Marek Słoń

HOSPITALS IN THE CITY OF LWÓW IN THE MIDDLE AGES

There is a relatively large source documentation of medieval Lwów. The majority of municipal books from the 14th and 15th c. have been published. The records of the Lwów consistory for the years 1482-1498 appeared in print and many documents were published in the series *Akta Grodzkie i Ziemske* (Town and District Records). Information significant to the history of Lwów hospitals is also brought to light by modern sources: the description of the town by Jan Aleńpek, and of the Lwów archdiocese by Tomasz Pirawski, the accounts of Lwów archbishops and above all the chronicle by Józef Bartłomiej Zimorowicz and the same author’s description of the Holy Ghost Hospital. However, the literature of the subject is scanty. Józef Skoczek’s article is largely based on a document falsely attributed to the Holy Ghost Hospital. Other works make only a marginal mention of the subject. Nor has any monograph of the history of hospitals in medieval Poland appeared so far, while European literature on medieval hospitals is enormous. The majority of works from the 19th and the beginnings of the 20th c. are more contributions to the history of particular establishments. The analysis of the hospital as a social phenomenon and

1 J. Skoczek, *Ze studiów nad średniowiecznym Lwowem* (From the Studies of Medieval Lwów), Lwów 1928.


institution was subsequently taken up as a side-issue of such studies as those of the history of medicine, poverty, relations between town and Church. In the middle of the present century only the subject of hospitals was taken up as a separate research problem. Recently many works devoted to the analysis of concrete establishments or hospital networks in small areas were printed.

The city of Lwów emerged in the middle of the 13th c. The first foundation probably took place in the 1330s during the reign of Boleslaus Jerzy Trojanovic. A strong German commune certainly already existed there and the town’s position in the economy of the region was well-rooted. During Polish—Lithuanian fight over Ruthenia the town was burnt and Casimir the Great decided to rebuilt it in another place. Lwów received the document of locatio in 1356. The precarious political situation that prevailed over the subsequent years was not favourable to the realization of resolutions contained in this document. Only after 1360 could work of town creation go on at a quicker pace. During the next decade all the religious centres of the medieval Lwów that were later found within the town walls came into being. The constructions was started of the parish church, Dominican and Fransiscan convents, the Armenian cathedral and, most probably the Orthodox church and a synagogue.

The first mention of the Holy Ghost hospital comes from 1375. Already then it was a guide-mark in the town's topography: the term ex (opposite) hospitalis, used in this document, signified the location of a lot. The first endowment given to the hospital comes from 1376. According to

---


6 Akta grodzkie i ziemskie, (further cited as AGiZ), vol. IX, p. 1.
17th c. sources the founder of the hospital was Casimir the Great8. This tradition seems probable in the light of the above-mentioned facts. Thus, the hospital come into being in the 1360s, together with the whole town and its network of cult centres. It was situated near the walls. This is a location typical of the hospital in Polish towns of this period. The low price of such a lot was probably the decisive factor. However the Lwów hospital was also situated next to the parish church, which in the future was to be turned into the Cathedral — and this was something unusual. In the mentality of Lwów inhabitants the hospital became in a certain way combined with the Cathedral, creating together with it one cult centre.

The Holy Ghost Church appeared in the sources later than the hospital, only in 13999. It is not known whether it came into being together with the hospital. The patronage of the Holy Ghost appeared for the first time, both with reference to the Church as well as to the hospital, in the document of Halicz archbishop, Jakub Strepa of 1399, and has been consistently used ever since. Thus the document of 1418, permitting the foundation of a hospital under the patronage of St. Elizabeth, cannot refer to this institution. We known nothing of the financial situation of the hospital in the 14th c. It is possible that apart from the lot on which it stood it had no other property. The basis of its maintenance would be money contributions of the burghers10. We are in possession of information about one big bequest — a rich Armenian, a Catholic, bequeting the churches in Kaffa and Lwów as well as the Holy Ghost hospital11. In 1399 the Holy Ghost Church obtained its lot12. This is the first and the last grant of real estate to the church in the Middle Ages that we know of. In 1403 Piotr and Małgorzata Eisenhuttels offered to a poor-house a parcel of two “łan” (1 “łan” = about 24 hectares) outside the town13. It is possible that the garden in the suburbs mentioned in the years 1407–1409 lay exactly on those grounds. This can be inferred from the description of the hospital property from 1615 where no other hospital parcels are mentioned. This could be regarded as a trace of some

---

7 AGiZ, vol. III, p. 149.
8 T. Pirawski, Relatio status aliae Archidiecesis Leopoliensis, pub. K. Heek, Lwów 1893, p. 100; T. Długosz, Relacje arcybiskupów lwowskich 1595–1794 (Relations by Lwów archbishops 1595–1794), Lwów 1937, p. 24 (relation by J. D. Soltikowski of 1600). Zimorowicz dates the birth of the hospital to 1377; the quoted sources contradict it. This date may concern the beginning of the Holy Ghost Church, it is also possible that the birth of the hospital preceded by a few years the erection, which followed exactly in 1377.
10 AGiZ, vol. III, p. 94.
11 AGiZ, vol. III, p. 49.
successive bequest for the poor. In 1406 the hospital also possessed the lot lying in front of it on the opposite side of the street\textsuperscript{14}. Piotr Eisenhuttil as the administrator of the hospital, exchanged this parcel for another, directly adjacent to the poor house. In 1408, as a 17th c. chronicler tells us, the hospital was extended\textsuperscript{15}. During a few years that preceded this event it acquired a property that brought steady income as well as some space inside the town that was necessary for such an enterprise. At the same time the Holy Ghost Church obtained a place for a new, more sumptuous edifice. It seems that the proximity of those events in such a short time was not accidental. The planned investment was prepared in advance. Thus the burghers’ charity was to a certain degree directed by the hospital management. In part it simply came from the people in charge of the poor-house and persons connected with them. Piotr Eisenhuttil was at the same time the administrator as well as benefactor of the hospital. Leonard, who offered to the hospital the lot in the town, was Piotr’s next of kin. Marcin Cromer, the administrator in 1440, a year later bequeathed to the hospital 50 marcs\textsuperscript{16}.

