

Heritage Project

Update to the Programme Board
Tuesday 23rd January 2018



Contents

1. What is Heritage?
2. How is Heritage identified and governed?
3. What is value?
4. How does 3T's engage with Heritage?
5. HLF Project scope
6. Engagement with Heritage theory
7. Benefits of Heritage
8. Examples of our stories so far

1. What is Heritage?

Definition: Heritage

1) “All inherited resources which people value for reasons beyond mere utility.”

Conservation Principles, English Heritage, 2008

2) “Heritage is a broad concept and includes the natural as well as the cultural environment. It encompasses landscapes, historic places, sites and built environments, as well as bio-diversity, collections, past and continuing cultural practices, knowledge and living experiences. It records and expresses the long processes of historic development, forming the essence of diverse national, regional, indigenous and local identities and is an integral part of modern life. It is a social dynamic reference point and positive instrument for growth and change. The particular heritage and collective memory of each locality or community is irreplaceable and an important foundation for development, both now and into the future.”

International Cultural Tourism Charter , ICOMOS, 2002.

2. How is Heritage identified and governed?

Tangible and Intangible assets

Heritage assets

Tangible

Physical artefacts produced, maintained and transmitted intergenerationally in a society.

Intangible

The practices, representations, expressions, knowledge, skills – as well as the instruments, objects, artefacts and cultural spaces associated therewith – that communities, groups and, in some cases, individuals recognize as part of their Cultural Heritage (UNESCO, 2003)

Built environment

Building Architecture & Design



Natural environment

Light levels and changes



Artefacts

Objects



Archaeology



Open spaces



Ephemera

Relationship to the Local area (Setting)

Geology



Books, Photography, Documents & Records

People	Knowledge	Artefacts or Tools	Cultural space	Communities
Patients	Organisational knowledge & history	Equipment and decoration	Departmental/ Ward culture	Social groups
Staff	Personal knowledge, experiential knowledge and histories	Contextual knowledge: Political, Societal, Local and Clinical history	Neighbourhood	Structure of directorates and organisation/delegation of work
Community	Contextual knowledge		Shared experience: Sense of humour, interaction with space, relationships	Community – Supporters, Patients, Demographics

National level



Historic England

The National Archives

Historic England

Various



Statutory obligations (On-going)



Local Records Office

Local Authority

Other

East Sussex Records Office

Brighton & Hove City Council



Statutory records

Building planning applications: Alterations, Change of use and Redevelopment

Submitting datasets, proposals or records relating to applicable Capital works

Listed building regulations: Retention of The Chapel

Listed building regulations: Prevention of damage, like for like repair and Maintenance of the Chapel

Listed building regulations: Management of the chapel

Listed building regulations: The 'setting' of the facsimile. E.g. authenticity of lighting levels as originally installed.

E.g. for 3T's this could be borehole data reported to the British Geological Society (BGS).

E.g. for 3T's this includes:

- Surveys relating to Capital works
- Research data sets
- Board meeting records
- Committees Listed in the Scheme of Delegation or that report into the Board and major projects
- Policies, strategies and operating procedures including business plans
- Communications outputs *etc.*

Local level

3. What is value?

Types of value

Enduring value: Continuing significance or usefulness

Ephemeral value: Useful or significant for a limited period of time

Fiscal value	Academic value	Legal value	Archival value
Administrative value	Artifactual value	Associational value	Evidential value
Operational value	Historical value	Intrinsic value	Fair market value

4. How does 3T's interact and impact Heritage?

Interpretation: Increases awareness and profile of the Trust	Removes and changes Heritage	Improves access to Heritage	Preserves Heritage	Creates future Heritage
<ul style="list-style-type: none"> - HLF Heritage Project - History wall (CONNECT) 	<ul style="list-style-type: none"> - Demolition of the current site - Change in hospital structure e.g. workforce development 	<ul style="list-style-type: none"> - HLF Heritage Project - History wall (CONNECT) - Oral history - Photography - Archiving 	<ul style="list-style-type: none"> - The Chapel - Physical assets (HLF project) 	<ul style="list-style-type: none"> - New buildings - Culture change - More open spaces

5. HLF Project scope

Audience:

- Current staff
- Retired staff
- In and Out patients
- Medical students
- Student Nurses
- Minority groups who have worked in Healthcare e.g. Commonwealth Nurses
- Local community groups, e.g. Due East in Whitehawk
- Educational staff

Outputs:

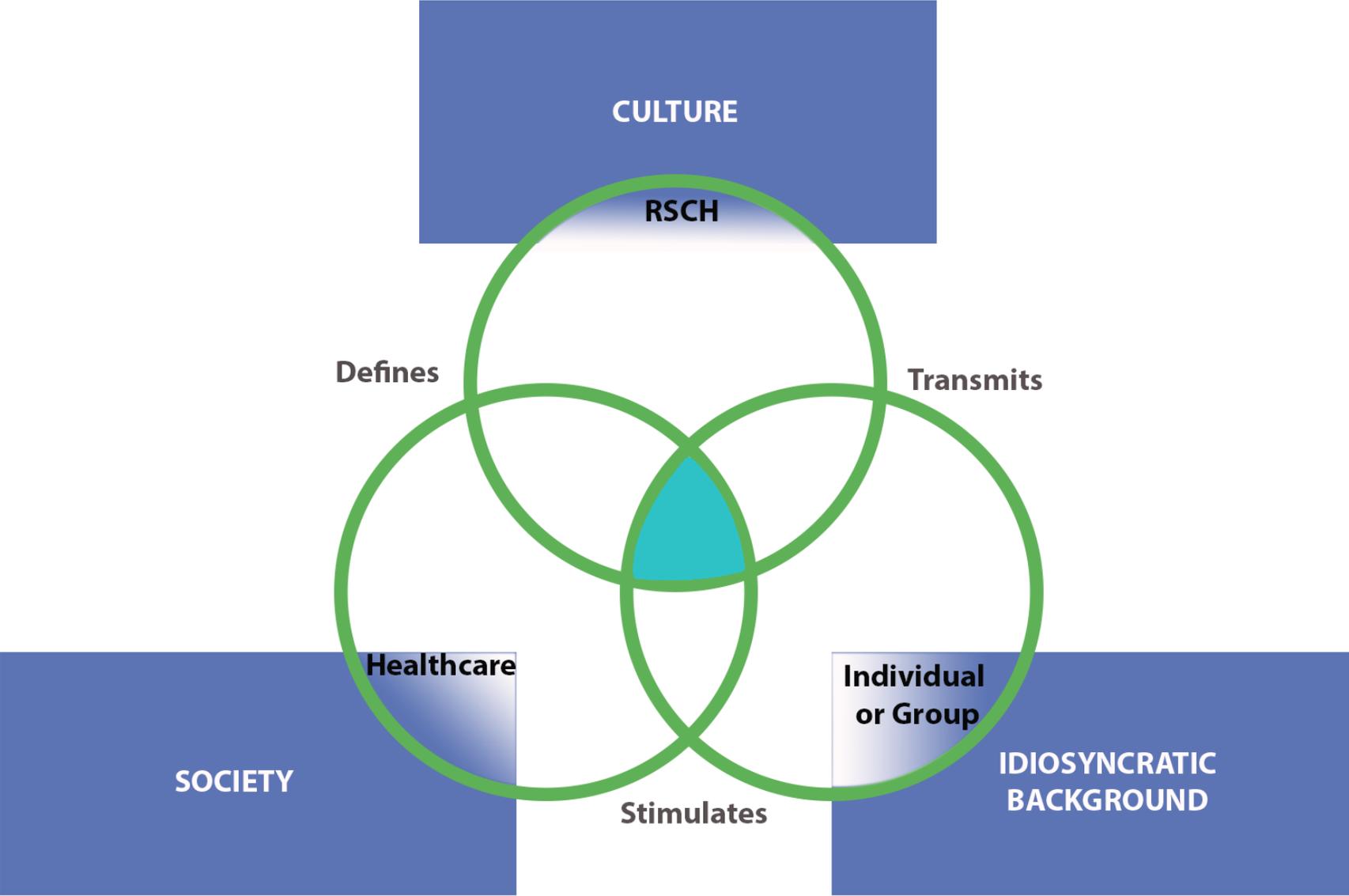
Interpretation outputs:

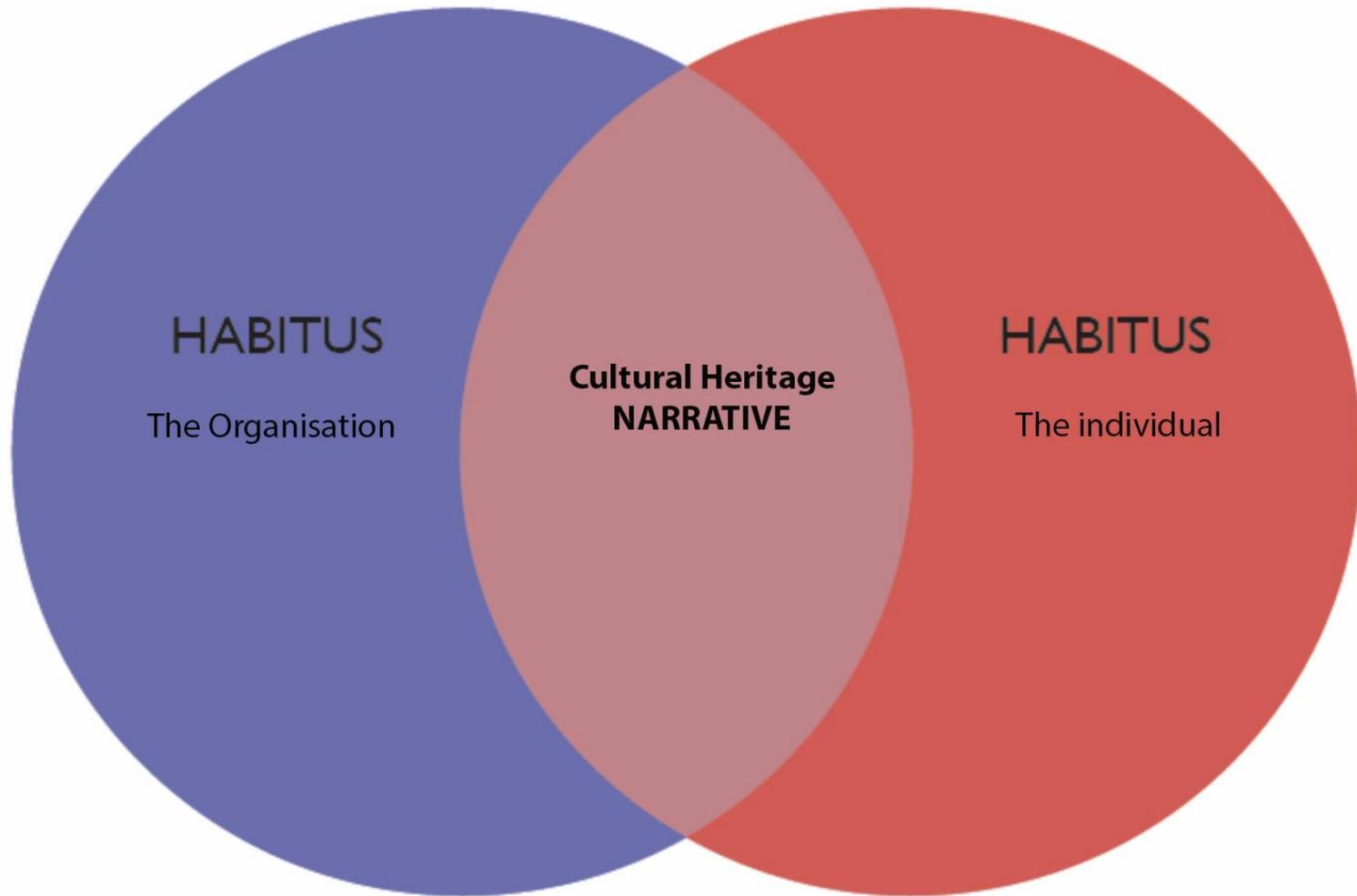
- Research catalogue and information package;
- Exhibition – Inc. digital package;
- 50 Oral Histories Inc. digital access via website hosting;
- Handling collection;
- Print materials: Induction brochure and visitor brochure;
- Programme of talks and events, Inc. Conference;
- Skills training;

