



Hospital volunteering and fundraising in historical context

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HISTORY & POLICY



The issues:

- 50 offences in NHS hospitals, one in non NHS hospice ‘during his voluntary or fund-raising activities’
 - principally Leeds General Infirmary (16 offences), 1965-95, Stoke Mandeville Hospital (22 offences) 1965-88
- Role of Savile’s ‘celebrity’ and ‘fundraising role’
 - In explaining his ‘special access’ and ‘privileges’
 - In explaining non-reporting or non-investigation of complaints
 - Relationship to ‘organisational culture and practices’?
- Understanding ‘governance and accountability’ of his fundraising



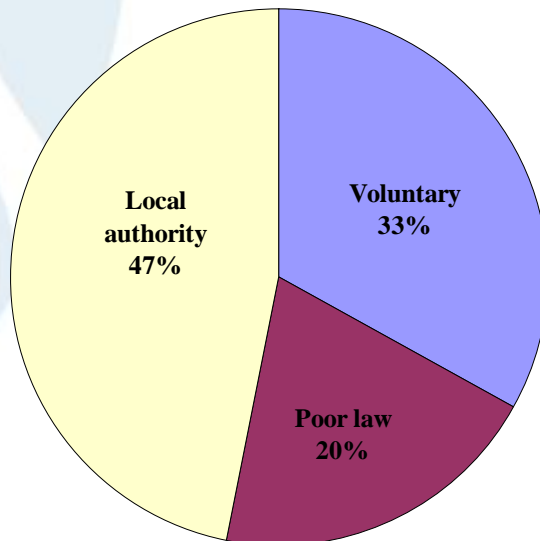
Illuminating the ‘guise of charity’

- “...basically ... had the freedom to walk wherever he wanted... Along with the power, **people were afraid of Jimmy stopping raising money** for the hospital. There was a fear of him taking something away. He argued that it was his and not theirs.”
 - Christine McFarlane, former director of nursing and patient care, Stoke Mandeville, *Guardian*, 1/11/2012
- “...it’s really sad that someone can work all their life for charity and everyone’s like ‘he’s such a wonderful person’ ... **He does paedo stuff under the guise of charity**, it’s almost like he’s above the law, untouchable.”
 - Ms B, Duncroft victim, Levitt Report, 22
- “It is now clear that Savile was **hiding in plain sight** and using his celebrity status and fundraising activity...”
 - Yewtree Report, 13



Beginnings: early hospital philanthropy

- 18th/19th century 'voluntary hospitals'
 - Acute general hospitals, special and cottage hospitals
 - Charity funded, honorary consultants, volunteer boards
 - Status, prestige, power of donors



1938 beds

SPECIAL DONATIONS.			£	s.	d.
The Duke of Northumberland (to be applied to Engineering Works for pumping salt water to baths, &c.—See page 29)	1876	0	0		
The Duchess Eleanor of Northumberland (to be applied to the purchase of Furniture—See page 33)	1000	0	0		
GENERAL SUBSCRIPTIONS.			£	s.	d.
The Duchess Florentia of Northumberland (2 subscriptions)	1000	0	0		
Sir W. G. Armstrong (2 subscriptions)	2000	0	0		
Taylor, Hugh, the late, Earsdon	1600	0	0		
Mrs. Abbot, Newcastle	1000	0	0		
Clavering, Sir W. A., Bart.	500	0	0		
Naylor, William, the late, formerly of Claremont Place, Newcastle	500	0	0		
Taylor, Hugh, Chipchase	500	0	0		
Lord Redesdale	200	0	0		
Spencer, J., and Sons, Newburn (2 subscriptions)	200	0	0		
Straker, John, Tynemouth (2 subscriptions)	200	0	0		



Form of a Recommendation.

Gentlemen,

Bristol,

182

You are desired to admit _____ of the Parish of _____

aged _____ years, an _____ Patient.

To the Visitors of the Bristol Infirmary.

(To attend Monday or Thursday, at Eleven o'Clock precisely, and to be as clean as possible.)