Following a period of great activity at the turn of the 14th c. there came a long interval. One can surmise that the town directed its efforts to build a suburban hospital, erected in 1418. This however does not explain why no larger legacies are recorded in the books and documents of this period. In 1423 the Town Council began legal proceedings against the church authorities over the control of the hospital\textsuperscript{17} this uncertain legal situation did not favour donations. Another wave of gifts to the hospital came in 1441, when there was a plague in the town. Big grants for charity followed the epidemics. A burgher, Mikołaj Crawczc donated a garden, and Michal Folmes’s wife two gardens. Marcin Cromer did not give land to the poor, but offered them a large sum of money: 50 marcs\textsuperscript{18}. Among the same group of legacies can perhaps be counted that by Jan Trautverlein: in 1440 he offered the hospital a vineyard. Most probably the plague started already in 1440; it is also possible that the date of the grant was not correctly written. The 17th c. author\textsuperscript{19} who transferred it to us, probably made use of a lost aldermen’s book; the years were recorded there only together with the information about the election of aldermen. In 1441 such an election might not have taken place.

\textsuperscript{15} J. Zi m o r ow i cz, Opera, pub. by K. Heck. Lwów 1899, p. 78.
\textsuperscript{17} AGiZ, vol. III, p. 185.
\textsuperscript{18} Pomniki, vol. IV, rec. 103; p. 31, rec. 226 and 230.
\textsuperscript{19} T Piraw ski, op. cit., p. 102
at all, due to the plague, so a mistake is probable. At any rate the hospital received three land grants in the period of one or two years only. The list of the estate made in 1615 mentions however only one vineyard. The mystery is easy to solve. Marcin Cromer finished his last will with the following clause: as long as the plague prevails, he cannot change the legacies he made; however, if he survives, he reserves for himself the right to withdraw them. The above mentioned three gardens were granted without such a reservation, but it is quite possible that the hospital never received them. It should be noted, however, that the ex silentio inference must be applied with great caution. These gardens could simply have been sold. The question of the great but short-lived generosity of the burghers during the plague will be discussed later on.

The biggest grant to the hospital was made in 1457. The nobleman Jan Chodorowski bequeathed to the town poor three villages in his last will. In 1492 the Council exchanged those three for one, bigger village, placed nearer to Lwów. Earlier on, in 1471, the hospital received two parcels from a priest Rev. Mikołaj. Two other considerable legacies come from the end of the 15th c. Dorota Majzel, a Lwów townswoman, offered a garden, and Fryderyk, a nobleman, everything that belonged to him in “real estate, grove, mill, customs—house and peasants”.

Thus endowments to the hospital came from all social groups. The founder as was told probably the Polish King Casimir the Great. The King Ladislaus Jagiello also contributed to the development of the hospital in 1408. The noblemen’s legacies that we know of were few, but this can result from the character of our sources; however one, that of Jan Chodorowski, considerably surpasses all others. The weakest, though also distinct, is the contribution by the clergy. The hospital was chiefly maintained by the town. However money from the town treasury seldom went that purpose, and they were small sums, anyway. Much greater were contributions made by members of the urban elite and, however more seldom, by common burghers. Thus the hospital should not be treated as an exclusively urban institution, although it was rooted most strongly in the urban environment.

The church and the hospital were separate both in an organizational and financial aspect. The first bequests already defined exactly the destination

20 They could have been sold, but nothing is known about it. The appropriate document was not known, either, to the 17th c. researchers Pilawski and Zimorowicz.
22 Pomniki, vol. III, p. 102, rec. 345, 1423; Domini consules solverunt de pecuniis civitatis V sxxg. Erazmo pro lignis quos dedit pro infirmis ad hospitale.
of donations — either to the hospital (e.g. Taiczadin’s last will of 1376) or to the church (e.g. Mikołaj Bolcz’s last will of 1399). This principle was observed consistently throughout the Middle Ages. The hospital’s rector represented the church and managed its property. At the beginning of the 15th c. this function was performed by Rev. Jakub. Although his relations with the town were good, he never represented the hospital before the Council\textsuperscript{23}. The funds of the poor-house had to be managed separately. In 1403 Piotr and Malgorzata Eisenhuttils granted some land outside the town to the hospital. The Halicz archbishop, Jakub Strepa, while confirming the last will and quoting the first names and surnames of the towns’ councillors, called them \textit{testamenti tutores executores, gubernatores et dispensatores}\textsuperscript{24}. At the same time he made a reservation that the rector of the hospital has no right to administrator this land. Thus probably the Council started to manage the property of the hospital as the executor of concrete last wills, from which this property came. In 1406 the term \textit{tutor infirmorum} appeared for the first time — it was Piotr Eisenhuttil, Lwów councillor\textsuperscript{25}. We find this mention however not in town books but in the notes of J. B. Zimorowicz, who could have used a term known to him in the 17th century but lacking in the 15th century original. The assumption of Zimorowicz was justified by the situation in which the said Piotr appeared: he exchanged the lot belonging to the hospital for another parcel. If at the beginning of the 15th c. there was no office of the hospital administrator, the Council at any rate chose its body a person who administered the property of the poor-house. In 1415 the hospital’s interests were represented by Klemens Czedlicz, a future councillor\textsuperscript{26}. In 1418 the Council founded another hospital, reserving for itself permanent control over its property. The foundation document said that the councillors \textit{laicum in rectorem, provisorem nuncupaturn deputarunt, qui huiusmodi confluentes pie tractare et necessaria cis iuxta ipsius hospitalis facultatus ministrare, ac de per eum gestis, factis et administratis racionem consulibus et civibus predictis duntaxat reddere tenetur}\textsuperscript{27}. Here we see a fully shaped office of the administrator, but it is not the administrator of the Holy Ghost Hospital. In 1423 the case between the town authorities and the rector over the control of the hospital was tried in the count. We know neither the concrete litigious points or the final verdict. In 1426 the funds of the poor administered by Matis Czedlicz, the above — mentioned Klemens’s kinsman. In 1441 he claimed hospital rights to the suburban grounds of the Jan

