expanding capacity in the pits that prompted conversion to a light railway. Passengers were carried as well as clay, but these were mostly workers at the pits, the passenger coaches coupled with goods wagons. Public passengers had to wait while goods were shunted off or brought up at intermediate stations. It was never profitable, and became a byword for its slow services and deserted stations. Here's conversation recorded by railway author David St. John Thomas in *The Great Days of the Country Railway*:

"Do I have the train to myself?' I asked the passenger of the guard, whose face looked as though it had been chiselled out of red marble, as the single coach was leisurely hauled towards Hatherleigh by a brand new British Railways Standard 2-6-2 tank locomotive.

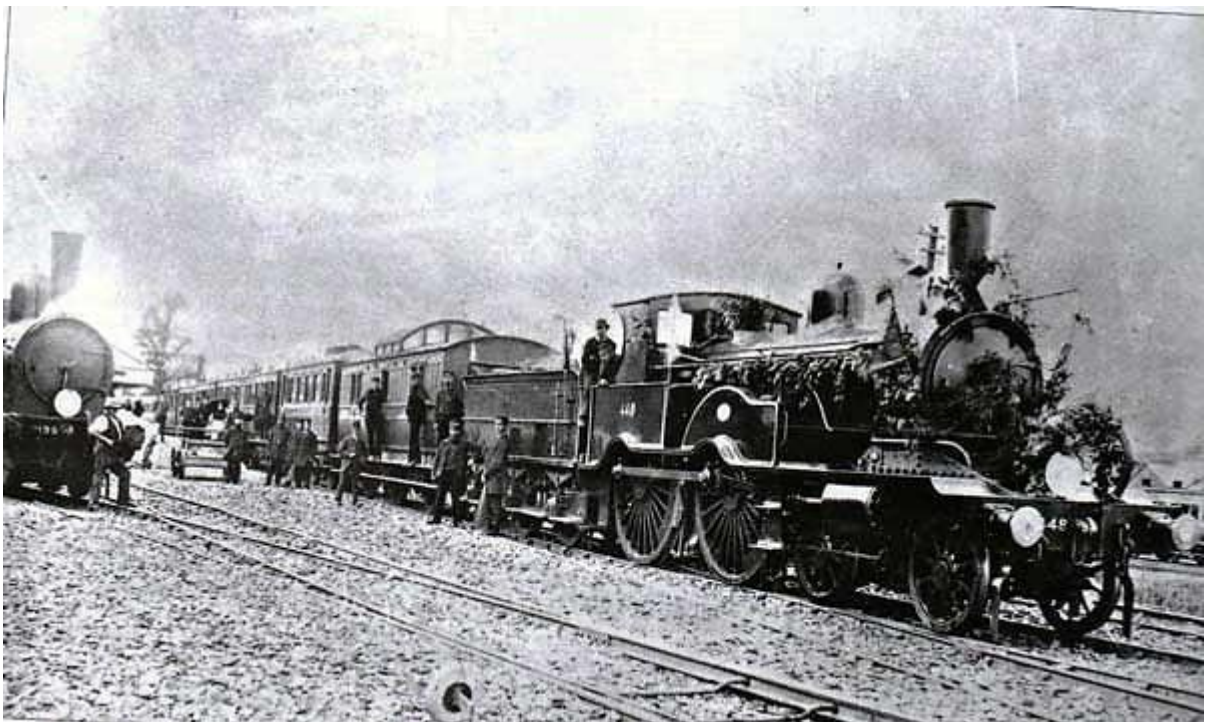
"Yes", said the guard. "But you can't count on it. On Wednesday we took Mr and Miss Thomason to Halwill. They were going to Bude, you know. They'll be back sometime next week." After a puff on his pipe, he added thoughtfully: "We do have passengers, you know."

Halwill was at its busiest in the period up to, and even during, the Second World War, when eight sidings were laid by the Americans to deal with the military traffic in the lead-up to D-Day. It still relied, as did the lines which it served, to a large extent on summer holiday traffic. By the early 1960s, this summer activity was still busy but the rest of the year had dwindled, and closure was inevitable. Today, the US army sidings have become a playing field and the line of the railway used for leisure trails.



Halwill Junction station, with Up freight. View northward, towards Wadebridge and Padstow on the ex-LSW North Cornwall line, also the branches to Bude and to Torrington. The train is headed for Okehampton and Exeter, hauled by SR Maunsell N class 2-6-0 No. 31845 (built 9/24, withdrawn 9/64).

