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Continuity and Change. 800 Years of St Catherine's Hospital.

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Dr. Artur Dirmeier, chief archivist and director of St Catherine's Hospital Archive, describes here the foundation of St Catherine's Hospital, which took place 800 years ago, as well as the institution's subsequent development down to the present day. In addition to an historical overview, though, several individually interesting facts are highlighted, including: the activity of the hospital council, the work of the so-called 'master,' as well as the foundation's economic basis. The narrative is concluded by a chapter on the 'night cap' still given to the hospital's residents today.

Around the year 1213, Bishop Konrad IV of Regensburg, together with the townsfolk, obtained a parcel of land at the northern end of the Stone Bridge with the aim of building there a new hospital (*Spital*) for the poor. This location promised better air quality, fresh water, and in general greater comfort. The surviving document pertaining to this memorable initiative sheds light on the power relations at that time in Regensburg. Bishop Konrad IV had just ousted the Bavarian Duke Louis of Kelheim from his rule over the city and was cooperating in matters pertaining to the hospital project with the citizenry of Regensburg, who were in charge of the bridge property and thus the requisite land parcel. At the same time, his aim was to win over the townsfolk for continued financing of the hospital and thus include them in the management of the project.

For all intents and purposes, however, this was no completely new endeavour, but merely the relocation of the previously existing cathedral hospital of St John to the northern bank of the Danube. This explains why the patronage of St John was also initially transferred to the new location and only came to be replaced gradually by that of St Catherine. Both Johns — the Evangelist and the Baptist — continued to remain patrons of the hospital community as well as the attached parish church.

With the construction of St Catherine's Hospital, winds of change had begun to blow over Regensburg in terms of how the elderly and the sick were cared for: winds that ushered in the development of the new citizens' hospitals from the old monastery and collegiate church infirmaries. Thus, it was the one of the first citizens' hospitals in the Holy Roman Empire came into existence here. Both the patrician upper crust and the humbler lower classes invested in the expansion of the municipal infrastructure, especially in churches, bridges, streets, and hospitals, and thereby strengthened their own legal position over and against the bishop as city ruler. One of the consequences of this strategy was nothing less than the city being granted imperial free status under Emperor Frederick II in 1245.

The hospital project, sponsored by both bishop and burghers, was still underway when the political landscape in the Empire, and subsequently in Regensburg, radically changed. The bishop's hold over the city fell apart, and the city's northern suburb together with St Catherine's Hospital were at the centre of conflict. The new bishop, Albert of Pietengau, sought in vain to regain power over the city for his office. The citizens were able to prevail

with their claims within the city proper, but lost the suburb of the courtyard (*Hof*), the later city district of Stadtamhof, to the Duke of Bavaria. Rights over the hospital fell de facto to the Imperial Free City, but were disputed de jure between the city and the duchy.

Reformation and Counter-Reformation

Starting in the 14th century, the steady flow of donations to St Catherine's Hospital began to dry up, since the citizens of Regensburg began to support primarily hospitals and institutions solely under municipal supervision. A decisive moment of change came about with the conversion of the Imperial Free City following the Reformation to Lutheranism in the year 1542: St Catherine's Hospital became Protestant at least in part, which caused such disapproval on the part of the bishop that he immediately turned to the emperor. In response, the emperor demanded (in vain, it turns out) that the confessional status revert to how things were originally at St Catherine's Hospital. Simultaneously, the bishop and the duke made known their interests in sovereignty over the hospital – a touchy topic from the start, since whoever held sovereignty also determined the religious confessions of his subjects. But the competing parties were unable to come to an agreement pleasing to both, for which reason the Imperial Chamber and Aulic Council were entrusted with handling the delicate affairs. Protracted and tough negotiations followed until the hospital was re-Catholicised between 1628 and 1630 with help from Bavaria.

Further Developments on the Question of Confessionality

The further development of the question of confessionality in St Catherine's Hospital has to be viewed against the background of the political and religious currents of the time: the question of equal rights regardless of confessional adherence, inter-confessional conflicts, and the results of this culture war. After Catholics expressed feelings of being disadvantaged in the administration of communal foundations, the Catholic Brotherhouse was built in 1833, and Lutheran residents left St Catherine's Hospital in 1891.