\begin{itemize}
  \item \textsuperscript{23} \textit{AGiZ}, vol. III, p. 133; \textit{Pomniki}, vol. II, p. 17, rec. 71, 1406; p. 22, rec. 94, p. 49, rec 155.
  \item \textsuperscript{24} \textit{AGiZ}, vol. IV, p. 12.
  \item \textsuperscript{25} K. Badecki, \textit{op. cit.}, p. 531.
  \item \textsuperscript{26} \textit{Pomniki}, vol. II, rec. 77.
  \item \textsuperscript{27} \textit{AGiZ}, vol. III, rec. 433; vol. IV, rec. 182.
\end{itemize}
Trautverlein. From a 17th c. list of hospital property we know that about that in the first half of the 15th century Jan Trautverlein donated to the hospital a vineyard. A year earlier, in 1440 the issues of the hospital were handled not by Czedlicz, but by Marcin Cromer. This situation can be explained in various ways. The Council might have appointed not one, but two or more administrators. It might have assigned the function of administrator for a short time, e.g. a year (this was the term of the Council’s operation). In 1443 the hospital funds were already in the hands of Mertin Fymargte. In 1444 the Council established a school in the hospital. The church authorities, confirming this foundation did not mention church rector or his consent. Apparently the church acknowledged that the hospital matters were exclusively directed by the town councillors.

In the 1446 we find for the first time the term *spitelmeister* in the town books. Some light at the function of this office in thrown by the last will of Rev. Mikolaj made in 1471. It contains the following clause concerning the income from the land granted: *Superadicti domini consules prefato domino Nicolao presbiiero de eisdem proventibus per provisorem seu procuratorem prefati hospitals, qui per prefatos dominos consules modo et pro tempore deputatus fuerit, dent et tribuant singulis annis undecim marcas pro sustentacione et nutrimento suo usque ad finem vitae sue*. Thus the Council chose, at a fixed time, one administrator, and through him it exercised complete control over the hospital property. More information is revealed by the verdict in a trial from 1503. It contains a confirmation of old practices, explains matters that had aroused doubt so far, and carries new legal regulations. Thus particular records cannot be automatically referred to the post. However, the basic line of division: the hospital and temporal needs on the one hand and the church and pastoral care on the other seems to be confirmed in the light of the quoted mentions and comparative material.

The verdict remarks also that two matters, i.e. the management of the hospital and of the funds destined in the last wills for the maintenance of the poor in the hospital, are in the charge of the Town Council and its administrator *ab antiquo*. This line was not questioned, at any rate, by the parties in the course of the triad. The litigation solved here did not concern the control of the hospital property, but only of its small part, and some

---

32 AGiZ, vol. VI, p. 146.
34 Ibid., p. 211, 212.
secondary questions of competence. As form particular questions touched on in the verdict, only in one case we informed about the state of affairs before 1503. Two serfs from Podchorce, who constituted one of the subjects of litigation, belonged to the hospital and were subject to the municipal administrator. Thus, it was probably the rector and not the town that initiated the trial. The property of the poor-house was under the charge of councillors from the very beginning. Casimir the Great as a rule left the hospitals founded by him in the charge of municipal authorities. In the course of litigation with the hospital rector the scope of the administrator’s competences was precisely defined. It seems improbable, however, that it could grow substantially at the cost of the church in the 15th c. On the contrary, it was the rector himself who tried to enlarge the scope of his power. Thus with reference to medieval Lwów one cannot speak of a process of communalization of hospitals. In the 1360s, when the Holy Ghost Hospital was founded, the town had already its collective authority, the council, a stabilized, relatively high income and ready patterns of welfare solutions. These patterns were in the first place offered by the city of Cracow, with which Lwów had closest connections. The office of a municipal administrator appeared there as early as in the first half of the 14th c., before the foundation of Lwów. The church organization in Lwów was then only in the making. Thus here we have to deal with a situation contrary to the majority of Polish towns where during the emergence of hospital network the town self-government was only the making while the church structures were already stabilized.

The conflict over the control of the hospital had not only economic reasons. The poor-houses was a welfare institution which played an important role in the structure of the urban community, softening the sharpest social contracts, it was a sort bridge between the narrow elite of the town and those who constituted the opposite pole. All the hospital administrators known to us were the richest people in town, several times its councillors; only Lorenz Bolcz never belonged to the Council, but he was an alderman throughout the fifth decade of the 15th c. Some families performed this function from generation to generation. Klemens Czedlicz was the administrator as early as in 1415. In the years 1423–1440 we encounter in this role his son, Matis. Besides Leonard, the hospital benefactor, his next-of-kin Piotr Eisenhuttil also had connections with the poor-house. In 1399 Mikołaj Bolcz endowed

