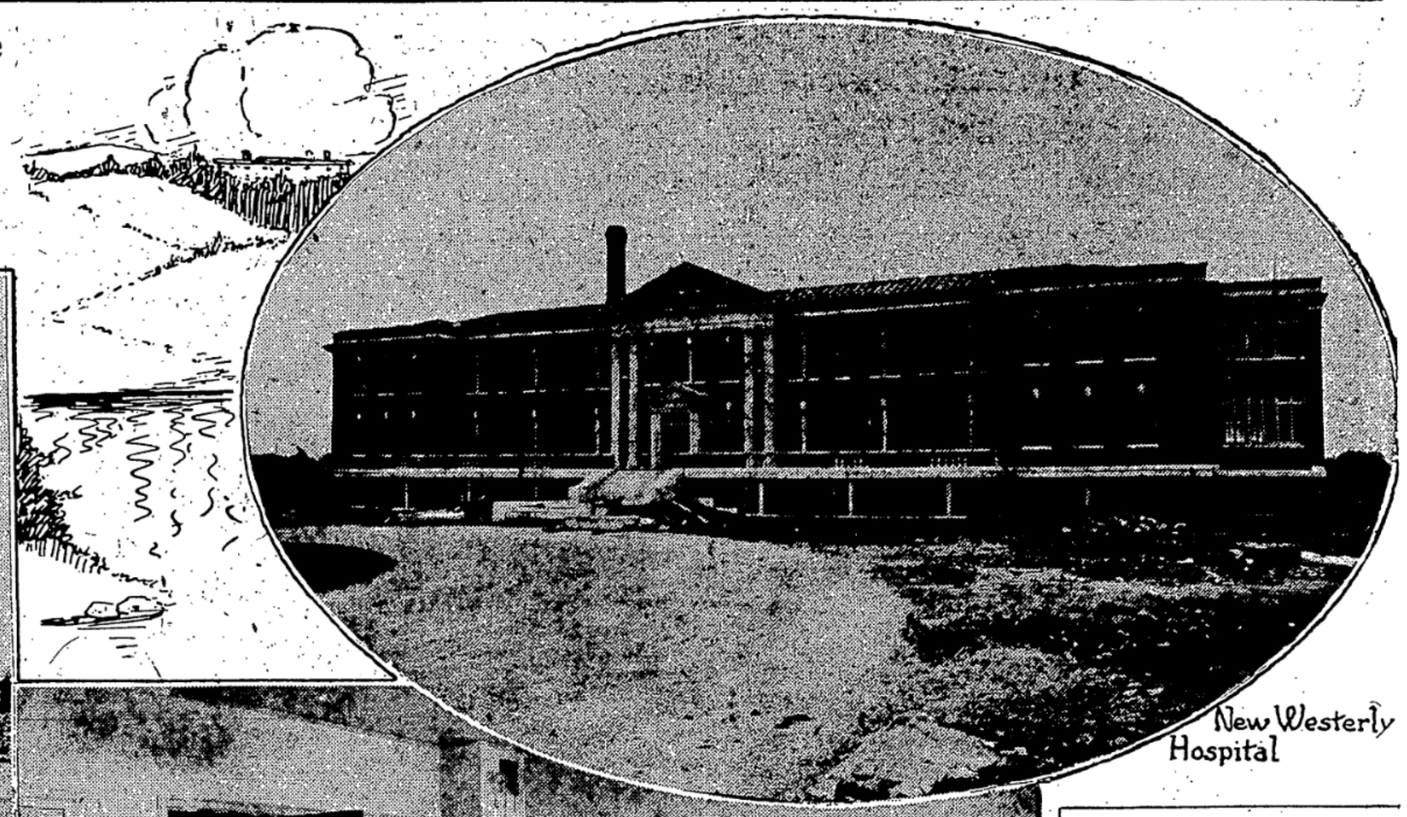
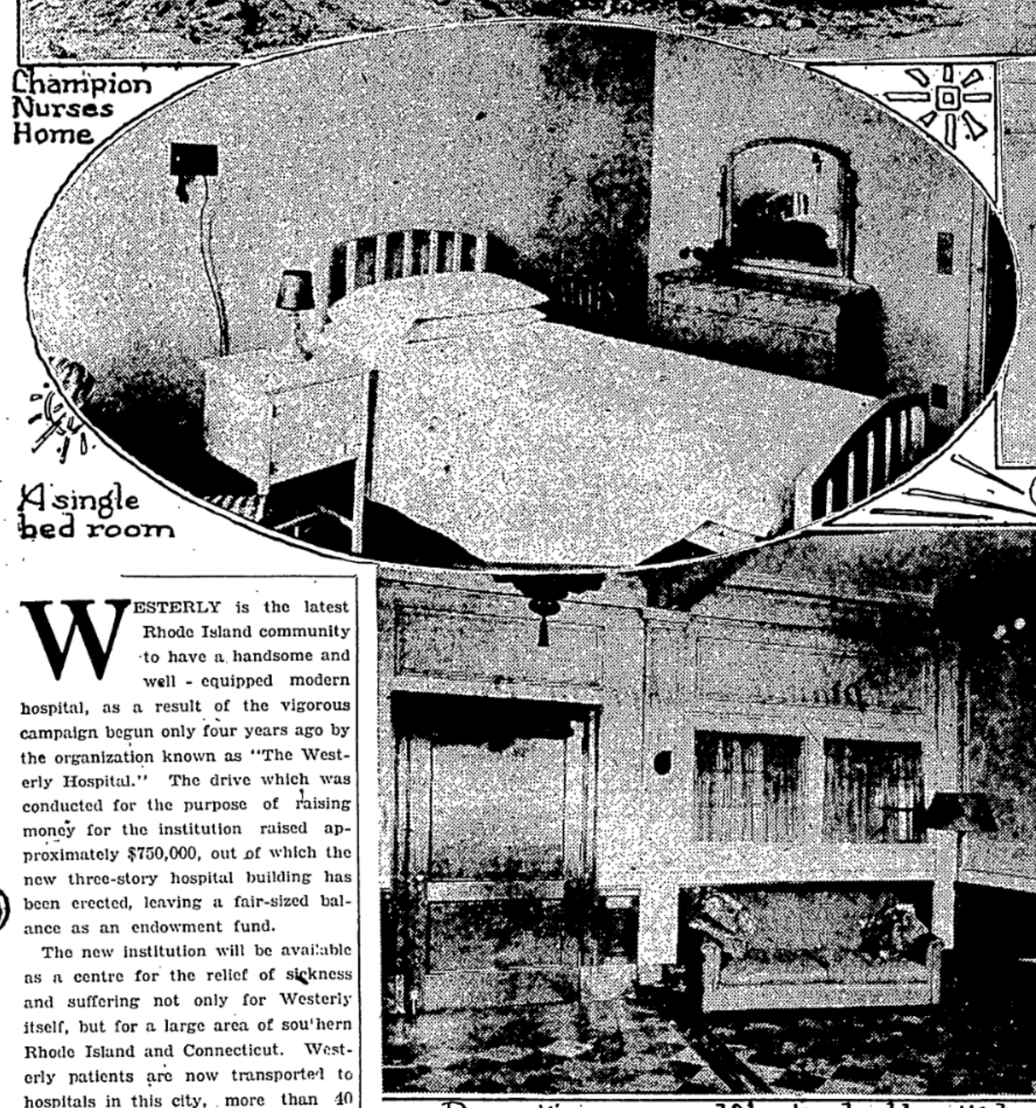
WESTERLY'S NEW HOSPITAL MONUMENT TO CIVIC PRIDE