In recompense, about one third of the hospital property was transferred to the Lutheran Benevolent Foundation (*Evangelische Wohltätigkeitsstiftung*) on condition that at least 55 Lutheran residents be cared for in perpetuity. This was not the end, however, to confessional conflicts around St Catherine's Hospital, since the seats on the hospital council allocated to secular persons continued to be filled by Lutheran citizens. In what follows, we shall discuss the effects of this and the composition of the council.

After the Lutheran residents had left the hospital in 1891, there arose a dispute as to whether the right of the city council to suggest names for open spots allocated to secular persons on the hospital council had ceased to exist. This question was settled by the Bavarian Administrative Court on 10 January 1908 in favour of the city of Regensburg retaining this right to present such names.

The government's rights of supervision of the foundation of St Catherine's Hospital also did not go unchallenged. When Bishop Ignatius of Senestrey claimed these rights for himself in 1859, the religious hospital councillors proclaimed the local district government to be the responsible supervisory authority. Later, when an attempt was made in 1968 to turn St

Catherine's Hospital into an ecclesiastical foundation, both the Ministry of the Interior and the government of the Upper Palatinate rejected this request.

The Long 19th Century

With the Final Recess decision of the Holy Roman Empire (*Reichsdeputationshauptschluss*) of 25 February 1803, the last Prince-Elector of Mainz and Archchancellor of the Empire, Carl Theodor von Dalberg, was transferred to Regensburg. The matter of sovereignty over St Catherine's still remained unresolved between the claims of Bavaria and the Imperial Free City. Already in 1806, Dalberg had dissolved the administration that had been active up to that point over St Catherine's Hospital, and placed the foundation under the supervision of the cathedral dean and suffragan bishop, Johann Nepomuk von Wolf, who thenceforth served as director of St Catherine's Hospital. At the same time, the cathedral priest and preacher, Wolfgang Sperl, was appointed as administrator, taking over the work of both hospital master and priest. The secular hospital master and a few hospital employees were granted early retirement. With this step, Dalberg brought the administration of the hospital that had been in accordance with the founding charter, and thus the participation of the citizenry in hospital affairs for over 600 years, to an end.

After the Principality of Regensburg was transferred over to the Kingdom of Bavaria in 1810, the city magistrate laid claim to its old rights over St Catherine's Hospital. For five years, it was locked in a contest with the cathedral chapter over the administration of the hospital property, until the original administrative committee of four canons and four secular members was reinstated on 21 July 1823 and the supervision of the government of the Regen district (later, that of the Upper Palatinate) was confirmed. Presidency on the hospital council was to be assumed by the member "who should also be granted precedence in other personal matters"; this role thus fell to the cathedral provost. Daily administrative tasks, following the example of communal institutions, were to be carried out by an 'economist,' that is, a subject-matter expert in business affairs.

The Hospital Council: Controlling and Fundraising

The advisory council of St Catherine's Hospital, in existence for almost 800 years, is one of the oldest institutions of its kind in all of German-speaking Europe. In 1226, Bishop Konrad IV laid down the composition of this committee, stating that henceforth, there should be four 'spiritual' seats filled by four cathedral canons and four 'secular' seats filled by laypersons. The four clerics were the cathedral provost, the cathedral dean, the cathedral sexton, and the cathedral parish priest, while the four lay councillors were drawn from the nobility and other citizens responsible for municipal administration. At the same time, the bishop granted the committee the right of co-optation.

The hospital construction project, noteworthy for its ambitious scope of wanting to provide accommodation for at least 100 persons, required close consultation between both the spiritual and the secular benches on the hospital council. In other places, the increasing secularisation of hospitals led to purely municipal/city-run trustee boards, but this was not the case in Regensburg for reasons of growing weakness on the part of the Imperial Free City, as well as the hospital council composition itself, deriving as it did from two imperial estates (secular and religious). Any possible differences that might arise could not be

resolved within the city; rather, the smallest dissent was immediately handled by the highest levels of the imperial judiciary.