Management outputs:

- Catalogue of assets held onsite including photographic resource;
- Identification of artefacts/records;
- Artefact/Record transfer to the local records office or museum, as agreed;
- Management policies and procedures Inc. Sustainability policy;
- Training resources and template documents to conduct further Oral histories independently;

	Exhibition	Oral Histories	Contextual research	External events	Internal events	Handling collection
Current Staff	✓	✓	✓	✓	✓	✓
Retired Staff	✓	✓	✓	✓		
In and out patients	✓		✓	✓		✓
Patient visitors	✓		✓	✓		✓
Medical students	✓		✓	✓	✓	
Student Nurses	✓		✓	✓	✓	
Minority groups	✓	✓	✓	✓		
Local community groups	✓	✓	✓	✓		
Educational staff	✓	✓	✓	✓	✓	





Habitus' interface with alternative Habitus

Source: Bourdieu

Themes of interest: Examples

Identity:

- prior to, and within, the NHS;
- Within the BSUH Trust;
- Within Directorates, buildings and teams;
- Individual;

Change and resilience

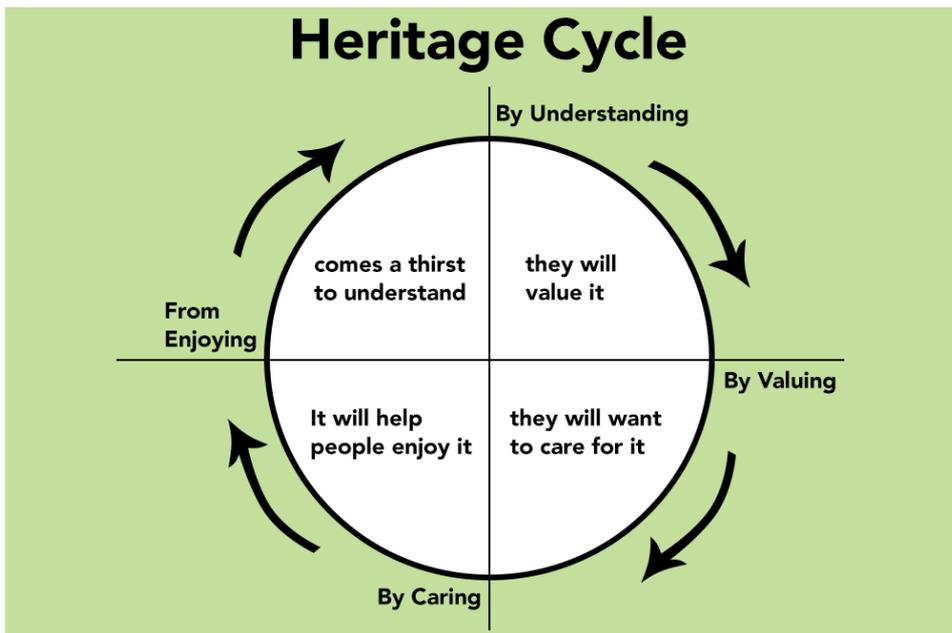
Community/Communities:

- Within the Trust;
- Links with the local community;

Achievement and Excellence

6. Engagement with Cultural Heritage

Facilitating behavioural change - theory



Attribute	Resulting behaviour (impact)
Understand	Value
Value	Care
Care	Enjoy
Enjoy	Want to understand

Source: Simon Thurley / Culture in Development

Case study: Pharmacy



Trigger: Value
Effect: Care



- Prior to storage, a collection of items that told the story of Pharmaceutical practices of the past was on display.
- Due to space issues, these were removed from display and disposal was being considered by the new manager.
- A staff member who valued these objects lobbied to keep them
- This meant they were preserved

Case study: Estates

Trigger: Understand
Effect: Care



- Knowledge of the site meant that Estates were able to identify a 19th Century print.
- A personal interest meant that the staff member had stored the print following a decant.
- They pointed out the historic western flint wall to the Barry building which is known as 'Pauls Wall' due to him overseeing it being pieced back together. And him referring to it as his masterpiece.
- The team now use this story as part of social cohesion (humour).