the hospital church with a lot in town. In the 1440s another representative of the family, Lorenz, performed the function of administrator. Thus there was a special bond between the representatives of the ruling elite and the hospital inmates. Both groups were composed of laymen. The fact that the Council exercised complete control over the property and vital questions of the poor resulted that the hospital de facto ceased to be a church institution. But it did not cease to be a religious one. Offerings for the sake of the hospital resulted above all from a fear of death, or strictly speaking of what comes after it. The growth of the burghers’ generosity during the plague is characteristic. Also in comparison with the legacies towards other devotional purposes the role of the hospital clearly grew at that moment. This did not result from any greater needs of the hospital during the plague. The justification of Piotr and Małgorzata Eisenhut's last will of 1403 is significant: volentes die extremi iudice misericordie pervenire. An offering for the sake of the hospital was viewed as a special combination of a charitable deed and service to the Church. At the same time one gained a prayer, which was a basic duty of the poor-house inmates, even if it was not expressed explicite in the given last will. When in 1423 there was a litigation about the control of the hospital, the king justified the necessity to finish it as soon as possible in the following way: ut divinus callus in die hospitali non impediretur nec minueretur. Therefore a hospital was always, also in all cases in Lwów, accompanied by a church, or at least a chapel. Each poor-house had to have its own pastoral service. Prayer, as a basic duty, brought the poor in the hospitals closer to the clergy. They both created a group of collective life: they lived, ate, and took part in the services together. The inmates of the hospital were subjected to special rules and moral control. Although they were not ordained, they stood between the clergy and the laymen. The borderline between these two groups was not sharp.

Extant information concerns only a few hospital inmates. The largest group are clergymen, curates—pensioners (vicarii graciales), who performed the liturgy in the Holy Ghost Church; we know four names from the 1480s and three from the 1490s. In 1486 it seems that also Stanisław, the hospital provost (prepositus), lived with them. Probably also part of the

---

37 Pomiczki, vol. VI, rec. 2347, 1448.
38 AGiZ, vol. IV, p. 11.
39 K. Dola, op. cit., p. 442. In the case of Lwów only one will, by the nobleman Jan Chodorowski, assigning three villages to the hospital, contains a clause specifying the prayers to be said by the poor. AGiZ, vol. V, p. 200.
pupils of cathedral school found shelter there, which I shall discuss below. We know only three persons from among the laymen. Jahonnes contests 30 groszes due to him, in lawsuit at the consistory, through his representative. One of the hospital curates sues before the episcopal court *honestam Katherinam de hospitali*42. We know somewhat only about the third person. A female named Jadwiga was for six years a servant of Busko town mayor. Paweł Dyrdza, a seminarist from the same locality deflowered her by rape and left her with child. Jadwiga moved to Lwów and settled in the hospital. She made an agreement with Paweł, on the strength of which she was to receive from him cloth and jewelry of total worth 50 groszes. From the mayor of Busko she demanded at least 6 mares as the overdue remuneration for service43.

The hospital inmates in gremio were defined as *pauperes* or *infirmi*. We do not know the foundation document of hospital. However in two last wills, a burgher’s from 1403 and a nobleman’s from 1457 we find the same definition of the hospital’s role. The benefactors give their offerings “pro sustencione — *pauperum hominum, ut pote infirmorum, claudorum, cecorum et aliarum, qualicumque miserabilium personarum*44. The identity of these two records, so distant in time and in social character, seems to be the result of copying a suitable fragment from the charter of foundation. At any rate this formulation can be treated as the declaration of the hospital’s contemporaries about the purpose of its existence. It is worth mentioning that the initial definition, pauper, has a very broad meaning here. These “poor” embrace the sick, the infirm, the disabled and generally all those deserving charity. There is no basis however, to translate the adjective pauper as “poor”, i.e. a person without sufficient means to satisfy his (or her) existential needs. Also in other sources from the 14th—15th cc. the inhabitants of the Lwów hospital appear as *pauperes*45 or *infirmi*, never as beggars — *mendices*. Not did any of the persons known to us name live in miserable conditions. The term *honesta* in the case of Katarzyna was not used with reference to the lowest social strata. Johannes not only sues for a large sum, but also can afford to hire a representative. Jadwiga probably had her remuneration for five years of work. As a recompense for the harm suffered she accepted among other things *monilia*, not the most essential of articles. So the criterion on the basis of which people were admitted to the hospital was not poverty. By calling the Lwów Holy Ghost Hospital a

---

“poor–house” we are merely using a conventional term, accepted in the literature. However it cannot be taken literally. The liturgy at the hospital alter was performed in the presence of “trustworthy persons”46. Michel Mol I at has gathered many examples of hospitals where there was no place for the poor47. The lack of sources does not allow us to investigate into the connections of the hospital and its inhabitants with the milieu of the “town poor”. However its strong links with the Lwów ruling elite do not arouse any doubt. Jadwiga, because of harm done to her, found herself outside the society in which she had lived so far. Probably this was why she was admitted to the hospital. We can surmise that the hospital was destined for the people who for various reasons could not occupy their due position in the urban community; naturally the terms “poor” and “pauper” are not opposite. Pauper is also, although not always, poor. One cannot deny the presence of the poor in the hospital, but the paucity and character of sources do not allow to draw more concrete conclusions. The care of the poor, despite the fact that we understand this term differently now, was a form of Christian charity. The phrase used in the consistorial records of 1498 is significant: pro elemosinis pauperum hospitalis Sancti Spiritus. The case of Jadwiga carries two other important pieces of information. In the first place, the hospital admitted also persons from outside the town. In the second place, she probably lived there together with her child. It is probable that there was a separate ward for women.

The term infirmaria, as an alternative name of the hospital, was used as consistently as pauperes for its inmates. All the last wills that survived in full, call the hospital an infirmaria. So at the basis of the hospital’s function lay the care for the sick. This was not tantamount to qualified medical care. Lwów had no physician of its own, one was brought only once, during the plague, and was sent him back after it receded48. Simpler medical treatment could be offered by surgeons, barber-surgeons or even bath attendants. Also the administration of medicines did not require the presence of a physician. At any rate a sick, especially poor person, needed more a roof over his head, a bed and regular meals, than the presence of a physician. The hospital was an institutionalized form of Christian charity, and ensuring the poor sick persons decent conditions of life was a more concrete act of piety than paying for the frequently ineffective medical intervention.