The Master and His Brothers and Sisters

Early hospital communities, like that of St Catherine's Hospital, were organised mostly in the form of lay confraternities, while the supervisory committee was primarily responsible for the finances and controlling of the hospitals. The mendicant orders that arose in urban centres in the 12th and 13th centuries can be traced back to the pioneering spirit of that time. More often than not, however, these confraternities trod a fine line between orthodoxy and heresy, for which reason a regulation was decreed at the Fourth Lateran Council in 1215 stating that all religious communities not yet following a specific rule were to follow the Rule of St Augustine.

The hospital confraternity in Regensburg also submitted to following this rule and elected from amongst its own members a master. The statutes of Bishop Siegfried from around 1230 mention twelve brothers, seven sisters, two priests, and two seminarians. Accordingly, the lay brothers took over the administrative tasks of the hospital and its farming estates, while the sisters were especially active in primary care. In the wake of the trends towards hospital secularisation, the confraternity was dissolved around 1380, with only the convent of sisters remaining to care for the elderly and sick up until the Reformation. The hospital sisters wore a white habit and were supported by four or five women assistants in their work.

With the transformations wrought by the Reformation, the convent of sisters was also dissolved and replaced by two secular nurses, one Catholic and one Lutheran. From 1860 to 1980, the Sisters of Charity of St Vincent de Paul took over the care of the hospital residents. They passed the baton in 1982 to sisters of the *Societas Ancillae Caritatis* order, who looked after residential care until 1987, since which time fully secular care staff have tended to the nursing home residents.

In the years between 1539 and 1806, the office of hospital master was split between the confessions, i.e., there was a lay Protestant master and a Catholic cleric acting as spiritual master. Wound care lay primarily in the hands of barber-surgeons, whereas educated doctors were only consulted in emergencies. Even today, the medieval infirmary halls loom above the hospital's external walls and are thus one of Germany's oldest social history monuments.

Paupers and Residents – Pilgrims and Guests

Hospitals in the way we understand them today did not exist in the Middle Ages. Medical care for the upper classes took place at home well into the 19th century. The lower classes, lacking means of their own, had to take recourse to hospitals established for the poor, such as St Catherine's. Patients would be received by the hospital master/mistress, but before being assigned to a bed, each new admittee would be shriven and communed. Records show that St Catherine's, originally planned to have room for at least 100 patients, housed up to 400 persons by the end of the 13th century. In the late Middle Ages, the patient numbers exhibit a significant decline, decreasing to an average of 150 persons by the 19th century. Patients were permitted to stay in hospital until they had fully recovered. This fact allows us

to classify the original form of St Catherine's Hospital as an early form of the modern hospital, and also serves to explain the originally high patient numbers which diminished with the gradual change of the institution into a residential institution – what we would call today a nursing home.

Depending upon the availability of space and the admission fee paid, St Catherine's Hospital dispensed two levels of care, namely, the infirmary wards for poor residents (so-called Siechenpfründen) and higher-quality wards for wealthier patients (so-called Herrenpfründen). Some patients came from as far afield as Eger/Cheb or Munich; even ambassadors to the Imperial Diet would have their old servants cared for here. As in the monastic hostels of old, the giving of alms also played an important role here. Thus, the brothers of the confraternity would distribute the bread left over from meals "to the poor people outside the hospital."

Attached to the hospital, there was also a hostel for foreigners, the so-called 'guest house' (*Gasthaus*), wherein the master was supposed to sit at table with his guests: "There should be a house for the guests, in which not merely religious persons and honourable curates, knights and other honourable and pious men are received by the master or his vice-master. The master should be with these people, or his representative (that is, the vice-master or whomever he should so designate); and he should dine with them, namely, in moderation and as is fitting." A pilgrim hostel was added in 1460, the funds for building which were donated by Andreas Niedermeier, the cathedral chaplain, in the amount of 1,200 guilders.