Ben Brooksbank



Adams 445 class 4-4-0 No. 448 at the opening of the LSWR line to Launceston on 21 July 1886.

Winsford Cottage Hospital before restoration, in 2013



Note the sun lounge or day room between the wings.



**Top: The corridor, the mosaic floor concealed beneath 'Flotex' carpet.
Below: The former men's ward in the east wing, today a community meeting**



**Top: the entrance hall.
Below: The former women's ward today's sitting room.**



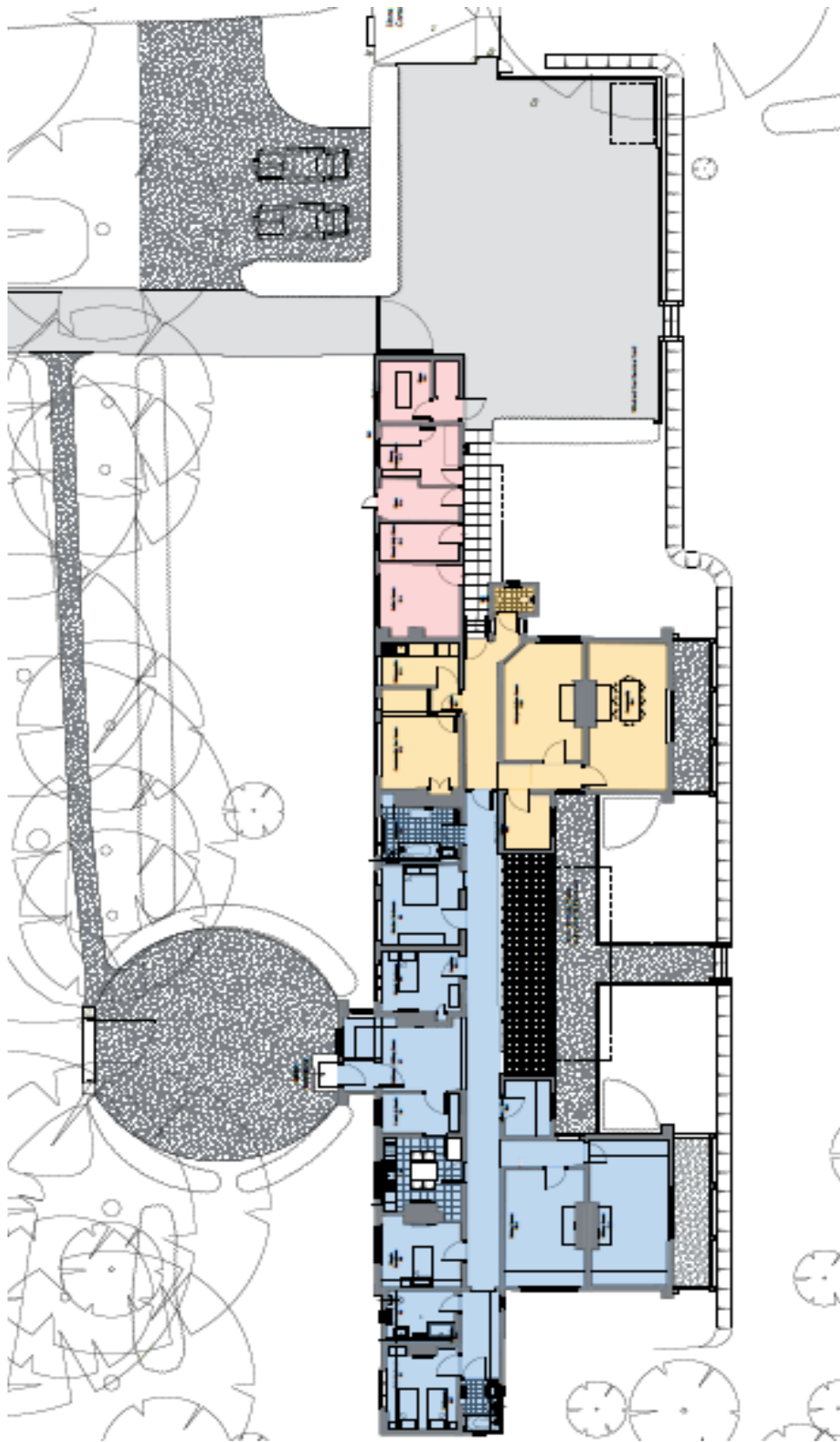
The Winsford Trust had tried every kind of use: a computer room in the former children's ward and a catering kitchen to provide lunches for the elderly.

