Heritage Project

Update to the Programme Board
Tuesday 23\textsuperscript{rd} January 2018
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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[i], ICOMOS, 2002.
2. How is Heritage identified and governed?

Tangible and Intangible 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)
<table>
<thead>
<tr>
<th>Built environment</th>
<th>Natural environment</th>
<th>Artefacts</th>
</tr>
</thead>
<tbody>
<tr>
<td>Building Architecture &amp; Design</td>
<td>Light levels and changes</td>
<td>Objects</td>
</tr>
<tr>
<td>Archaeology</td>
<td>Open spaces</td>
<td>Ephemera</td>
</tr>
<tr>
<td>Relationship to the Local area (Setting)</td>
<td>Geology</td>
<td>Books, Photography, Documents &amp; Records</td>
</tr>
<tr>
<td>People</td>
<td>Knowledge</td>
<td>Artefacts or Tools</td>
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<td>----------------------------</td>
</tr>
<tr>
<td>Patients</td>
<td>Organisational knowledge &amp; history</td>
<td>Equipment and decoration</td>
</tr>
<tr>
<td>Staff</td>
<td>Personal knowledge, experiential knowledge and histories</td>
<td>Contextual knowledge: Political, Societal, Local and Clinical history</td>
</tr>
<tr>
<td>Community</td>
<td>Contextual knowledge</td>
<td></td>
</tr>
</tbody>
</table>
National level

The National Archives
Historic England
Various

Statutory obligations (On-going)

Local Records Office
East Sussex Records Office

Local Authority
Brighton & Hove City Council

Other

Local level

Statutory records

Building planning applications: Alterations, Change of use and Redevelopment

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 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.

Submitting datasets, proposals or records relating to applicable Capital works

E.g. for 3T’s this could be borehole data reported to the British Geological Society (BGS).
3. What is value?

Types of value

**Enduring value:** Continuing significance or usefulness

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

<table>
<thead>
<tr>
<th>Fiscal value</th>
<th>Academic value</th>
<th>Legal value</th>
<th>Archival value</th>
</tr>
</thead>
<tbody>
<tr>
<td>Administrative value</td>
<td>Artifactual value</td>
<td>Associational value</td>
<td>Evidential value</td>
</tr>
<tr>
<td>Operational value</td>
<td>Historical value</td>
<td>Intrinsic value</td>
<td>Fair market value</td>
</tr>
</tbody>
</table>
## 4. How does 3T’s interact and impact Heritage?

<table>
<thead>
<tr>
<th>Interpretation: Increases awareness and profile of the Trust</th>
<th>Removes and changes Heritage</th>
<th>Improves access to Heritage</th>
<th>Preserves Heritage</th>
<th>Creates future Heritage</th>
</tr>
</thead>
</table>
| - HLF Heritage Project  
- History wall (CONNECT) | - Demolition of the current site  
- Change in hospital structure e.g. workforce development | - HLF Heritage Project  
- History wall (CONNECT)  
- Oral history  
- Photography  
- Archiving | - The Chapel  
- Physical assets (HLF project) | - 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;
<table>
<thead>
<tr>
<th></th>
<th>Exhibition</th>
<th>Oral Histories</th>
<th>Contextual research</th>
<th>External events</th>
<th>Internal events</th>
<th>Handling collection</th>
</tr>
</thead>
<tbody>
<tr>
<td>Current Staff</td>
<td>✓</td>
<td>✓</td>
<td>✓</td>
<td>✓</td>
<td>✓</td>
<td>✓</td>
</tr>
<tr>
<td>Retired Staff</td>
<td>✓</td>
<td>✓</td>
<td>✓</td>
<td>✓</td>
<td>✓</td>
<td></td>
</tr>
<tr>
<td>In and out patients</td>
<td>✓</td>
<td></td>
<td></td>
<td>✓</td>
<td>✓</td>
<td>✓</td>
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<tr>
<td>Patient visitors</td>
<td>✓</td>
<td></td>
<td></td>
<td>✓</td>
<td>✓</td>
<td>✓</td>
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<tr>
<td>Medical students</td>
<td>✓</td>
<td></td>
<td></td>
<td>✓</td>
<td>✓</td>
<td>✓</td>
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<tr>
<td>Student Nurses</td>
<td>✓</td>
<td></td>
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<td>✓</td>
<td>✓</td>
<td>✓</td>
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<tr>
<td>Minority groups</td>
<td>✓</td>
<td>✓</td>
<td></td>
<td>✓</td>
<td>✓</td>
<td></td>
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<tr>
<td>Local community groups</td>
<td>✓</td>
<td></td>
<td></td>
<td>✓</td>
<td>✓</td>
<td>✓</td>
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<tr>
<td>Educational staff</td>
<td>✓</td>
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<td>✓</td>
<td>✓</td>
<td>✓</td>
</tr>
</tbody>
</table>
Habitus’ interface with alternative Habitus

HABITUS
The Organisation

Cultural Heritage NARRATIVE

HABITUS
The individual

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

<table>
<thead>
<tr>
<th>Attribute</th>
<th>Resulting behaviour (impact)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Understand</td>
<td>Value</td>
</tr>
<tr>
<td>Value</td>
<td>Care</td>
</tr>
<tr>
<td>Care</td>
<td>Enjoy</td>
</tr>
<tr>
<td>Enjoy</td>
<td>Want to understand</td>
</tr>
</tbody>
</table>

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:

<table>
<thead>
<tr>
<th>1. Sense of place</th>
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<tbody>
<tr>
<td>2. Personal development</td>
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<tr>
<td>3. Education and/or skills development</td>
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<tr>
<td>4. Quality of life</td>
</tr>
<tr>
<td>5. Regeneration / Development</td>
</tr>
<tr>
<td>6. Community and Tourism</td>
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<tr>
<td>7. Environmental</td>
</tr>
</tbody>
</table>
Strategic symmetry with Patient First

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

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.
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.

Diagrammatical breakdown of the new Tower Block.

“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.”
Thank you

Any Questions?