The internal organization of the hospital can be sized up only at the beginning of the 16th c. The duties of the vitricus embraced watching over

47 M. Mollat, op. cit., p. 271.
48 Ł. Charewiczowa op. cit., pp. 21–22.
the behaviour of the inmates. This required constant control over what was happening in the hospice. As the vitricus did not live there, there was a need to appoint a deputy. This eventuality is indicated by a record in a law-suit document, saying that an unruly poor person could be admonished by the vitricus himself or by an appointed person. It seems that this role could best be performed by one of the hospital inmates.

Among the expenditures specified in this source there was no remuneration for the personnel, however, the list expenditures is not full and the ex silentio conclusion is only of hypothetical value. The vitricus drew profits from turning over the capital that formally was the property of the hospital. In Silesia this function was usually performed by the curate of the hospital — provost; in this case he had the title of master (magister, meister). Nothing shows that things look alike in Lwów. The title spitelmeister appears twice — with reference to Lorenz Bolcz, a long-term alderman. He administered the hospital funds. Spitelmeister in this case means the administrator. The suburban hospital initially had a magister. His duties, however, embraced only ministry, so there is no analogy with Silesia either. Such duties as supervision of discipline in the house, cleaning, cooking, were probably performed by the appointed inhabitants of the hospice. There had to be a kitchen in the poor-house, its presence is confirmed by the records of a law-suit from 1503 (coquina pauperum). Taking care of one’s clothes was an individual duty. This is evidenced by a regulation that the clothes of the poor become the property of the hospital only after their death.

Hospitals usually had a statute, written down and approved by the town authorities. We do not know what looked in Lwów. The only indication is the fact that the vitricus was to admonish and evict the excessivos et enormos poor; thus there to had to be a set of norms that obligated the inmates. The curates of the hospital, although they lived together with the inmates, were not members of the hospital community. Even their right to make use of the common kitchen had to be indicated separately. Probably they were not the vitricus’s subordinates. When one of the curates was to be removed from the hospital, the suit was placed at the consistory.

Little can be said about the standard of life in the hospital. The verdict of a trial of 1503 contained a clause that required to deal out from the kitchen for the poor a portio carnium. Meat as such did not constitute a distinctive

---

51 Ibid.
54 AGiZ, vol. IX, p. 212.
feature of social status. Most of the giblets, worse pieces and leavings constituted the common food of the poor. More significant is the information about the regularity of these meals. Moreover, the fact that the existence of *portio carnium* was a matter for debate between the provost and the Council may indicate its significant value. The poor in the hospital were given the bread that was sold without the observance of guild privileges and was therefore confiscated by the municipal authorities. We do not know how frequent such cases were. Certainly they were not sporadic, since the Lwów bakers obtained a special privilege from the king in this matter. Hunger and chronic malnutrition were at the time frequent phenomena among the town poor. Thus the inmates of the hospital were clearly in a privileged position. However, both pieces of information that we possess on the subject of the poor meals come from normative records, thus the formulated conclusions can be merely treated as probable. Little more can be said of the clothes worn by the poor. When one of the inmates died, the *vitricus* used to hand over his clothes to others, so these were not rags, fit only to be thrown away. On the other hand there was nothing unusual in wearing clothes left by another person, especially among the poorer people. The fact that this matter was the subject of litigation in 1503 indicates again, just as in the case of food, that the value of these clothes was not negligible. This interpretation seems probable in the light of the burghers last wills. Dorota Majzel, a rich Lwów female burgher, described in her testament the destination of all her clothes. To Jadwiga Kunczyna, *attenta eius pauperitate*, she bequeathed *tunicam suam rumbram et omnes vestes albas*. She also ordered to sell all her other clothes and to distribute among the poor all the money coming from the sale. In 1441, during the plague, one of the burghers bequeathed to the inmates his best coat and tabard. Thus the handing over to the poor of quite good clothes was an accepted practice.

During a trial of 1503 a litigation was solved about the bedding left by the deceased inmates. Thus one can infer that they slept in their own bedclothes. After the death of the owner they were to serve other inmates. This indicates that the condition of these bedclothes to be relatively good.


56 AGiZ, vol. IX, p. 121, 1479.
57 AGiZ, vol. IX, p. 212.
The book of town accounts carries an interesting piece of information, although it is hard to interpret. The Council bought wood for the hospital for 300 groszes\textsuperscript{60}. Unfortunately we do not know in what season of year it occurred. The wood could be timber; the above remark could testify to the endeavours of the town authorities to maintain the building in good repair. If the bequest took place in winter, one could speak with considerable probability about warming the hospital during cold weather.

The description of the housing conditions, and even the very size of the hospital encounters serious difficulties. At the end of the 14th c. there certainly existed the Holy Ghost Hospital and Church. Following the death of Jakub, the hospital rector in 1399, the lot situated \textit{in vico prope hospitali}\textsuperscript{61} was to become the property of the church. In 1405 the hospital received the lot lying next to it\textsuperscript{62}. Two years later the hospital was developed. The point was probably to include the gained space and buildings in the hospital premises. The poor–house would then occupy at least two lots. The description of the hospitals Holy Ghost revenues, made by Zimorowicz at the beginning of the 17th c. allows us to recreate in our minds the internal arrangement of the hospital in this period\textsuperscript{63}. Certainly it was not the same building that stood there in the Middle Ages; the poor–house was burnt in 1527 and in 1564. However, its dimensions probably did not change\textsuperscript{64}. Earlier sources lacking, it seems worth while attempting such a reconstruction. The results gained agree with what we know about similar 15th c. hospitals in Pomerania, Germany and Italia; a frequent solution was to build big, collective rooms on the ground floor and small, individual rooms on the upper storeys\textsuperscript{65}. Such arrangement was also at the Cracow Holy Ghost hospital. The Lwów poor–house at the beginning of the 17th c. looked as follows: on the ground floor there was an entrance–hall, and further the so–called Beggars’Room and the Back Poor–People’s Room. Under the stairs and in small halls that joined these rooms there were small cubicles.