Restoration of Winsford Cottage Hospital

Work began on site in autumn 2018. Before that, much preparatory work and research had been done, while dilapidation galloped on. The Winsford Trust had commissioned a Conservation Plan from Keystone Historic Buildings Consultants in 2012 that still proved invaluable on the fabric and history of the building, and Landmark adopted its recommendations with only minor amendments. In 2015 Landmark commissioned a Project Evaluation Report from Van der Steen Hall Architects, which provided a detailed gazetteer of the building and its condition, and re-affirmed that the building itself had changed remarkably little from Voysey's own plans, other than:

- early extension of the west end of the corridor and the addition of the glass canopies at the end of the wings (both in place by at least 1914)
- the mid 1960s day room (now removed)
- a covered walkway added along the outbuildings at the east end (now removed)
- the conversion of two windows in the angles of the ward wings to fire escape doors (now returned to windows)
- A few easily reversible modern partitions (now removed)

We did not know how extensive the survival of the mosaic floor would be, nor what its condition would be once the carpet and lino were lifted. Conservation consultant Lynne Humphries came up with a detailed methodology and was cautiously optimistic that the tiled floor could be retrieved, although warned that it would be a very time intensive job. Lisa Oestreicher's paint analysis confirmed the use of Voysey's signature green and white colour scheme had been used as the earliest decorative treatment, which led to the interesting observation that we are more used to seeing the *faded* version of Voysey's favoured Brunswick Green than the darker original. Eventually, we were able to identify the curtain designs Voysey ordered for Winsford from the original order book, and to make sure that the curtains were given the red lining that Voysey favoured for his domestic houses, for an external appearance that was both consistent and invitingly cosy.



The hospital as divided today. Blue = the Landmark, yellow = community areas and treatment room, and pink = service buildings.

We scrutinised Vosyey's other buildings for his treatment of roofs, gates, fireplaces, tiling colour and layouts, and so on. On the basis of all this groundwork, the Landmark project team summarised our philosophy of repair as

'the return of the building to its pre-1914 state with minimal adaptation or intervention, respecting and prioritising Voysey's primary floorplan, fixtures and fittings throughout as we occupy part of it for Landmark use. We will respect the homely cottage scale and atmosphere intended by Voysey in finishes and furnishing.'

We also committed to providing a community meeting room in the former men's ward on Voysey's work and the cottage hospital, an interpretation room in the former accident ward and a treatment space for hire by health care professionals.

Benjamin & Beauchamp Architects were appointed as architects, and local contractors J. E. Stacey & Co of Holsworthy as contractors. Quantity surveyor Adrian Stenning was brought in to project manage on Landmark's behalf, at a time when the in-house Landmark surveyors' workload was particularly busy. An ecologist's survey identified the presence of bats, but happily not presenting major implications for the scheduling of works. We then obtained the necessary permissions for the change of use and the repairs proposed, and the contractors finally went on site in July 2018.



The building was entirely scaffolded as work got underway in autumn 2018.

External works

Once the building was scaffolded, re-roofing was the first priority. The whole roof was stripped a slope at a time, and it was discovered that some 25% of slates needed replacing, many of them very large indeed. The slates are thought to be Cornish Delabole, although one third party suggested that their 'rusty' marking meant they could be Trevillet slate, for which there were quarries even closer by in the 1900s. In the event, the difficulty of finding a match from any current Delabole quarry beds led to a decision to source salvaged north-Cornish slates instead. The slates had been nailed onto battens fixed to diagonally-laid sarking boards, an arrangement we have kept. Above the sarking boards a layer of horsehair matting was found, and this has been left in situ for insulation. The chimneys required thorough repair, to the underlying brickwork as well as the render. New clay chimney pots were made to match the existing, and flue liners were put in to serve the working fireplaces.

Other areas of the cementitious pebbledash favoured by Voysey were also found to have failed across the exterior and these were removed, providing further evidence of an extension to the west end beyond that in the roof space. The patches were re-done using a lime base, which necessitated repainting the whole in a breathable Keim paint finish.