Modern Institution, Opened for Inspection Last Week, Was Made Possible by Action of Public Spirited Citizens.—To Serve Southern Rhode Island and Connecticut.—Home for Nurses Gift of Avondale Man.—Providence Doctors on Staff

Champion Nurses Home



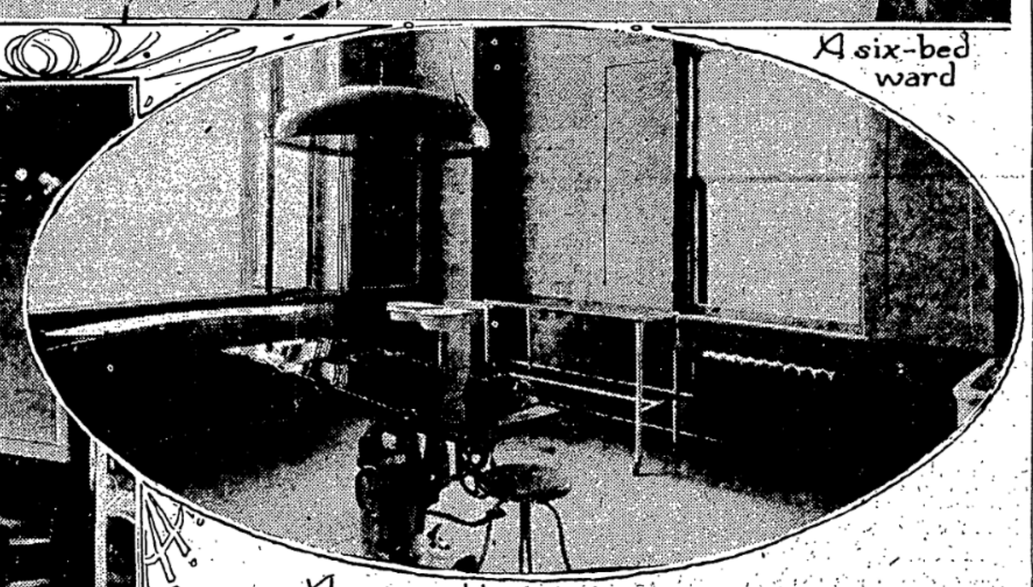
New Westerly Hospital



A single bed room

A six-bed ward

Reception room—Westerly Hospital



An operating room

WESTERLY is the latest Rhode Island community to have a handsome and well-equipped modern hospital, as a result of the vigorous campaign begun only four years ago by the organization known as "The Westerly Hospital." The drive which was conducted for the purpose of raising money for the institution raised approximately $750,000, out of which the new three-story hospital building has been erected, leaving a fair-sized balance as an endowment fund.

The new institution will be available as a centre for the relief of sickness and suffering not only for Westerly itself, but for a large area of southern Rhode Island and Connecticut. Westerly patients are now transported to hospitals in this city, more than 40 miles away, or to New London or Norwich. The presence of a well-equipped institution at home will mean much to those in need of hospital care.

The new hospital, which has already been opened for public inspection and is waiting only for the last of the furnishings before going into actual operation, is situated on a very sightly eminence, south of the business district, where it commands one of the finest views in Rhode Island. The tract of land for the hospital grounds, the gift of Charles Perry, President of the hospital association, contains several acres which are now being attractively laid out with drives and walks. Shrubbery and other landscape ornaments are to be added as fast as possible. The site is large enough so that it contains a very important auxiliary to the hospital, the Sarah Alexander Champion Home for nurses, an $85,000 building, the gift of Chales P. Champion of Avondale.

Success amounting almost to the proportions of a romance has attended the career of the hospital organization, which was formed by act of incorporation in June, 1921. The incorporators were Charles Perry, Arthur W. Cottrell, Henry B. Agard, John O. Mills and Edgar P. Maxson. While the plans of the society were not in definite shape at the time of the incorporation, it was known that certain sums of money had been left by generous persons, in trust with the Washington Trust Company, for the erection of a town hospital. Charles Perry, President of the trust company, had made it the dream of his life to found a hospital for the town.

The new organization found itself able to co-ordinate the forces that were already in existence and in 1923 it was decided to organize and conduct a "drive" for the raising of a sum for the proposed institution. The sum of $250,000 was fixed as the goal of the project. The drive was conducted on lines similar to those followed in the creation of the funds for the Providence Homeopathic Hospital, and the same organizer, Charles D. Folsom, was engaged for the work. George B. Utter was chairman of the drive committee.

Every available means of interesting the people of Westerly and the surrounding towns in the project was used, and every available "publicity stunt" was drawn upon. As a result of the appeal, when the days set apart for the drive had passed, the gratifying report was that three quarters instead of one-quarter of a million dollars had been realized.

The association had been organized by that time, with the following officers: President—Charles Perry; Secretary—Edgar P. Maxson; Treasurer—John O. Mills. The board of directors included these and Charles J. Butler, Arthur M. Cottrell, Alberti R. Stillman, Charles A. Morgan, Edward E. Bradley and Thomas McKenzie. The list of incorporators had been increased until it now included Mr. Perry, Mr. Cottrell, Mr. Mills, Mr. Maxson, Agnes Clark Cottrell, Thomas Perry, William Segar, George B. Utter, James M. Pendleton and Charles P. Cottrell.