\textsuperscript{60} Pomniki, vol. III, p. 102, rec. 345, 1423.

\textsuperscript{61} AGiZ, vol. II, p. 53.

\textsuperscript{62} K. Badecki, \textit{op. cit.}, p. 531.


\textsuperscript{64} J. B. Zimorowicz \textit{Opera}, p. 131. In his chronicle Zimorowicz relates precisely the history of the hospital, but he does not mention any development after 1408.

HOSPITALS IN LWÓW 19

rented out cheaply to single women. The rooms on the first floor had a similar destiny, but were larger and more expensive. The third storey was a spacious attic, also rented out. “The room with a chamber” on the ground floor was inhabited by the priest. Also two accommodations owned by the hospital in the cathedral cemetery were destined for clergymen. The baths which adjoined the hospital building were not its property.

We do not know, even the approximate number of inmates of the hospice. Moreover the comparative material allows one to surmise that this number was not stable: it grew in winter and decreased when it ceased to be cold66. Besides the accommodations the poor the hospital housed two altars, a school accommodation and separate rooms which could belong to clergymen and pupils of the cathedral school. It is probable that there was also a female ward. Late medieval hospitals usually had separate rooms for women and for men — this would correspond with two rooms on the ground floor. Some general conclusions about the standard of life in the hospital can be suggested by the regulation about the possibility of evicting the poor person who does not observe the established rules67. The conditions prevailing there had to be relatively attractive, since the threat of eviction could be seen as an instrument of pressure. Thus the inmates were a privileged group among the town poor. This resulted both from the degree of satisfaction of their needs and stabilization. It seems that was a factor that furthered the isolation of this group from the members of the lower social strata of the town.

The source documentation of the Holy Ghost Church is much more scanty than that of the hospital. Its legal position is not clear. In 1407 the Lwów vicar, Jan Rusin, made a complaint to the Pope that the Halicz bishop Jakub deprived him of control over the Holy Ghost hospital68. The superior authority of the parish church over the hospital in the light of this record seems an accepted norm. Jakub was its rector as early as in 1399, probably still appointed by the previous vicar69. In the dispute between the Council and Jan Rusin probably took the side of the townspeople. The Council used to hire him as its barrister and to send him to Cracow in the town’s matters. In the law-suits over the control of the hospital the church party was always represented by the provost of Holy Ghost Church and rector of hospital in one person, at the same time, a member of the chapter. The king, as the founder of the church, reserved for himself the right to appoint the holder

68 AGiZ, vol. IV, p. 32.
of this office. In 1488 a certain Stanisław was deprived of the function of the hospital’s provost. On February 22 the same year Jan Myszkowski demanded in the king’s name a reappointment of the provostry of the Holy Ghost Hospital. Stanisław, Lwów canon and official, answered that it was not fitting to undermine the already made choice of magister Tomasz, however out of respect for the monarch he would consent to the order. In 1503 the said Jan Myszkowski was the provost. We do not know whether the king caused twice the displacement of the rector from the office in order to introduce his own man, or whether this was the initiative of Jan Myszkowski himself, who wanted to obtain this office. At any rate he took advantage of the ruler’s support. And oddly enough it was he who made an attempt to extend the competences of the church in the management of the hospital, at the cost of its municipal administrator.

The Holy Ghost Church was not the only place of worship for the inmates the hospital. There were two altars in the hospital building at which services were held. It seems obvious that the church near the hospital would gather most of the inmates at the liturgy. There are, however, no contemporary testimonies to that. The bequests for the sake of the poor obliged them to pray for the benefactor. It had to be said collectively, so that this duty could be exacted. The donors were probably intent on it, since they mention exactly how many and what prayers should be said. The records of the 1503 trial show that the Eucharist was administered at the Holy Ghost Church. Probably sermons were delivered there too. Jan of Dukla was supposed to be the German preacher in this church. This information, recorded by a 20th c. biographer, may come from the beatification documents written in the 17th c. Sermons in hospital churches were a frequent phenomenon. It’s worth drawing attention to the fact that the Franciscan convent of which Jan of Dukla was at that time a member was situated near the hospital, and this religious order was especially closely linked with the pastoral care of the poor.

It’s also worth mentioning the hospital’s links with the school. The latter was from the very beginning situated near the hospital. Piotr of Zakszyn, the provost of Holy Ghost Church in 1423, three years later was a

---

75 H.E. Wyckowsk i, Błogosławiony Jan z Dukli. Życie i część pośmiertna (The Blessed Jan of Dukla. Life and Posthumous Worship). Kraków 1957, p. 22.
In 1444 the Council received a permit to found a school in the hospital itself, however in such a way that the rights of the poor and the sick should not suffer. This foundation probably fell through. The municipal authorities from the very beginning of the Cathedral school’s existence tried to gain influence on its work. After the bishopric was moved to Lwów and a chapter was created there, the school was probably subjected to the cathedral and the Town Council was at the same time deprived of the right to interfere with its affairs. The councillors, making use of the advantageous situation in 1444 (preparation for a war against Turkey, a conflict between the bishop and the Lwów chapter) succeeded in gaining a consent to found a parish school. In this situation the chapter at the cost of giving up the project of parish school, agreed to have the teachers in the old school proposed by the municipal authorities. Although the conditions under which the school worked are known to us only from the agreement of 1514, we can be sure that the chapter came to an understanding with the Council in 1448 at the latest. Thus the above mentioned document of 1444 does not prove the existence of a school in the hospital. The very initiative is, however, interesting, as it shows that there were close links the two institutions. Probably some of the pensioner-inmates performed the function of teachers: one of them possessed a large collection of books. Among the pupils of the Cathedral School there were paupers. In 1508 Jan Krowicki, the Lwów canon, paid for their free use of the baths. The proximity of the hospital to the school, the presence of teachers and a comparison with the situation of pupils in other towns allows build a hypothesis that some of the scholars lived in the hospital. This could serve as one more indication of the close links between these two institutions. The hospital and the school, side by side with the parish church, the town hall and the town fortifications constituted a group of public buildings that served the whole town community.

