



HAMPSTEAD REHABILITATION CENTRE

a campus of Royal Adelaide Hospital

A History – from then to now

Centre (a campus of Royal Adelaide
Hospital) was built as the Metropolitan
Infectious Diseases Hospital at the request of the
Local Boards of Health. The Hospital opened in
1932 and was designed to care for and
accommodate patients with infectious diseases
such as polio, scarlet fever, measles and
diphtheria. With the introduction of new drugs
and immunisation programs from the 1940s, the
need for such a hospital quickly diminished.

The land on which the Metropolitan Infectious Diseases Hospital was built was owned by Leopold Conrad, the owner of a chain of butcher shops and a wealthy man, who used the site for grazing stock. In 1917 he sold the land to the Government.

In the 1800s, infectious diseases were usually isolated at home, however, out of necessity very many were admitted to Royal Adelaide Hospital in spite of inadequate facilities for the isolation of infectious patients and the risk of cross infection.

Two hospitals, both requiring an isolated location, were built on the land purchased from Mr Conrad. The Morris Hospital was the first to be built. It was constructed in the late 1920s and was originally the Advanced Consumptive Home and Cancer Block (sometimes called the TB Hospital). It was built to replace the Consumptive Home that had been in existence at Royal Adelaide Hospital. The second hospital, the Metropolitan Infectious Diseases Hospital, was built to replace the Infectious Diseases Block at Royal Adelaide Hospital.

In South Australia, polio was proclaimed a notifiable disease on 23rd February 1922 in response to the first large epidemic, which struck the State in early January 1922. At that time many hospitals were unable to cope when it became necessary to isolate patients.

Following this epidemic, the South Australian Parliament realised the need for something to be done to counter the demands to isolate a large number of clients with infectious diseases, and so the Metropolitan Infectious Diseases Act was

passed. Regardless of the threat of epidemics, the Act was not fully implemented until some 10 years later, when the Metropolitan Infectious Diseases Hospital was established on 7th October 1932 by the Government, much to the relief of the overcrowded Infectious Diseases Block at Royal Adelaide Hospital, North Terrace. The Metropolitan Infectious Diseases Hospital was an autonomous organisation controlled by its own Board of Management, i.e. the Metropolitan Board of Health and its finance was maintained solely by the contributions of local councils.

The initial capacity of the new Metropolitan Infectious Diseases Hospital, on what was the northern outskirts of the metropolitan area at Northfield, was 150 beds, and with the erection of marquees within the hospital grounds, epidemics could be coped with. It received its first patients on 7th October 1932. Initially 50 patients were transferred from the old Infectious Diseases Block at Royal Adelaide Hospital and gradually further patients were transferred.

The Metropolitan Infectious Diseases Hospital was a large complex. By 1936 the buildings on the grounds included the Administration building, the Superintendent's quarters, the nurses quarters, the domestics quarters, the gate house, mortuary, men's quarters, workshop, stables, garage, kitchen, store, laundry, boiler room and 17 wards.

In the first ten years or so, the Hospital treated in the order of 1,000 patients a year. Most were admitted in the winter months when the epidemics that swept Adelaide occurred. The majority of patients were suffering from diphtheria, scarlet fever, measles, whooping cough, erysipelas (an infection of the skin), chicken pox and tonsillitis. In 1934, of the 352 patients admitted with diphtheria, 10 died. In 1936, the Hospital found itself faced with the diphtheria epidemic and with the task of accommodating many of the polio cases reported in the following year, 1937.

By 1945, mass immunisation programs for school-age children were in place and the numbers with the disease diphtheria (and eventually scarlet fever, whooping cough, measles, etc.) decreased remarkably. In addition, the development of

penicillin greatly contributed to a more rapid recovery and a shorter stay in hospital.

Immunisation programs and the new drugs had created a situation where there was low incidence of infectious disease which reduced the likelihood of such epidemics as seen in the past, and as a result the demand for hospital beds was declining. As a consequence, the need for a large infectious diseases hospital declined and the role of convalescence and other branches of medicine emerged.

By 1947 the Hospital's original bed capacity had increased to 250 but with the decline of infectious diseases, the Metropolitan Infectious Diseases Hospital had outlived the purpose for which it was designed. On the 1st April 1948 the responsibility for running the Hospital was passed onto Royal Adelaide Hospital and it was proclaimed an annexe of Royal Adelaide Hospital. It later became known as Northfield Wards of the Royal Adelaide Hospital.

By June 1950 wards had been re-opened to provide accommodation for some 50 convalescent polio clients, some of whom were retained in the wards for a considerable time.

In December 1970 the Director General of Medical Services requested that a feasibility study be undertaken to determine the redevelopment of Northfield Wards. On the 27th March 1974 the Parliamentary Standing Committee on Public Works reported on the proposal and recommended the construction of Stage 1 of the Redevelopment Program (that is, current inpatient ward area of Blocks 1 and 2 and the Energy Complex which has been closed for some years).

Building work began in April 1975 following the demolition of 4 old wards. On the 3rd March 1978 the Honourable D.H.L. Banfield, M.L.C. Minister of Health officially opened the new 200-bed Hospital at Northfield that was erected on the site of the original wards, some of which were demolished. Together with the Morris Wards, the hospital had a total of 237 beds and 46 buildings on the site.