Land Ownership and Economic Management

The French historian Michel Mollat coined the concept of 'land ownership of the poor,' meaning here the hospitals' ownership of property. The economic foundation consisted in most cases of an initial foundation gift, followed by many additional donations. Already in 1217, Emperor Frederick II had offered royal protection to the properties held by the Regensburg hospital in a total of 21 locations. In the mid-fourteenth century, the hospital cultivated 166 entire farms, 110 properties designated by the term predium (Lat. 'farm, estate'), 13 hides (Huben), one alpine pasture (Schwaige), forests, fish ponds, and numerous vineyards. These holdings were scattered across the entirety of the Upper Palatinate and large parts of Upper and Lower Bavaria. The most profitable activities were grain farming and winegrowing. For the most part, the hospital's rights and properties were leased out on mortgage or ground rents, and the agricultural estates were annually visited by one of the brothers. Four farming estates – the hospital farm at the bridgehead, Aschach, Amhof, and Höhenberg – were managed by the brothers themselves, although they were assisted by male and female farmhands. The statutes promulgated by Bishop Siegfried prescribed that the brothers were to undertake a rendering of accounts thrice annually, which would be verified by the caregivers. The caregivers from the cathedral chapter as well as those from the municipal authorities each received a copy of each accounting.

Wine and Beer, That Is My Cheer

Already in the days of Bishop Siegfried, a 'nightcap' of beer or wine is said to have been proffered to the hospital residents (*Spitalern*) before lying down for the night: "and [they] drink there wine and beer in accordance with the master's will" (*und tryncken da weyn und*

pier nach des meisters willen). The rich vineyards holdings were partly managed in-house and partly leased out. In good years, the hospital produced a surplus of wine, such that large amounts could be sold, which in turn significantly increased the institution's income. By contrast, beer production in the Middle Ages was low and served primarily to meet in-house demand (records exist, however, of individual deliveries to the court of the duke and to the free imperial city). Only in the course of the climate change that made itself felt in the late Middle Ages did drinking preferences shift and lead to an increase in beer production: what had been the original home of Bayerwein became a hub for beer brewing. Beer sales for St Catherine's Hospital reached new record levels in the 18th century, but this success was throttled when the elector-prince for Bavaria intervened in order to protect the breweries in Stadtamhof. The 19th century saw the hospital brewery embark once again on a course of expansion when it sought to acquire the Bischofshof brewery and its concomitant supplies and barrels with incomes derived from the secularisation reforms in Bavaria. The contract of sale was already signed and sealed when the Upper Palatinate government withdrew its consent. A few years later, the hospital purchased its first storage cellars in Steinweg with the option of moving the brewery thither.

In the present day, the beer assortment of Regensburg's oldest brewery continues to enjoy great popularity, with the profits from the brewery all going towards the upkeep of the nursing home and thus to the benefit of the citizens of Regensburg. And not only that, but Bishop Siegfried's 'nightcap' is still distributed to the residents of the home to this day.

Conclusion

As a citizens' hospital, St Catherine's Hospital is a foundation by the citizens of Regensburg for the citizens of the city, and for 800 years has been jointly administered by the cathedral chapter and townsfolk. Its location next to the Stone Bridge has provided the institution with an especially advantageous location for several centuries; if earlier eras saw merchants, traders, and pilgrims coming across the bridge to visit and rest at St Catherine's, the present day finds Regensburg residents seeking a bit of relaxation and tourists from around the world making the same trek. Both the brewery and beer garden enjoy widespread renown, yet the core mission of the foundation remains the same as it has always been: caring for others, today in the form of a nursing home for the elderly and those in need of care.

The architectural complex of the hospital, which enjoys protected historic landmark status, stands at the heart of the world heritage site of Regensburg and Stadtamhof, combining socio-charitable and cultural work with the tasks of an economically important locale. This combination simultaneously serves as a challenge and opportunity for the future development of St Catherine's Hospital. Taking this into consideration, extensive investment has been made in recent years in renovation works in the nursing home, brewery, pub, forestry works, the parish church, and the hospital archive, including the installation of new fermentation and storage cellars in the Romanesque vaults. By switching the hospital's facilities over to using energy from renewable sources provided by the hospital's own forests, carbon and other emissions have been significantly reduced, thus contributing to improving the city's air quality. In Regensburg's oldest brewery, modern production facilities deliver beer of the highest quality to local markets. Furthermore, the archive of St Catherine's Hospital also serves as an essential component of the written cultural heritage of Regensburg and the entire surrounding region, housing among other things the oldest

documents and seals of the former Imperial Free City. Together, both the Stone Bridge and St Catherine's form a unique architectural ensemble in which the city's eventful past finds present reflection.