

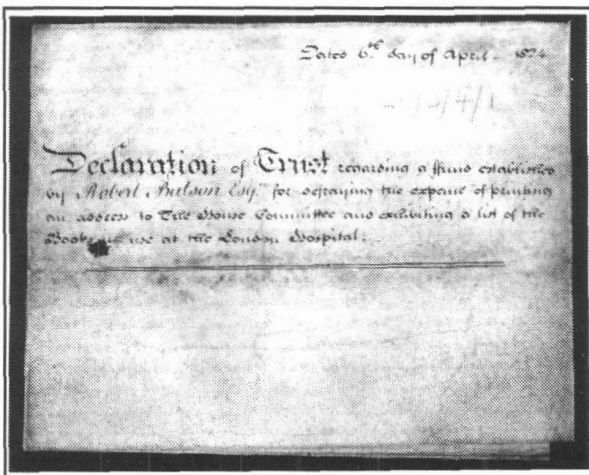
## *Studies in Documents*

### *Batson's Trust for the Royal London Hospital: Records Management 1820s Style*

by BARBARA L. CRAIG

Among the archives of the Royal London Hospital are three indentures concerning a trust fund to support an agreed plan for regularly reviewing the hospital's records to ensure these were well kept and up-to-date.<sup>1</sup> As the 1824 deed proclaimed,

"it being of the most essential consequence to the prosperity of the ... London hospital, the order and comfort of its suffering inmates, and the convenience of the ... management thereof that a constant regularity should be preserved in the books ... and accounts and also that ... [the managers] should be fully apprised of the various duties thereby necessarily confided to them ...."<sup>2</sup> (figures 1 and 2)



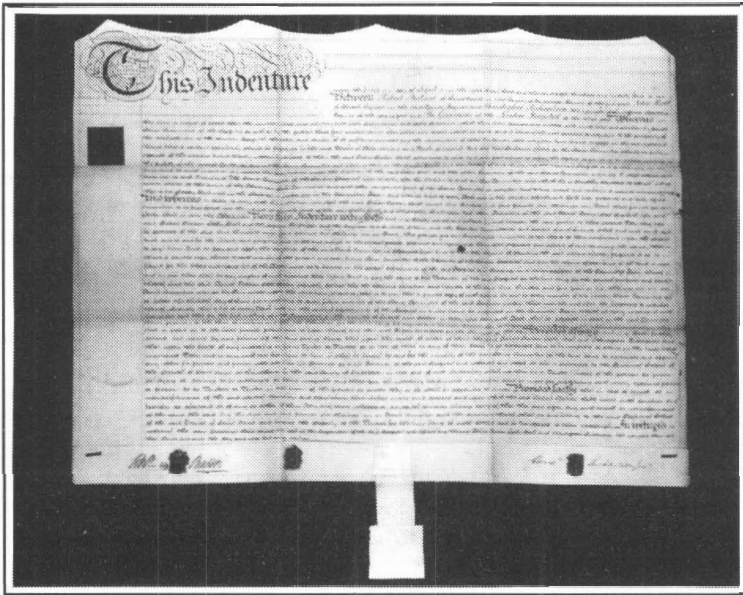
**Figure 1**

*Docket (entered on a portion of the reverse) of "Declaration of Trust .... 6 April 1824" LH/D/4/1. The docket identifies the form of the document, its principal author, the purpose of the document, and its intended affect. The clerk who engrossed*

the indenture was likely a writer employed by the London Hospital's firm of solicitors, Lang and Harvey. Mr. H. Lang was elected solicitor to the Hospital on 7 January 1818 (LH/A/2/6 p. 101). The archives reference, in pencil, was added in 1987 when the trust deeds were transferred to the archives from the hospital's main office vault.