The wooden structure of the canopies at the ends of the wards had rotted badly and had to be completely renewed. The fact that their position means that they snag Voysey's window frames suggests that they are not primary, but they are shown in Rifleman Gilmour's painting and also provide a useful weather shield. Once the day room had been removed, it was found that the glazed tile floor of the veranda survived, and this was cleaned off. Early photographs show a simple bench beneath the windows under the veranda as well as Voysey's high backed slatted one; we have replaced the former, and added an outside table.



**The day room has been taken down. Note the fire escape door, now returned with its fellow opposite to windows.
Below: stripping the Delabole slate roof. The original sarking boards, battens and horsehair insulation survived but were leaking.**



The fire escape doors were transformed back into windows they had originally been. These little windows appear rather awkwardly crammed into their corners, but were shown on Voysey's original design and their stone surrounds had simply been pebbledashed over when the escape doors were inserted. All the rainwater goods were overhauled and, predictably, were not a standard design: Voysey's gutters have a beading on the upper edge. It was decided to use a similar, but standard, cast iron guttering for the service wing.

On landscaping, we have retained the 'shrubbery walk' along the northern boundary of the site, an early feature perhaps used in part for patient rehab. The turning circle has been relaid and a new parking area created at the community end. New gates have been hung at the front of the hospital. Several large Leylandii were removed from the southern hedge.

Internal works

Internally, the use of modern non-breathing paints had caused extensive failures in the plaster on the walls, far greater than originally anticipated. The paint proved impossible to remove and large areas had to be stripped and re-skimmed with non-hydraulic lime plaster to give a crisp surface. The works to the plaster also had an impact on the picture rail and skirting repairs.

The NHS radiators were removed and replaced with cast iron replacements, fed by the Winsford Trust's recently installed wood chip boiler, which we saw no reason to replace. Wooden kick boards, proved to have been installed in the wards only in recent decades to prevent low level damage from the hospital beds, were removed and not replaced.

The Hatherleigh stone window surrounds had been painted internally with a heavy layer of gloss paint that proved very hard to remove.



The chimney stacks needed considerable work, and were re-pointed and re-rendered. New clay chimney pots were specially made by a local potter to match the originals.

Below: a lot more re-plastering was required that we had realised.



The horizontal window members are vertically tooled and the mullions horizontally tooled in a decorative effect, suggesting the stonework was meant to be exposed originally (a treatment favoured by Voysey in his other buildings). The tooling made the paint removal even harder. After various trials, soda blasting was found to be the most effective and economic, and the least aggressive, technique. As it is also messy, much of this work was done at weekends.

A great deal of thought went into the fireplaces. The hearths in the wards had been boarded up and their Voysey fireplaces removed. Replica cast iron replacements had to be commissioned. The tiled surrounds also prompted much head scratching. Although we had the entrance hall fireplace as a model, not all its tiles were thought to be original and its grate had clearly been altered over the decades. It was not 100% clear whether the green tiles in that fireplace were Voysey's originals. The more we scrutinised photos of his other fireplaces, the more we realised that he used both square and rectangular tiles on occasion, and seemed to vary his setting-out pattern at a whim. On balance, the hall fireplace seemed the best evidence we had for the tiles and so this formed our model. However, the tiled area for laying out the tiles around the ward fireplaces was limited by the physical evidence of the timber mantelpieces, which are primary. This meant a two-dimensional Rubrick's Cube exercise across the dimensions of the best match tiles and the grouting joints necessary to fill the spaces. The result are our careful best effort, as are the mottled green tiles, of tiles in production today .

We had inherited a woodstove in the entrance hall hearth when we took the building on, but previous staff vividly remembered a hooded copper fireplace from at least the 1960s (they had to polish it). We had one specially made by Inspired Metals of Chard, of beaten copper with repoussé hearts (a technique under which a motif is hammered into relief from the reverse side).



Removing modern gloss paint from the tooled Hatherleigh stone window surrounds proved very difficult and was finally accomplished by soda blasting.

Below: recovering the original form of the previously boarded up fireplace in the sitting room.



Undoubtedly the biggest challenge of the entire project was the recovery of the mosaic floors from beneath the hard screed laid over them in the 1990s, to fix Flotex carpet on an additional layer of adhesive. This ran along the corridor and into the west end bathroom. This cementitious screed was up to 6mm thick, and we were initially uncertain how much of the original floor survived beneath.