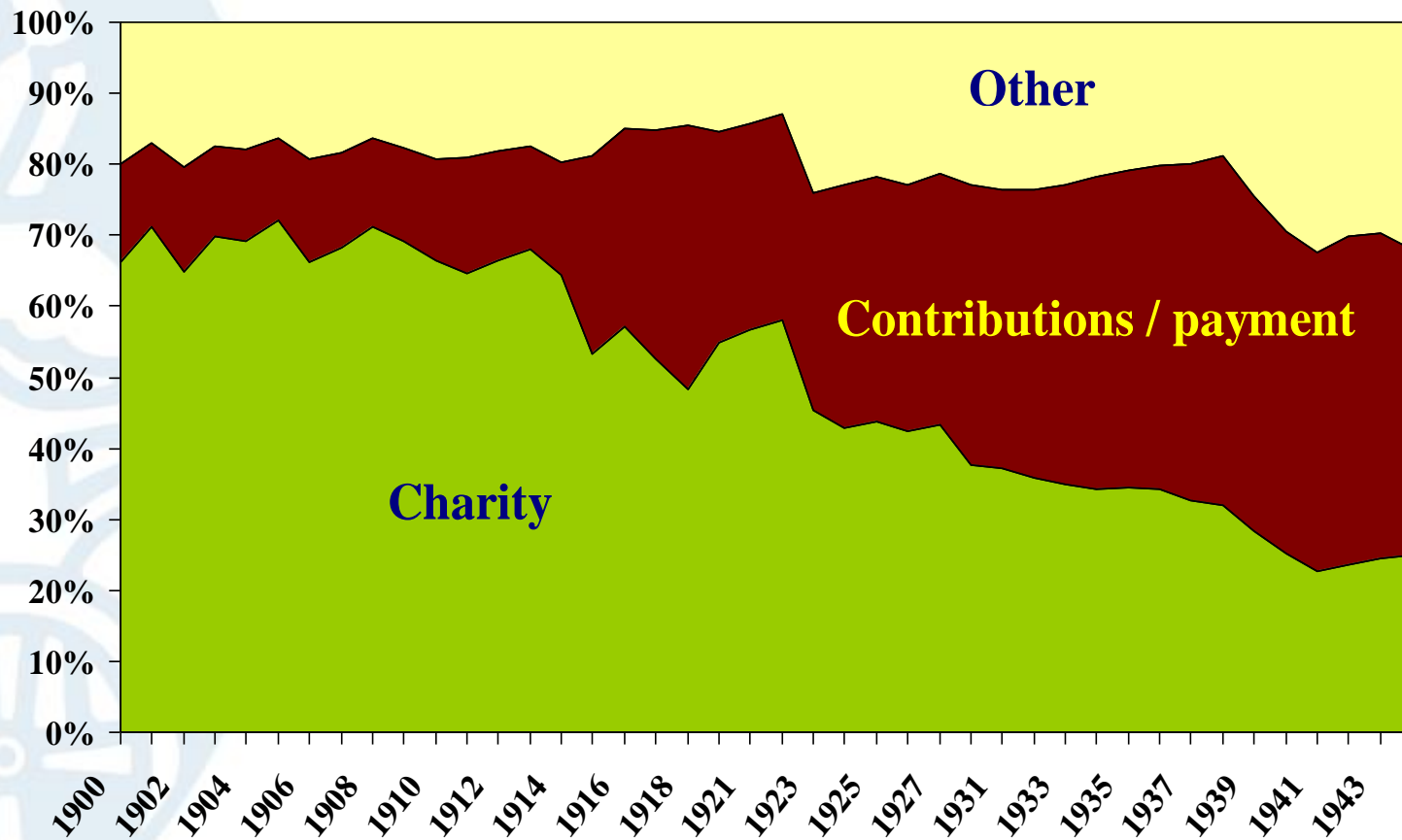
Recommended by _____

‘Celebrity’ fundraisers

- *Some* from arts and leisure
 - eg J.M.Barrie, Arsenal FC
- *But* celebrity fundraisers typically peers, royals, local politicians
 - Gala dinners, fetes, bazaars, exhibitions
- Hospital ‘visiting’
 - Visiting committees for charitable oversight
 - Ceremonial visits support fundraising



Before the NHS: the diffusion of hospital voluntarism throughout the community



Composition of British voluntary hospital income, 1900-44



Leeds Workpeople's Hospital Fund.

NEARLY A QUARTER OF A MILLION MEMBERS.

OBJECT :

By increased organisation to provide more adequate support for the Leeds Voluntary Hospitals, so that freed from debt they can extend their work to meet the urgent needs of the workers.

ADVANTAGES :

HOSPITAL TREATMENT for all Contributors and their Dependents AT ANY LEEDS HOSPITAL.

OR AT
THE PUBLIC DISPENSARY AND NURSING SOCIETIES on obtaining an official Certificate from their Hospital Fund Representative,

NO TICKETS. NO REGISTRATION FEES. NO MAINTENANCE CHARGES.
AN INVALUABLE DOON IN TIME OF NEED.

Beyond all this

The Finest Convalescent Homes in the County

Are Open to ALL HOSPITAL FUND CONTRIBUTORS.

SPRINGFIELD, HORSFORTH, 75 Beds for Men ;
HILL TOP, ILKLEY, 36 Beds for Women ; CROSSBECK, ILKLEY 24 Beds for Women ;
And Special Treatment for Rheumatic Cases at
ROYAL BATH HOSPITAL, HARROGATE.