## Figure 2

Obverse of "Declaration of Trust.... April 6 1824," LH/D/4/1, parchment, 22 x 27 ins. The parchment was commercially prepared and printed with its form "This Indenture" in large point. The cameo insert at the centre of the "T" bears the name of the stationer who provided the form, viz. "sold by W.B and W.H. Witherby, Birchin Lane." The bold lines above the title and those below it, running under "This Inden-



ture," were added in the law office to establish proportion and spacing for the specific text. The left margin has a tax stamp confirming payment of a required duty before the document was drawn up. ("In order to make a contract binding and effective it must be stamped before it is executed" LH/A/5/17 p. 362.) The placket at the bottom has the signatures and seals of the parties to the Trust and the hospital's seal, as a wax and paper wafer, is attached and pendent.

The script, a common hand, is easy to read once the conventions of letter formation are understood. The document can be easily scanned for essential clauses which are preceded by a conditional in large point. Reading from top to bottom these clauses are, "This Indenture," "between," "whereas," "and whereas," "now this indenture witnesseth," "provided always," "provided lastly," and "witnesses."

The indenture provided for the succession of trustees by majority vote of the House Committee, established the required bona fides of new trustees, and made provision for the disposition of the fund should the trust be made inoperative.

*The trustees are named as Robert Batson, Christopher Richardson Jr., and John Hall.*

While the early date for this trust suggests a substantial history for records management at the London Hospital, the deeds appear to be unique in dealing both with administration and records. Records management has never been well established in hospitals; however, integrated programmes for medical and administrative records linking these to corporate information management have a strong future. New information technologies now offer attractive alternatives to customary practices heavily burdened by paper. But at the same time these raise questions about the consistency, legibility, and longevity of records, making record-keeping an important topic for managers.<sup>3</sup>

While modern information technologies are novel, neither the questions about records nor administrative concern for them are unprecedented. Batson's Trust provides an unusual glimpse into the management of records in hospitals before these were dominated by the records of medical and surgical practice. The origin of the Trust, its formal execution through documents, and their progress from management instruments to institutional memory reveal the role of records as tools and information in the context of the "London's" development in the early part of the nineteenth century.<sup>4</sup> Records have a history as does their management. Both histories enrich the archivist's understanding of records processes and their procedural relationship to administration and its needs.

***The Royal London Hospital: An Overview of the Institution, Its Management, and Archives***

Until the establishment of the national health service in 1948, the London Hospital<sup>5</sup> operated as a voluntary medical charity for the sick poor mainly from the east London area around Whitechapel Road, in which the hospital is located. The subscribers met regularly as a court of governors to receive reports and authorize actions and all were eligible for numerous working offices. The hospital was managed largely by interested subscribers elected annually at the general court to serve on working committees. The most important management group was the House Committee. It visited the hospital each week to respond to letters, review accounts for supplies and services, and to resolve any and all issues of administration. The House Committee was assisted by full-time officers, a house governor or chaplain, a steward, and a matron who resided at the hospital. They provided daily continuity to administration and directed the staff of watchers, beadles, doormen, an apothecary, and other workers. Administrative support for the governors and committees was provided by a firm of solicitors and by a clerk or secretary, often with help from assistants. Medical and surgical practice were undertaken by an honorary staff of three physicians and three surgeons. These practitioners, elected by the governors, also visited the hospital at set times to provide treatment for the patients and eventually to discharge them.

While the object of the charity was to relieve the sick poor, the governors assumed responsibility for the overall administration of the hospital and for its successful financing. As the "London" grew in physical plant and in number of in and out patients, its administration became more complex and demanding and it needed in-

creasingly large amounts of money to support its services to the community. The hospital's business expanded with its size, completely filling the weekly time set aside for the Committee to visit and handle matters of administration. Special meetings often were needed to concentrate on items demanding urgent attention.<sup>6</sup> The financial affairs of the hospital were an important responsibility of the Committee and these required careful husbanding. Everyday operations needed ready cash while long-term stability relied on healthy investments whose return would make up any shortfall in donations. The hospital was financed successfully, if unevenly, by a combination of subscriptions, investments, and bequests.<sup>7</sup> Latterly the "London" also had substantial income from its estate, particularly from the land it owned in the vicinity of the hospital, which was developed and rented to tenants. Income from real estate grew in the nineteenth century and became an important source of support for the hospital.<sup>8</sup> The governors' involvement with direct administration and their overwhelming concern for money, its prudent investment, and efficient expenditure, is reflected both in the form and content of the hospital's surviving archives, in which the records of administration and finance predominate (See **appendix**).