7. Heritage Benefits

Engagement with Heritage's impacts have been identified and valued into seven potential Benefit categories:

1. Sense of place

2. Personal development

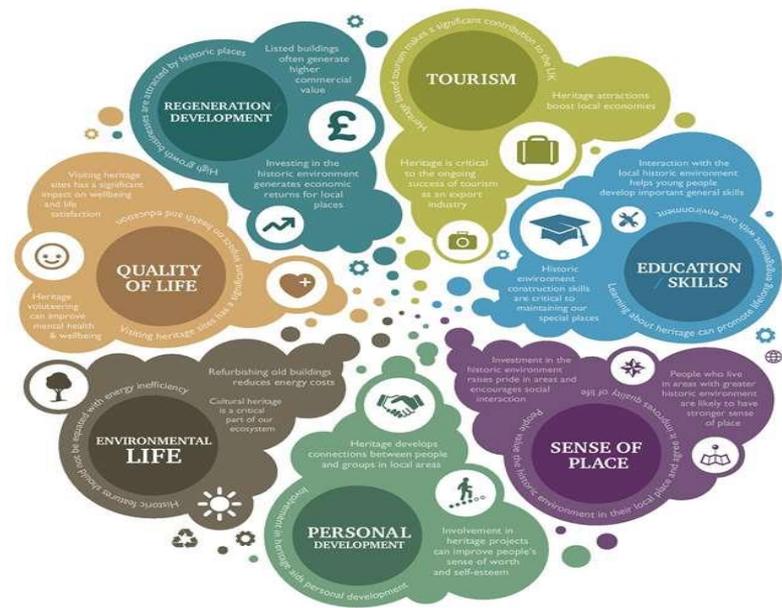
3. Education and/or skills development

4. Quality of life

5. Regeneration / Development

6. Community and Tourism

7. Environmental



Strategic symmetry with Patient First

1. Sense of place	Improved quality of life
2. Personal development	Improves individuals sense of worth and self esteem
3. Education and/or skills development	Promote lifelong learning engagement
4. Quality of life	Significant impact on health and education
5. Regeneration / Development	Attracts growth
6. Community and Tourism	Contributes to economic stability
7. Environmental	Contributes to sustainability

1. Sense of place

Understand, value and care for Royal Sussex County Hospital's past and present:

- Identity;
- Purpose/s;
- Structure/s;
- Environment;
- Spaces;
- Functions;
- Connections;
- Communities;
- People;

And their place within this, creating a sense of pride and a clear view of BSUH's profile.



2. Personal development

BSUH and External Individuals will benefit via:

- Socialisation and collaboration outside of existent network/s;
- Socialisation and collaboration between staff levels;
- Making connections: Creating a social community of people who understand and value Heritage;
- Strengthen existing communities;
- Increased reflexive and communication skills;
- Diversion from work based activities;
- Increased inter-generational relate-ability and understanding;
- Increased reflexive skulls;

BSUH will benefit by:

- An additional channel of feedback;
- Inherited development of staff and community;

3. Education and/or skills development

Skills

Through engaging in activities audiences will gain:

- Reflexive skills E.g. oral histories, facilitating greater **self awareness** and improving **contextual understanding**;
- **Investigation, rationalisation** and **communication** skills;
- **Informational management** skills;
- **Make connections** generating understanding

Education

- Contextual interpretation will **increase accessibility of knowledge** for **general audiences**;
- Participants will receive training and peer support;

4. Quality of life (Wellbeing)

Audiences engaging with Heritage will demonstrate:

- Increased confidence;
- Increased resilience;
- Increased enjoyment;
- Increased local pride;
- Increased sense of agency;
- Increased life satisfaction;
- Improved mental health and wellbeing;
- Reduced social isolation;

5. Regeneration / Development

Audiences that value Heritage assets:

- Care for them, reducing cost to RSCH;

Organisations that manage their Heritage gain:

- Business opportunities;
- Increased protection of investment in assets and people;

6. Community and Tourism

Cultivated Heritage assets:

- Boost local economies (as attractions);
- Supports the export industry (Tourism);
- Raises the profile of the local and internal community;
- Raises the status and attractiveness of jobs;