OVER 40,000 MEN AND WOMEN
HAVE ALREADY BENEFITTED AT THE HOMES.

Members of the Hospital Fund can also obtain Massage Treatment at the Hospitals and Grants for Dentures at the Dental Hospital, Leeds.

ONLY CONTRIBUTORS OF 2d. PER WEEK CAN OBTAIN THE ABOVE BENEFITS.

The Leeds Workpeople's Hospital Fund Subscribers take pride in their Movement, one of the oldest and most successful in the Country, with 44 years' record of invaluable work, and they will see to it that the fine achievements of the past are surpassed year by year.

Further information can be obtained at the Offices of the Leeds Workpeople's Hospital Fund.

3, PARK SQUARE LEEDS. SIR WM. MIDDLEBROOK, Bart., JAS. TATE, WM. McL. COUPER, J.P. } Hon. Secretaries
Chairman. WALTER WORMALL, General Secretary.

- Contributory schemes:
 - Mass membership: c.11 million pre-NHS
 - Workplace payroll deduction: Free care + benefits
 - Voluntary action: Fundraising: carnivals, appeals; governors; visiting; patient advocacy

The PEOPLES PENNIES are **PILLARS of PROGRESS**

£3,150,000 VOLUNTARY HOSPITAL SERVICE
£1,485,000 SERVICES OF OTHER HOSPITALS
£2,050,000 CONVALESCENT HOME SERVICE
£1,750,000 HOME NURSING, HELP AND EQUIPMENT
£2,175,000 AMBULANCE TRANSPORT SERVICE

1p IN THE £ CONTRIBUTORY FUND

NATIONAL HEALTH SERVICE EXTENSION

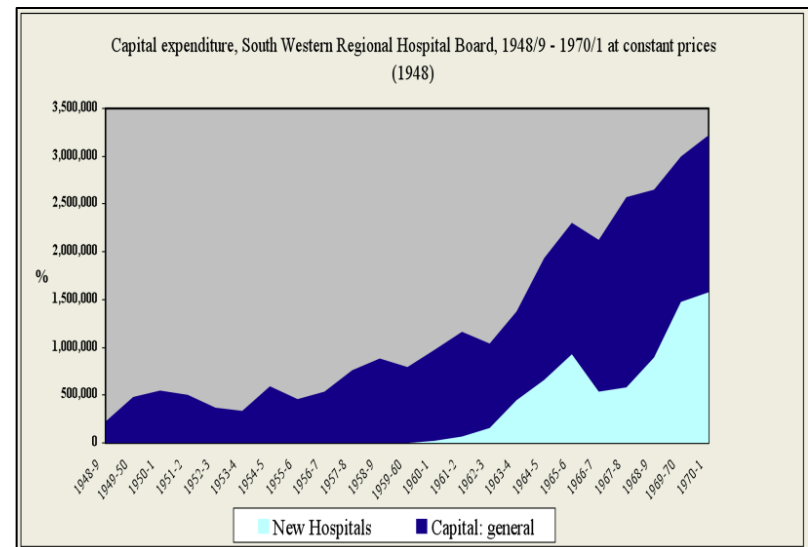
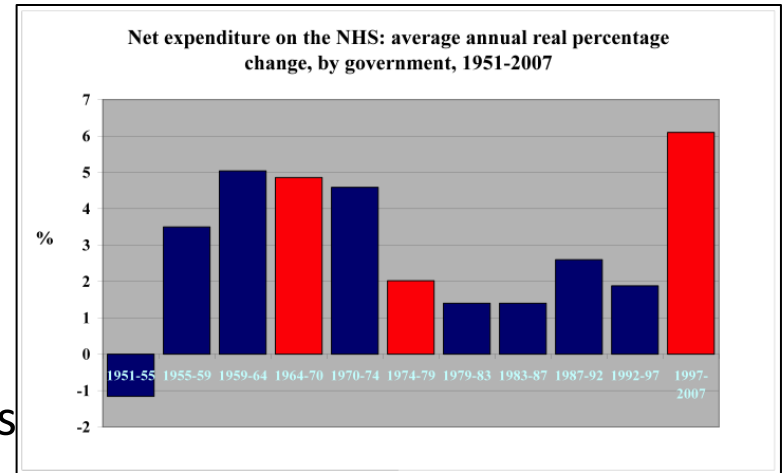
FOUNDED on the co-operative effort of the public and their representatives who constitute the
MERSEYSIDE HOSPITALS COUNCIL INC.