The documentary habits of the governors, derived from their own experience in business, the professions, and the church, were the source of the "London's" records practice, which shared many features in common with other voluntary hospitals of this period. The responsibility for making records was associated with functions, more usually with an office, and by 1759 the first of a series of Standing Orders regularized administrative responsibilities and their associated requirements to keep records. From the earliest meetings of the original group of men interested in establishing a hospital, records of their decisions, or minutes, were kept in formal books originally called the "transactions." The annual meeting of the corporation, or the general court, as well as the meetings of the regular and special committees, were carefully minuted. These books were of central importance to the affairs of the hospital as the record of agreed decisions and, in support of this role, the minutes of "transactions" often contained copies of correspondence or other documents sent and received. The responsibility of the governors for managing leases, investments, and the physical fabric of the buildings also generated considerable documentation, some of which was held by the hospital's solicitor. As the "London" grew in size, financial records of various types became indispensable to effective daily oversight by administrators and to the proper management of expanding assets. The predominance of the records of administration and finance in the surviving archives may not reflect accurately the original body of documents; nonetheless these certainly were vital records of continuing use to the hospital and its governors.<sup>9</sup>

By contrast to the formal and relatively full sets of financial documents and decision minutes, few records survive from the early medical and surgical practice of the institution. Books of record for nurses on the wards and similar types of books for the honorary physicians and for the surgeons, all mentioned in the minute books and inventoried in 1824, have not survived (see **appendix**). Patient records may have been kept by the physicians. If this was the case, medical documents were most likely notes for the personal use of the practitioner. It is probable that records of the hospital's medical and surgical practices, especially as case notes, were not kept and that the registers of admission, discharge, and death, many of which do survive at least in part, represent the universe of medical documents considered to be the property of the hospital.

All documents have unique homes in their transactional relationships. At the "London" this "virtual home" was later mirrored by a physical home as the responsibility for record-making associated with an office or function was extended to consolidate the physical custody of all records at the hospital. Regularity in the keeping of records, and their accuracy, security, and availability became concerns for the governors in the 1820s. These might be expected in any organization whose size had increased to a point that administrative efficiency and real understanding of business relied on records rather than on personal knowledge. The governors were also apprehensive about indiscriminate access to documents and their experiences managing the institution highlighted a real need to have records to hand for reference to past decisions. Although by the early part of the nineteenth century most of the hospital's minutes and correspondence and some of the financial books were kept on-site, there were times when needful records were not readily available, especially the minutes of special committees which were often kept by a volunteer secretary.<sup>10</sup> Constant reference to the records of leasing and at times to the minutes and report books to search for earlier decisions about hospital policy, particularly concerning admissions, made secure and continuing custody for past records highly desirable. Responding to need, the House Committee set aside various places in the hospital specially to keep documents, the most prominent being the Committee room on the main floor and the office of the clerk, both of which had undergone renovations to make them useful to record-making and keeping. More space for records was fitted up in 1824 and locked cupboards were provided for documents considered to be particularly confidential.<sup>11</sup>