Various trials were done first on how to peel back the carpet and then how to remove the screed and adhesive. The carpet came away quite easily, and it was found a poultice could deal with the adhesive. For the screed, the inescapable conclusion was that painstaking removal by hand was the only way to avoid causing further damage to the floor, which was found to be generally sound beneath apart from isolated areas. We owe a huge debt of gratitude to a loyal band of volunteers for this, a few of whom had also worked on tasks at other recent Landmark projects. Guided by the conservator's recommendations, over three weekends, this loyal band chipped away at the screed with hammer and chisel, piece by piece. A delicate touch was needed to avoid damaging the underlying tesserae – of which we estimate there are more than 550,000, covering some 140m² of floor. The volunteers' generous offering of hundreds of person-hours of work, mostly at times when the contractors were not on site, meant far more than mere (if substantial) monetary value.

The tiles are a fine-grained porcellanous limestone and mostly impervious, making them ideal for an oft-swabbed hospital floor. They are uniformly about 12mm in surface area, although surprisingly variable in depth, suggesting that they were laid in sheets applied to the top surface of the tiles so that the soft bedding took up the variation in depth to give the even top surface.

Once cleaned, further decisions had to be made about where to replace tiles and where to let the signs of wear remain – the scuff marks around the window seats in the entrance hall (which doubled as a waiting room) are especially evocative.



Cleaning off the floors under guidance from the conservators was a Sisyphean task, made better by the volunteer team's camaraderie and sense of pride when the transformative task was finally completed – 'we did that!'



**Top: the new canopy framing in place and awaiting glazing.
Below: re-landscaping, with the veranda trellis supports reinstated.**

Only about 2.5m² of the 140m² needed to be replaced in the end. The original tesserae may have come from Cornwall, but the best match we could find today was Giallo Siena Uniforme marble. Black Connemara marble was sourced for the dark band at the top of the upstand.

The floor was then cleaned; we have accepted and left areas of slight unevenness as the signs of wear during the hospital's life. Apart from sealing, we have otherwise mostly left the floor as it is, a gentle witness to a century of social healthcare. The volunteers also helped with other tasks, such as clearing the building in the first place and also tidying the landscape.



Staff and pupils from Halwill Primary School with their remembrance wreaths.



Prince's Foundation apprentices Chris Topley and Kit Godfrey working on the design for a gate in Voysey's style.

Engagement activities

Thanks to the National Lottery Heritage Fund's support, we were also able to offer various other activities during the project. Two apprentices from the Prince's Foundation worked on site and made an oak gate to a design based on Voysey's own gate designs. Masonry classes were held for students from Yeovil College, and there were also short courses for blacksmithing and furniture making. During the latter, a chair was made to a Voysey design.

The most painstaking volunteer contribution was chipping away the hard screed piece by piece to reveal the golden mosaic floors. This awkward and time consuming task was undertaken over several weekends, when we could have access to the corridor without getting in the contractors' way. Quite simply, it couldn't have been achieved within budget or on schedule without the help of these volunteers, and we are especially grateful for their dedication.

Frequent open days were held, including a moving ceremony to mark the 100th anniversary of the end of the Great War in November 1918, when contractors joined children from the local primary school to perform a song specially written by Wren Music. In a moving event, the children assembled a wreath of poppies, while the names of the 300 or so soldiers who were treated at Cottage Hospital were read aloud. Trees were also planted to mark the moment, despite torrential rain on the day.

Our open days have been enlivened by First World War re-enactors and lime demonstrations, and we have hosted many visits by specialist groups during the project, including the Voysey Society who were given the chance to comment upon our interpretation material.



Volunteer Aaron has a go at blacksmithing.



Top: Yeovil College students came to site to learn masonry skills. Below: A short course in furniture making techniques. It culminated in the creation of a chair made to a Voysey design, now on display in the community end.

Some experiences of a country practitioner written by Archibald Houghton Brown in 1942

For six years I did a practice in the suburbs but did not like it, so bought a practice in mid Devon (Witheridge) and loved it. It was eight miles from a station and ten from a town (Tiverton); the nearest doctor was eight miles away. No telephone, no electric light, no motors, this was thirty years ago (actually 1907 – 1919).

I found the Devon farmers a very good lot and would do anything for you when they once knew you, but you had to put up with a lot in many ways. It was very hard work to get anyone to go into a hospital, they all had a dread of it, so one had to do all minor ops oneself. This was Sunday mornings as a rule, with dentistry as well. Any very bad accidents had to be sent in a cart or wagon to the hospital (probably Exeter).