Soon after the completion of the drive Dr. Charles P. Champion of Avondale announced that he desired to make a gift of $30,000 for the erection and equipment of a nurses' home, to be known as the Sarah Alexander Champion Home for Nurses, to be an adjunct of the hospital.

The success that had attended the drive prompted the directors to call for plans for the main building and the nurses' home. The plans were made by Kendall, Taylor & Co., of Boston. When the plans for the nurses' home were completed it was found that the building desired would cost $85,000 instead of $30,000 and Dr. Champion immediately declared his readiness to make up the difference. The contract for the building was awarded to the J. W. Bishop Company, and Dr. S. S. Goldwater of New York, an authority on hospital construction, was engaged to supervise the construction. The material of the hospital is brick and concrete, with granite trimmings. The nurses' home is stucco. The hospital is classed as a completely fireproof building, while the nurses' home is nearly so.

The hospital consists of two complete floors, besides the basement, in reality three complete floors. The first floor contains the entrance and reception room, waiting room, administration rooms, and various other apartments. To the right of the reception room is the men's ward, and beyond that, at the south end of the building, is a solarium. The building contains three solaria in all, each arranged so that it may be open in sunny, and closed in stormy weather.

To the left or north of the entrance are the administration rooms with the office of the superintendent, and a suite of living rooms for the use of the superintendent. Across a long corridor from the administration rooms are quarters for internes, a pathological laboratory, and rooms for the medical staff. The pathological laboratory is fully equipped with instruments for blood, chemical and serology tests.

The hospital is laid out in the form a "T." In the vertical part of the "T" is the children's ward with its solarium. In this ward are provisions for the separation of patients for necessary periods to prevent the spread of any contagious diseases.

The second floor contains the women's ward, and a well-appointed obstetrical ward. Each floor has its diet kitchen, and nurses's station, with signal systems and all necessaries for communication and the convenience of nurses, officials and employes. The floors are reached by two elevators, one for passengers and one for freight. The elevators are of the automatic "push-button" type, with all safety devices.

The hospital is designed to accommodate 52 adult patients. There are 17 single rooms, three double rooms, a children's ward with 12 beds, an infants' ward with 12 basinets, and three wards of six beds each. The hospital has two operating rooms, equipped with an ingenious electric lighting equipment which gives for night operating approximately the same lighting advantages that are enjoyed from the superb north window effects in daylight. Between the two operating rooms is an interlocking sterilizing room. There are also dressing rooms for the nurses and surgeons, and an anasthetizing room.

The ground floor or basement has kitchen, dining rooms and sleeping quarters for employes. It is designed for five male and 11 female employes. This floor also contains the X-ray department, mattress room, laundry, nose and throat operating room, store rooms and autopsy rooms. There are also the rooms for the heating plant, designed for both coal and oil, and a coal storage plant.

The nurses' home has three stories above the basement, with rooms for teaching, laboratories, living and recreation quarters, dining rooms and demonstration rooms. This institution will accommodate 36 student and staff nurses.

The location of the hospital will itself, it is believed, be of benefit to its patients. The land upon which it is situated is high above the valley of the Pawcatuck river. From the windows of the hospital is a beautiful view across the valley to the westward, with Hinckly Hill, a high eminence, visible in the distance. This is across the river in Connecticut. To the south Watch Hill, famous summer resort, is to be seen, with the broad Atlantic in the distance. To the northward is an excellent panorama of Westerly itself, with its business district and the quarries for which the town is noted. The beauty of the scenery, with the abundance of fresh air and breezes from the sea, will be beneficial factors in the hospital, it is expected.

The staff of the new hospital is already on duty, getting the plant in readiness for the first patients. Miss Ethel M. Doherty, who has had several years experience as superintendent of a hospital and nurses' home at Holyoke, Mass., is superintendent; Miss Dorothy M. Tarbox of New Haven is assistant superintendent; Miss Elizabeth Hartigan, bacteriologist; Miss Margaret Poor, dietitian; Miss Cecil B. Wallace, record clerk and assistant bookkeeper; Miss Eva M. Torrant, operating room supervisor, and Miss Margaret Lyons, anaesthetist.