The relative simplicity of managing the hospital and its records, by contrast to the complexities of today's administration and its documents, is deceptive. By 1820 the London had over 270 in-patient beds and its honorary medical staff saw five thousand out-patients and accident cases per year. The size of the institution and the amount of business done, on the medical side alone, was large and diverse by any standard. And it was growing. But in addition, the problem of keeping track of complex transactions related to the funding of the hospital and to its supply and operations<sup>12</sup> became a matter of serious concern to the governors who managed the hospital as volunteers. Complaints of inaccuracy, neglect, and arrears in many books and records grew after the termination of the Napoleonic wars. These deficiencies only increased the tensions created by special difficulties in policy and transactions during this time.<sup>13</sup>

### ***Batson's Trust: Its Origin, Genesis, and History***

The growth of the hospital in the first part of the nineteenth century put strains on administration undertaken by volunteers assisted by a few hired staff.<sup>14</sup> A gap opened up between those who had official responsibility for record-making, particularly for ensuring accuracy in procedure and content, and those who made records daily as part of their jobs in the hospital. Nurses, doormen, and receivers were required to keep formal accounts of their actions so that the House Committee could exercise the control they needed over all activities in the hospital.<sup>15</sup> Records formed a bridge which spanned the gap between employees throughout the hospital and their managers on the House Committee. However, the House Committee was not a stable group and its effectiveness was impaired by changes in membership. While many gover-

nors accepted re-election, serving for up to three consecutive years and developing familiarity with the details of business, there was always some change in the composition of the Committee. At times the change was wholesale. New members might bring enthusiasm to their work, but they lacked intimate knowledge of all of the hospital's varied business and the learning curve was steep. The records of transactions were the consistent channel of information and communication and as such assumed a key role in administrative continuity.<sup>16</sup> By transcending the memory of individuals, records provided new and uncertain managers with unambiguous information about the hospital's position, debts, and continuing business needs. Any impediment to their clarity, consistency, and regularity posed operational problems which could not be overcome by reliance on recollections of participants.<sup>17</sup>

By 1820 disruptions of due processes in the hospital were sufficiently common that remedial action was clearly necessary. Problems originated partly in the inexperience of some managers with the complex business of a large hospital. But their shortcomings were exaggerated by the unpredictable state of the records, and in the case of the records surrounding the leasing of property, by their complexity.<sup>18</sup> Some records were erratically kept<sup>19</sup> and others, particularly those connected to land leases and financial tracking,<sup>20</sup> were not "consistently arranged, correctly stated, and neatly written."<sup>21</sup> In other words, the form of the records as well as their keeping were neither suited to the transactions they were meant to document nor to the uses to which they were put in the hospital. Faced with the prospect of real financial losses and repeated wasteful expenditures, the governors of the 1820s were receptive to innovation in the hospital's records to restore their effectiveness as tools of administration.<sup>22</sup> All records were considered in terms of their use to the hospital, "... each [being] of equal value (if worthy to be kept at all) by conducting, in its station, to the good order of the whole."<sup>23</sup>

The trust was the idea of Robert Batson,<sup>24</sup> and was to provide continuity in administration by regular and systematic records, which "from various reasons [had] fallen into arrears neglect and disuse."<sup>25</sup> It was probably mooted during the discussions over the disarray in the financial records in 1823 and 1824, particularly in connection with land leases and rents owing from land but also in the tradesmens' accounts.<sup>26</sup> The reasons for the problems are not stated unambiguously in the minutes; however, it seems likely that the managers' need for regularity and system in records was not met and the existing measures for record-keeping were becoming a source of confusion. The Accounts Committee reviewed the financial records at a series of special meetings in 1823. These deliberations resulted in a new system of book-keeping based on the journal as an intermediary between the cash book and ledger, and the preparation of balance sheets showing income and expenditure under classified heads.<sup>27</sup> As a member of the House Committee, Batson was a party to these discussions and at this time conceived the Trust to guarantee that the constant importance of records to the administration of the hospital and its managers might never be underestimated or neglected again.<sup>28</sup>