It was in the 1980's that the Northfield Wards finally closed its doors to all clients with infectious diseases and the Hospital became a modern and progressive centre for rehabilitation and extended care; both the Morris Hospital and the Northfield Wards were combined under the name of Hampstead Centre. It now houses the Eastern Domiciliary Care Service.

1986/87 saw the closure of the Morris 3 Ward. In 1990, Ward 1B (Stroke) was closed and revamped to provide a therapy area for inpatients of the hospital. 1989 saw the closure of two geriatric wards, (2C & 2D) which were later to be redeveloped to accommodate the new Spinal Injury Unit. Hampstead Centre was now a 149-bed hospital.

The Centre celebrated its Diamond Jubilee in October 1992 having originally opened in 1932.

In late 1994, Hampstead Rehabilitation Centre completed a redevelopment project consisting of a new Spinal Injury Unit, Pharmacy, Outpatients Department, Gymnasium and Therapy Block (including hydrotherapy pool). The last patient was transferred from the old Morris 4 Ward to the new Spinal Injury Unit on the 11th November 1994. The official opening of the new areas took place on the 28th February 1995 by the Hon. Michael Armitage, Minister for Health and Aboriginal Affairs.

On the 9th February 2000, the Royal Adelaide Hospital Redevelopment Stage 1A was officially opened by the Honourable Dean Brown, Minister for Human Services. This building houses the Hampstead Rehabilitation Centre Administration Services and Eastern Domiciliary Care Service and provides state of the art facilities for both patients and staff. This has enabled the range of services to be further aligned with the strategic direction of Royal Adelaide Hospital.

On the 25th June 2001 the Brain Injury Rehabilitation Service relocated from Julia Farr Services to Hampstead Rehabilitation Centre and came under the management of Royal Adelaide Hospital. This is a statewide service for people suffering from traumatic brain injury. On the 1st July 2002 the Eastern Domiciliary Care Service transferred from Royal Adelaide Hospital to the new Metropolitan Domiciliary Care, and is now known as Metropolitan Domiciliary Care - Eastern Region. The Centre for Physical Activity in Ageing, previously of Eastern Domiciliary Care Service, remained with Royal Adelaide Hospital, and responsibility for its operation and management is now with Hampstead Rehabilitation Centre. Established in 1981, the mission of the Centre for Physical Activity in Ageing is to "contribute to the quality of life of individuals through the provision of specialised physical rehabilitation, health promotion, scientific research and education programs".

TODAY

Hampstead Rehabilitation Centre consists of:

- Department of Geriatric & Rehabilitation Medicine
- Orthopaedic, Amputee and Spinal Injury Rehabilitation Service
- Brain Injury Rehabilitation Service
- Centre for Physical Activity in Ageing

and is the home of Metropolitan Domiciliary Care – Eastern Region.

The centre has 150 funded inpatient beds and employs approximately 434 people. The rehabilitation units within the centre provide clinical rehabilitation programs for adults suffering from stroke and other neurological and medical disorders, spinal cord injury, orthopaedic injury/conditions and amputations and traumatic brain injury. There is a team approach comprising specialised therapy, nursing, medical, counselling and other highly trained staff. Treatment at Hampstead Rehabilitation Centre is centred on improving the quality of life and function to the optimum level and re-entry into the community.

Hampstead Rehabilitation Centre is situated at the corner of Hampstead Road and Folland Avenue, Northfield. It is approximately eight kilometres from Adelaide City and has parking available on campus for staff and visitors. Public transport is available to the main entrance.

CLINICAL AREA

Block One - Units 1A, 1C, & 1D

Short Stay

This Unit (1A) has planned respite beds and takes acute admissions, to relieve patients or carers with social crises.

Medical Rehabilitation

This Unit (1C) provides inpatient therapy for people with a variety of medical illnesses, placing special emphasis on neurological disorders, particularly strokes.

Geriatric Rehabilitation

This Unit (1D) provides a recovery care rehabilitation environment for patients with various medical conditions, who may require less intensive therapy to facilitate their independence at home.

Block Two - 2A, 2B and SIU

Brain Injury Rehabilitation Unit (2B)

A statewide service, which provides individual planned programs of rehabilitation, designed to meet the client's lifestyle goals in inpatient, home and community settings.

Orthopaedic & Amputee Rehabilitation Service (OARU)

The Orthopaedic Service provides inpatient rehabilitation after accidents, fractures or surgery to bones and joints. The Amputee Service accepts rehabilitation referrals and assists in the provision of prosthetic limbs for people who have had amputations.

Spinal Injury Rehabilitation Service (SIU)

A statewide service that also covers the Northern Territory and western New South Wales. The SIU provides inpatient and outpatient rehabilitation for people who have suffered spinal cord injury or disease. They may require a lengthy hospital stay and long term follow-up. There are also annual Outreach Clinics to Mount Gambier, Alice Springs and Darwin.

CENTRE FOR PHYSICAL ACTIVITY IN AGEING

The Centre for Physical Activity in Ageing (CPAA) has a comprehensively equipped gymnasium available to exercise rehabilitation and health promotion clients. A well-equipped exercise laboratory facilitates the conduct of fitness testing within rehabilitation and research programs. Clients with disabilities and physical limitations are well accommodated through modification of existing equipment items and programs. Water-based programs are conducted in the hydrotherapy pool. The CPAA also conducts various "off campus" programs which utilise the facilities of different community groups/organisations.