The staff of physicians at the hospital is to be as follows: Surgical, Drs. Gordon Anderson, John Champlin, Jr., John Helfrick, Harry Crandall, John Ruisi, Edward Paine; medical, Drs. C. Grant Savage, Charles Crandall, William Viall, David Marr; pharmocological and chemical laboratory, Drs. Samuel C. Webster, William C. Thompson; roentgenologist, Dr. Frank I. Payne; anaesthetist, Dr. Harold D. Kenyon; eye, ear, nose and throat specialist, Dr. Walter I. Reynolds.

The directing physicians of the hospital are to be as follows: Drs. Michael H. Scanlon, William Hillard, J. Devere Barber, John Champlin, Henry L. Johnson; consulting physicians, Drs. John Keefe, Joseph C. O'Connell, Albert A. Barrows, Frederick V. Hussey, Lucius C. Kingman, Charles O. Cook, Martin Budlong, Frederick E. Long, Ira H. Noyes, Frank M. Adams, John G. Gilberts, Frank T. Fitton, Alexander M. Burgess, Guy Wells, Joseph Bennett, John Donley, Charles A. McDonald, Carl D. Sawyer, Henry E. Utter, A. Roland Newsam, J. Edward Kerney, Henry F. McCusker, Roland Hammond, James W. Leach, Joseph L. Donley, Hermon R. Jordan, Wilfred Pickles, Charles Higgins, William Campbell Posey, Edmund Leroy Dow, J. Whitridge Williams and Daniel F. Jones.

The furnishing committee, which was charged with the purchase of equipment for the hospital, consisted of Mrs. John Champlin, Mrs. E. B. Foster, Mrs. Harry R. Milner and Mrs. Samuel H. Davis. The equipment is all of the latest type, including many electric labor saving devices that are all the "last word" in convenience.

Mosquito-less Camping is Not Impossible---Here is a Good Recipe

THERE are, perhaps, only two things which keep several thousands of persons in Providence from going camping every year. One is mostquitoes and the other is the fact that they don't like camping. But mosquitoes, bad as they can be—and they can completely spoil a vacation if the camper is not properly equipped—can be rendered innocuous. There may be some who, after a few unfortunate experiences, may not believe this. They buy an elaborate outfit, or make one themselves, and sally forth into the woods secure in the belief that the mosquitoes won't touch them. And then they suffer. And the swear they're "off camping for life."

Like one man who still retained a hankering for camp life after one two-weeks unsuccessful combat with mosquitoes. He had rigged up a light framework designed to hold a mosquito netting over the army type folding cot on which he slept. The netting, he proudly explained, hung down over the edge of the cot, right to the ground. He figured by running it down to the ground instead of stopping at the edge of the cot there was less chance of the mosquitoes getting in. Poor innocent babe in the woods!

He was totally unaware that an area of grass about the size of an army cot can—and usually does—provide temporary housing accommodations for enough mosquitoes to compete with Capt. George Webb's new population figures for Providence.

All that mosquito netting would do would be to insure the sleeper that not one of those mosquitoes could miss him. He might as well have slept in the open.

And that is far from being an unusual mistake. The makers of scores of so-called "mosquito-proof" tents commit the same error. Failure to cover the ground is probably the most common mistake made by those trying to keep insects away from them. It is impossible to keep them out unless the ground is covered or other means are taken to keep the pests from boring up from underneath. Without this precaution the best mosquito netting protection that can be fitted into a tent represents only money thrown away.

And the camper who figures that he can avoid carrying a ground cover by killing all the mosquitoes on the ground after he has his tent set up is an unduly optimistic person. There are many theoretical ways of accomplishing this—such as filling a tent with smoke from a smudge. Building the smudge outside the tent is almost always useless—the wind will change and blow the smoke away. Build the smudge inside the tent then, taking a chance that the whole business won't burn up. Close all the flaps. Get the tent full of smoke. Even leave it in there if you wish.

The mosquitoes, it will be remembered, are on the ground. Now, before entering the smoke-filled tent, place a wet handkerchief over nose and mouth. Hold the breath as an additional precaution. Then lie down with the nose close to the ground. Throw the handkerchief away and breathe all the nice fresh air you want. That is the air those mosquitoes have in the smoke-filled tent. As soon as you get to sleep in your smoke-house, and the fumes thin out, they sally out and disport themselves.

Many of the other methods of ridding a tent of mosquitoes are equally as efficient.