I rode most of my rounds, the roads or tracks into the farms were too rough to drive. I kept four horses going as I often did thirty miles a day and always hunted on Saturdays with the Stag hounds.

One thing I found was that the Devon people were very superstitious. I will tell you some things they did.

A child with whooping cough was taken up the road until the mother came to a cross-roads, then the mother turned sharp right and the whooping cough went straight on! Child cured.

I found a man with a very dirty bag tied round his neck, inside was a toad's leg, to keep off King's Evil.

I was attending a boy with jaundice and had given him some calomel. I called next day and the mother told me she had cured him. I asked her how she had done it. 'Well' she said 'I took some of his water and mixed it with some oatmeal and put it in the oven and made a good cake'. 'What did you do then? I asked 'I gave it to the dog to eat and that cured my son, and you ought to let the big London doctors know how to cure jaundice.'

I was called into see a woman with a big abscess of the breast; when I came to clean it up I found a large garden worm in it. This was an old way of curing an abscess she told me.

I put a thermometer in a farmer's mouth one day. He looked at me very hard for some time when I took it out and said 'I don't feel no better for that'.

In the winter I always had an assistant, but it was very hard to find one that could ride, they always said they had ridden. I would send them out the first day with a groom, or my wife, to show them the way about for a short round of about fifteen miles. Next morning they would stand to eat their breakfast and ask if they could drive! They might stay a week or two and then go – much too much like hard work.

Now I must tell you about a bad day and a good one. A day in the winter with snow about a foot deep. I started out to drive to a village over the moors about twelve miles away. When I got on the top of the moors the snow was too thick to drive on, so I told the groom to drive back to a village and wait for me. I then started to walk and got along the banks and so down to the village. I keep drugs in a room at the Pub; I saw my patient and then had a message to go on to the next village about two miles on. They had cut a path through the snow; so on I went, saw my patient and then the farmer said it would be much shorter to go back over the moor as I knew the way. I started off, it was snowing hard and going across the moor I fell into a snow drift, having forgotten that a cutting had been made into a chalk-pit, it was very deep and took me a long time to get out. Luck had it that I had a flask of whisky with me, after a dram off I went again and got back to the village only to find my groom had waited a long time and then gone home. So there was nothing for it but to walk. Got home about 12 o'clock very tired, good supper and a hot bath and quite bright next day.

A good day – Nov 30th 1917. Coming home after being out all night at a confinement, it was just getting light as I rode down a lane when a stag crossed just in front of me. He was a Royal, all his rights on top. I saw him go into a small plantation. So I waited a bit, then got off my horse, tied him up and walked round the plantation. I could not slot him, so I knew he had not come out.

I rode home, saw some patients and then rode to the meet of the staghounds. It was war time and no-one turned up except the huntsman with his pack. He said 'what are we going to do Doc?'. So I told him I had harboured a big stag about a mile away and we must hunt him. So off we went and put all the pack on, they got onto him at once and he very soon broke cover and away we hunted him for five hours right down to the river Tor. We lost hounds once as they went through a park and the gates were locked so we had to go round. After the stag was killed a farmer asked us in to have a drink, so we gave the horses some gruel and a good rest. We started home in the dark, I whipped in. It was a long ride back to kennels, about twenty miles. We did stop once and woke the landlord up at a Pub. He came down and gave us a good hot toddie. After I had

the hounds in kennel I got off home, another ten miles and got into bed at one o'clock.

Anyone practicing in Devon now would find it a very different thing, good roads everywhere, every farmer has his motor and most villages on the telephone; this is, I think, a curse as in the old days a farmer would think twice about going for the doctor when he had to ride, now he only rings at any old time and its very trying when you have had a long day and perhaps have to go over the same round again.

Of course there was very little society and my wife often drove ten miles to play tennis and we only had a motor for a very short time as the roads were so narrow and bad and very cut up by the timber hauling during the war and most of the farms a mile off the proper roads.

We drove an American trap generally, just two wheels, a seat and footboard. Beautifully light. I had an American trotter part of the time, and also drove tandem it was all great fun.

Christopher Houghton's Brown transcription of his father's script(both absolutely illegible) transcribed by Archie's great grand-daughter Lois Houghton Brown .

May 2020