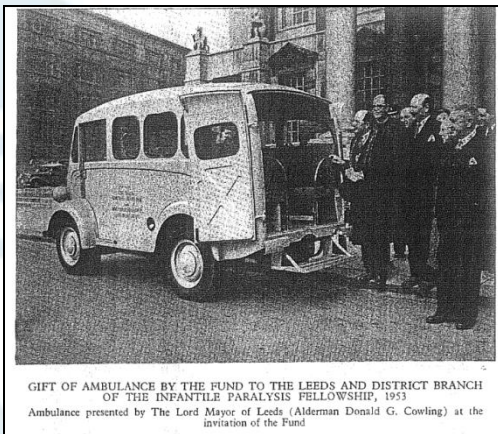
- Summary:
 - By the eve of the NHS a tradition of community voluntarism has developed
 - Partly charitable including local elites and ordinary people
 - Partly working-class organisation
 - Familiar aspect of popular civic culture



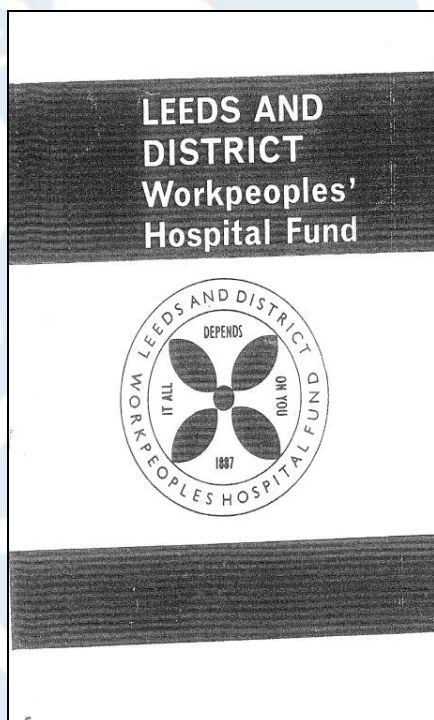
Into the NHS: the persistence of charity

- The NHS Acts 1946-7:
 - comprehensive, universal, free tax-funded
- The settlement for charity:
 - Teaching hospitals retain endowments
 - Fundraising permitted
 - ‘Corporate trustee’ model
 - Limited to ‘non-core’ purposes:
 - Patient and staff amenities; research; renovations
- Early NHS: tight financial settlements
 - Real decrease early 1950s
 - Capital restraint till late 1960s





- Early NHS:
 - Survival of mass schemes
 - Low-cost 'extras' insurance
 - Continuity of civic culture of hospital charity



TOYS AND BOOKS FOR CHILDREN IN HOSPITAL AT CHRISTMAS

Wonderful Value for 6d.
PER WEEK

The Leeds and District Workpeoples' Hospital Fund
ANNOUNCE

Further increases in Benefits as from
1st January, 1969

OPTICAL	WAS HALF COST TO 17s. 6d. NOW £1 10s. 0d.
DENTAL	WAS HALF COST TO 35s. NOW £3 0s. 0d.

And REMEMBER the other Benefits —

Hospital In-Patients	Home Help
Physiotherapy	Surgical Appliance
Convalescence	Illness at Home
Private Specialist	Elastic Stockings
Samaritan	Loan of Sickroom Equipment

HELP US TO HELP YOU-JOIN NOW
EITHER

1. Through your place of employment	2. Direct to the Office, 41 St. Paul's Street, Leeds, LS1 2JL
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LONDON
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HYGIENE
& TROPICAL
MEDICINE



Hospital volunteering under the NHS

- Leagues of Friends, WRVS, Hospital Funds
 - Fetes, appeals, cafes, transport, amenities
- Savile's early involvement
 - Hospital radio
 - 'I'm Backing Britain' 1967-8
- Governance of charities
 - Corporate trustee model continues till 1990s
 - No external oversight
 - Possible conflicts of interest



LONDON
SCHOOL of
HYGIENE
& TROPICAL
MEDICINE



Conclusions

- Recent NHS enquiries into tragedies emphasize ‘systems’ approach
 - Beverley Allitt enquiry, 1994; Donaldson on adverse events, 2000
 - Given ‘grotesque’/ ‘rogue’ individuals, we should avoid blame
 - ‘... The ancient notion of a scapegoat, to bear the guilt for disastrous happenings and thus relieve feelings of rage and frustration is still with us. ...those we have criticized were subjected by chance to a test more severe than most of us encounter in a lifetime: so we have not striven to find fault merely to satisfy a popular urge...’ .
- Cecil Clothier, 1994
- Instead consider nature of institutional culture and systemic weaknesses



- **Cultural and systemic contexts for Jimmy Savile's exploitation of hospital voluntarism:**

- A long tradition of according status and respect to high profile charitable givers
- Strong, long-term identification of hospital as symbol of community endeavour through enjoyable social activity
- Long-term acceptance of the place of the volunteer/visitor on hospital premises (though Savile unusual?)
- Absence of disinterested/external or ethical oversight of charitable voluntarism: potential risks