Mosquito protection can be made at home. All that is needed is a piece of canvas, waterproof is best but any kind will do, for the floor. And a few yards of mosquito netting and a little ingenuity. But don't bother with the mosquito netting unless you also take a ground cloth. Might as well take a paddle and leave the canoe at home.

There are many tents on the market with about everything on and in them except elevators. The camper has a wide choice, especially if his pocketbook is fat. But so far as mosquitoes are concerned the cheap, ordinary, backyard variety of "A-wall" tent is just as good as any. No fancy windows are needed. And to the experienced camper tents with permanently attached floor cloths are a snare and a delusion. Better by far leave some of the fancy trappings and buy a fly. A fly will make almost any tent waterproof.

The chief objection to tents with permanently attached floor cloths is that on hot nights the "windows" with which they are usually equipped are pitifully inadequate. A tent with side walls that may be rolled up on hot nights is best.

The cheapest way to obtain a floor cloth is to buy several yards of canvas and sew it together to the desired size. Make the floor cloth four or five inches larger than the area of the ground covered by the tent, on all sides of the tent. By doing this no fastenings are needed to attach it to the tent. Just lay the cloth against the side walls after they have been fastened down. A few patent fasteners may be attached and will probably be used once or twice in five or six years. A few safety pins will serve as well.

Now for the mosquito netting. It is a waste of money to fashion a full-sized tent out of netting. A strip of netting around the bottom of the tent, sewed with a sewing machine to the side wall just below where it is fastened to the roof of the tent is ample, with generous flaps at the door or doors. But unless the netting is sewed on by machine (doubled to about four thicknesses to reduce chances of tearing) a full tent of netting is necessary. The reason is that if the netting is pinned on, or roughly sewed on by hand mosquitoes will have no trouble in getting through the crevices that soon appear.

But no matter how carefully sewed, this strip of netting will be useless unless it is made long enough to provide a lap of at least six inches below the bottom of the sidewall of the tent. Twelve inches is even better. One reason for making the floor cloth larger than the tent will now appear. Assume that the side walls of the tent are rolled up for sake of ventilation. The mosquito netting hangs down. As it is six to 12 inches longer than the flaps of the tent, there is enough netting to permit it being tucked under the edges of the floor cloth.

This makes a joint which few, if any, mosquitoes can penerate. But with a floor cloth just the size of the tent, cot legs or one's feet, or anything carried into the tent or set down in it, is apt to strike the netting and tear a hole in it. With the floor cloth projecting, the netting is kept far enough out of the way to save it from such disasters. Another advantage of a large floor cloth is that in rainy weather, with the edges raised and laid against the bottom of the tent (which should be securely pegged down, of course) no wind or rain can enter.

If the site of the tent is carefully selected the ground under it will not get wet, especially if a shallow trench is dug to carry off any water that may drain down from a higher spot. With a detachable floor cloth, if it does wet through it can be dried the next morning in a few minutes. A fairly heavy and waterproof canvas is a good investment, however.

No special fasteners are needed to hold up the sides of an "A-wall" tent. Leave the wooden pegs in the canvas loops on the bottom of the wall. Lift the wall and slip the peg through the loop of the guy rope. This will hold the wall up high enough to provide plenty of air and in most cases it will hang just low enough to drop below the top of an army-type folding cot, thus affording privacy as well.

There remains the door of the tent to be made secure against the mosquitoes. In this case, however, the netting must cover the entire end of the tent. Strips along the edges of the flaps are not enough. Allow enough netting so that the two pieces will cover the entire end and lap at least 12 inches in the middle and along the ground. Then the outside tent flaps can be left open or closed independently. The mosquito netting forms a double door. As it cannot be sewed together, a generous flap, with plenty of tape ties, will be found necessary to keep a tight joint.

The bottom of it can be tucked under the floor cloth. By making the netting flaps about 18 inches longer than necessary, the bottom joint need not be unfastened on going in or out of the tent. This is really a necessary precaution. The average person, once the netting is fastened, will try to get in or out without unfastening it at the bottom anyway. And unless enough extra netting is allowed to permit this, tears are inevitable.

The tent, or at least the netting, should be fastened before sundown, if mosquitoes are to be kept out. And as some members of the party will be pretty constantly going back and forth (each one of them trying to get in without unfastening any more of the ties than is absolutely necessary, an extra allowance of netting is really an essential.