The Holy Ghost Hospital was not the only one in medieval Lwów. In 1418 Pope Martin V ordered the bishop of Przemyśl to confirm the foundation of St. Elizabeth hospital in Lwów. On the reverse of this documents, as the editor says, there were two inscriptions: Hospitalis Elisabeth nunc vero Sancti Spiritus, and Anno domini 1626 die vero Veneris 10 mensis Iuly oblatum et actis consistory Premisliensis connotatum. On the basis the majority of the hitherto researchers acknowledged this documents as refer-

---

78 J. Skowroński, op. cit., pp. 119–120.
79 AGiZ, vol. IV, p. 94.
ring to the Holy Ghost Hospital. The change of patronage was explained as follows: after 1418 a chapel dedicated to the Holy Ghost was founded next to the hospital and the latter with time took over this patronage. But as early as 1399 a document tells of the Holy Ghost hospital and Church. The same patronage of the hospital is mentioned several times in the years 1399–1418. The quoted concept of linking the St. Elizabeth and Holy Ghost hospital cannot, therefore, be accepted. A document from 1418 mentions a separate foundation. However, there is no other extant information on this subject. The fact the hospital served the people from outside the town suggests that its site lay outside the town wall, probably near the bridge and rather near the Cracow route, since this was the route along which the new population flowed to the town. However, faced with the lack of direct source evidence on the subject of the location of St. Elizabeth hospital, we can only formulate some hypotheses. Probably as early as in 1425 (spital den armen sichen) and most certainly in 1441 (legat pro cibis infirmorum leprosorum foras civitatem ante portam cracoviensem), there was a leprosorium in front of the Cracow gate. It’s worth mentioning that this need not have been a canonical erection, but it might have only a community of the sick. This leprosorium existed still at and of the 15th c. The consistorial records mention the collector of funds and the provost of the lepers. The latter, named Jakub, may be, as it seems, identified with the presbyter Jakub from St. Stanislaus Church who lived in the St. Stanislaus Hospital. Jakub of St. Stanislaus’ frequently appeared in court in the years 1490–1498, once as Iacobus prepositus ad sanctum Stanislaum presbiter gracjalis. Iacobus prepositus leprosorum, on the other hand, appears only once, in 1494. It seems probable that the leprosorium was a branch of the St. Stanislaus Hospital. It was situated in front of the Cracow gate, near the bridge on the highway leading to Cracow. On both sides of the highway lay the terrains belonging to the town. Another highway, leading from the Cracow gate to the town of Zółkiew, went through a suburb inhabited predominantly by Ruthenians and subjected to the king’s official (starosta). The leprosorium was probably situated near the St. Stanislaus Hospital. On the same site, according to our hypothetical localization, stood the St. Elizabeth hospital.

80 The first to say it was T. Pirawski, op. cit., p. 100; J. Skoczek, op. cit., pp. 93; Fr. Giedroyć, Zapiski do dziejów szpitalnictwu w dawnej Polsce (Records of the History of Hospitals in Old Poland), Warszawa 1908, p. 12.
It is possible that the beginnings of the leprosorium should be connected with this foundation. In sanitary emergency the only suburban hospital, with its own cemetery, might be devoted to this purpose. The mutual connections of the three suburban institutions, that of St. Elizabeth, St. Stanislaus and the leprosorium, must however remain the subject of mere guesses.

St. Stanislaus Church was a brick building. According to a 16th c. chronicler it stood out from other Lwów churches because of its beauty. The founder was probably the king. We learn of the church’s property only from 17th c. accounts; it was very modest. Also the bequests to the church were small and rare. At the end of the 15th c. in consistorial records appears gracjalis lector ad ecclesiam sancti Stanislai who soon after bears the title of the provost of this church. It is possible that at that time the St. Stanislaus Church gained the status of provostry.

It is worth dwelling on the origin of both Lwów hospitals. The first — of the Holy Ghost — was destined for the poor, among whom a group of paupers unable to work occupied a special position. Such persons, without the assistance of the town would by quite destitute. They could support themselves only by begging, and so they usually stood at some busy and conspicuous places, most often in front of the churches. Their sight was bound to arouse both pity and repugnance of the rich members of the town elites. And it was precisely in this situation that we should look for the origin of the town hospital. If its benefactors mentioned the motives that inclined them to bequest, it was always charity. The foundation of the hospital allowed them to choose a group of “honest” poor people and the ensure them decent conditions of life. It solved, or at least softened the conflict of conscience. It gave basis for removing from the main points of the town those who aroused both anxiety and disgust. It can be doubted whether the hospital ever gave shelter to all the needy. At the turn of the 14th c. intensive action was taken to enlarge it, in 1408 the hospital was developed. It can be surmised that this action was caused by the rapid growth in the number of the poor. Paupers continually came to Lwów, mostly from the West. The Council decided therefore to keep them outside the town gates. It founded a hospital pro peregrinis, pauperibus infirmis et miserabilibus personis, ad

86 Si. Rachwal, Jan Alenpek i jego “Opis miasta Lwowa” z pocz. XVII w (Jan Alenpek and His “Description or the Town of Lwów” of Early 17th c.), Lwów 1930, pp. 14–15.
87 T. Pirowski, op. cit., p. 116; Pomniki, vol. IV, p. 31, rec. 230, 1441 (12 marces, about 5% of the sum assigned for devotional purposes); Acta, vol. II, p. 180, rec. 741, 1492 (10 marces, the sum assigned for devotional purposes in not known); AGiZ, vol. VII, p. 191, 1495 (a garden, about 2–3% of the value of property designated for devotional purposes).
The old hospice was thus destined for the town’s “own” paupers and the foundation had its basis in religious commitment. On the other hand the hospital outside the town wall was destined for “the aliens” and its construction was an attempt to solve an urgent social problem. The comparative material allows one to surmise that the views on the subject of poverty and the character of social welfare changed during the century that followed the foundation of the Holy Ghost Hospital. We know that at the end of the 15th c. the admission to the hospital was not decided by the fact of material destitution and that people from outside Lwów were accepted.