7. Sustainability

- Heritage is preserved for future generations;
- Assets that are not required can be nominated for transferral to the Keep – this reduces direct cost to BSUH;
- A wider audience is engaged in the organisation;
- BSUH has an increased profile;
- Staff develop transferable skills;
- Potential for charitable activities;
- Project activities support some departments activities;
- Use of external consultants brings in specialist skills;
- Template resources will exist;
- Strengthened partnerships;

8. Our stories so far

Community: Motivating Charitable giving

Case study of a short community appeal:

- The Golden Penny League est. April 1934. 660 members;
- Recruited 2000 new members to hold their donation boxes;
- By December 1936 there were 5,372 members;
- Brought in £1,200, just under 1% of the £160,000 funding gap declared;
- This was just after a period called 'The Great Depression' in the UK, where unemployment was up to 70% in some area's, and employment mostly part time. Recovery was only slowly happening;
- This makes the community contribution a significant sacrifice;



Stephanie Leslie, Student Nurse RSCH 1943-46



If we broke a lot of thermometers we had to go to matron **and we had to pay sixpence for a new one, and I was notorious for breaking thermometers.**

One morning after coming off night duty I was doing the thermometer round **and I knocked a trolley over and broke six all at once. So I went into the Kitchen and cried..** One of the patients came in with a little paper bag with lots of pennies and halfpennies in it, **and the patients had collected for me to pay.**

Now how's that for kindness?



Denny Hampton, Student Nurse RSCH, 1946-49

I think **there's a bust** – it may not be there now – **as you go up the stairs in the entrance somewhere up there, there was a bust of some bigwig, Ralli I think. Well we had to have lipstick put on him and somebody, who had to be unknown, always had to do it.**

You never knew who was going to do it but **suddenly it would appear.**

The lipstick would go on the statue for Christmas, only at Christmas.



Transcription:
EARL OF EGREMONT
FIRST PRESIDENT OF THE
HOSPITAL



Example

Source material

Oral History
Artefacts that illustrate part/s of the narrative



Select aspect/s of the
Historical past

History of the Royal Sussex County Hospital



Consider against
aspects of the past of
wider explanatory
importance

History of Public healthcare in the UK

Final narrative

**Janet Cheesman, Student Nurse
RSCH, 1972-75 and Associate
Clinical Director Clinical
Operations, 2009 onwards**



In **1998** we had **nearly two hundred vacancies in nursing**, and so it was decided that we'd have to **go abroad** because we weren't having success in Britain.. I was asked to go with one of the ward managers, and so, very excited we set off.

..We were **with six other Trusts** from across the country **trying to persuade nurses to come to Brighton against the other offers** there...

In the end we had **eighty nurses** that came from South Africa on a two year contract.



VALERIE COOK

Risk Management Administrator, Royal Sussex County Hospital

“The service to patients will become slower, due to heightened expectations of what the NHS can provide, i.e. an infinite variety of treatments from finite resources.”

The Sixties: Rebuilding the County

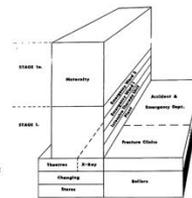
The 1960s marked the start of what should have been the total rebuilding and development of the Royal Sussex County Hospital, which was part of a plan to provide three new general hospitals for Brighton and Hove.

The first stages of the project were designed to provide a modern accident and emergency department and maternity unit in a single building.

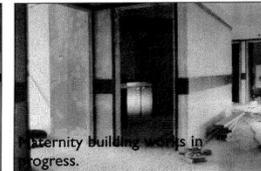
It was planned to redevelop the complete site in five stages to provide a new 750-bed hospital.

SPECIAL FEATURES

1. Cubicle partitioning
2. Intensive Therapy Unit Consoles
3. Mechanisation in Records Secretariat
4. Disposal Chute
5. Swedish Accident X-Ray trolley
6. Theatre transfer area
7. Automatic ejection hoist
8. Centralised Telephone Dictation System
9. Central Tray System for meals
10. Boiler House.



Diagrammatical breakdown of the new Tower Block.



Thank you

Any Questions?