At the beginning of the 16th c. the West-European towns saw a rapid growth in the numbers of the poor. Similar processes of pauperization in the country caused at the same time a mass influx of paupers to bigger urban centres. The hitherto forms of social welfare were not able even to alleviate the problem. The dimension of the phenomenon caused it to cease being a problem of Christian charity, although the crisis of conscience was stronger than ever before. A solution to this problem became necessary for retaining the social, economic and political stability of the town. The actions of the municipal authorities went in two directions: the halting of the influx of “alien” paupers and the taking over of full control of the institutions of welfare so as to set them in order.

The actions taken by the Lwów councillors over a century earlier, despite some obvious analogies, are not part of the same process. Quite different was the scale of the phenomenon and the degree of the town’s commitment to the solution of the problem. In town books there is no trace of any interest of the Council in the suburban hospital. Not did the charity of the burghers concern it in any significant degree. No attempts were made, either, to deprive the Church of control over the hospital.

Finally it is worth to ask a question about the position of the hospital in the life of the town. What portion of property bequeathed to devotional purposes was destined for charity. We have to analyze 11 burghers’ last wills. In this group the legacy of Rev. Mikołaj is also ranked. He appeared as a private person, the document did not even specify (apart from the general term presbyter) his church rank, but it stressed that he was discretus dominus. He offered hereditatem patrimonii sui — it was a field that lay between the burghers’ grounds. Thus Mikołaj, son of Błażej, despite the fact that he was ordained, can be regarded as a representative of the Lwów burghers. Of the last wills under discussion seven hand over the whole, or almost the whole specified property to one devotional purpose. In three cases

\(^{89}\) AGiZ, vol. IV, p. 99, 1418.
it was the Cathedral or one of its altar foundations, in one case the Dominican Friars, in two cases the hospital and in one case the hospital church\(^90\). Thus the hospital occupied a position equal to the Cathedral, and a much better one than mendicant convents. Each of the remaining last wills includes the majority of Lwów Catholic churches as well as charitable purposes. Within the property destined for devotional purposes the offerings for the sake of paupers constituted twice (in 1376 and 1442) 20%, once (in 1441) 15%, whereas once (in 1445) about 10% (because of a lot of donations in kind and of undefined quantity one should accept here a large margin or error)\(^91\). The charitable offerings always included the Holy Ghost Hospital. To all the burghers the Holy Ghost Hospital was the most important welfare institution and constituted an important element co-creating their town. On the other hand many of them saw in it — besides the parish church — the most important factor of the town’s religious life. It is worth recalling the connection of the richest Lwów families with the hospital, extending over many generations and the special location of the poor-house: next to the chief church of the town, a Cathedral and a parish church at the same time. The status enjoyed by the hospital is best evidenced by the ceremony that accompanied its development: *Rex Leopolis praesens: cuius munificentia nosocomii civilis habitancula angusta in ampliorum formam redacta sunt*\(^92\). The preparations for this event, as recorded in writing, show unequivocally that the initiative of the whole enterprise came from the town. In the Middle Ages the hospital was not marginal to the town’s life. The devotion of the Lwów burghers was in a large measure centres exactly on this institution.

*(Translated by Agnieszka Kreczmar)*


\(^{92}\) J. B. Zimorowicz, *Opera*, p. 78, 1408.
Vol. LXXIII, 1996

CONTENTS

STUDIES

Stanisław Russocki, La culture politique et juridique en Pologne et en Bohême au seuil des Temps Modernes. Position du problème

Wojciech Kriegseisen, Between Intolerance and Persecution. Polish and Lithuanian Protestants in the 18th Century

Andrzej Nowak, The Conception of Panslavism in the Political Thought of the Great Emigration

Hanna Marczewska-Zagdańska, Wilson — Paderewski — Masaryk. Their Visions of Independence and Conceptions of How to Organize Europe

Tomasz Szarota, Maj. Kiewitz's Mission. German Officer with the Flag of Truce in Warsaw on the Eve of Soviet Aggression

Anna M. Cienciala, New Light on Oskar Lange as an Intermediary between Roosevelt and Stalin in Attempts to Create a New Polish Government (January–November 1944)

Krystyna Kersten, The Polish–Ukrainian Conflict under Communist Rule

RESEARCH IN PROGRESS

Maria Bogucka, Mißgeburt im türkischen Hut. Beitrag zur Psychose "Feind aus dem Osten" an der Schwelle der Neuzeit

REVIEWS — ABSTRACTS — NEWS

Board of editors: Rynek Starego Miasta 29/31, 00–272 Warszawa, Poland
Publisher: Wydawnictwo Naukowe Semper
ul. Bednarska 20A, 00–321 Warszawa, Poland
tel. (+48) (22) 635 49 73, fax: (+48) (22) 664 88 20

Subscription orders from abroad:
«Ars Polona»
Krakowskie Przedmieście 7, 00–068 Warszawa, Poland
or: European Publishers Representatives, Inc.
11–03 46th Avenue, Long Island City, New York 11191, USA

http://rcin.org.pl