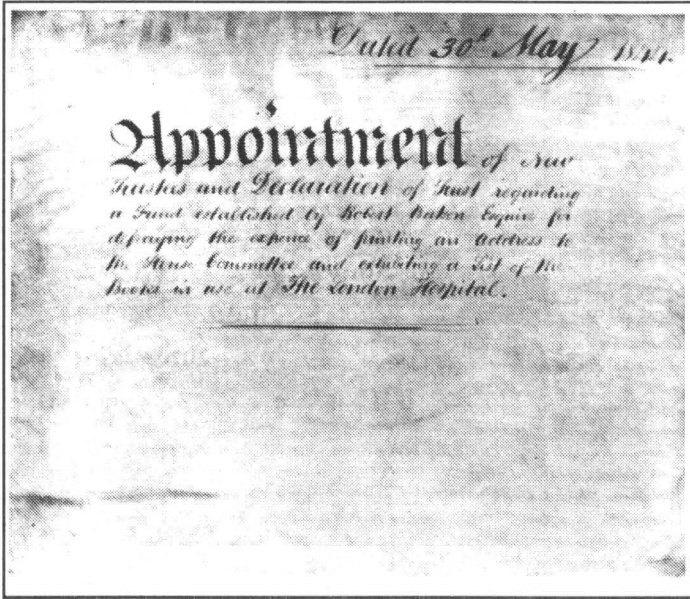
The Trust, made and declared in an indenture executed on 6 April and sealed on 23 April 1824, firmly bound the signing parties to its provisions on penalty of withdrawing funds.<sup>29</sup> Batson, for his part, purchased "one hundred and four pounds six shillings Bank three pounds per cent annuities" which he assigned to the hospital in perpetuity to provide income for the purposes of the deed.<sup>30</sup> The Governors, for their

part, agreed to use the income from Batson's conditional gift to support the objects laid out in the body of the deed. Batson, John Hall, current Chair of the House Committee, and Christopher Richardson Jr., as the trustees pro tem, acted as guarantors for the proper expenditure of the funds. The indenture provided for the succession of trustees and for the ultimate disposition of the Trust's funds should there be a "breach or nonperformance" of the conditions agreed in the indenture.<sup>31</sup>

The Trust's novelty in the hospital lay in explicitly linking best administrative practice with a knowledgeable audit of records and record-keeping. The trustees in succession, possessed of the investment and its income, gave money in perpetuity to the "London" for the support of certain mandatory action required by the indenture. The Trust's fund defrayed the cost of printing an annual address to the House Committee for the express benefit of its new members who, more than likely, would be unfamiliar with the details of the hospital's administration and unaware of the roles of key officers and their record responsibilities. This Address, prepared by the current House Committee under the direction of John Hall, outlined the specific duties of each officer and committee of the hospital and gave a fairly complete overview of the "London's" business and the records that business produced.<sup>32</sup> The Address noted that "...a list of every book used in the hospital is suspended in the committee room and likewise a list of every book used in the various departments...."<sup>33</sup> The fund provided a frame for this list, or inventory, of records, which most likely was created during the review of the financial books undertaken in 1823.<sup>34</sup> A copy of the Address was to be sent to each new member of the committee within three months of his election and presumably was available for other purposes too. The indenture further required an audit of records and an official report of that audit. At the first meeting of the Committee in April and October every year, the books were sent to the Committee's room for formal examination to ensure that they were all up to date and properly kept and a report of the examination was to be minuted in the Committee's book.

Batson's fund remained on the "London's" books as a conditional trust for 128 years. In 1826 Batson suggested opening the fund for other donations. This accumulating fund and its income would be managed by the governors in support of other types of records activities, such as indexing and abstracting. In 1834 he added ten pounds six shillings to the fund.<sup>35</sup> Public support for the fund by certain governors was genuine and there seems to have been general agreement among those active as managers that its purposes were important to the success of the hospital. Their agreement was passive and never led to the active pursuit of more money.<sup>36</sup> The fund never received any other donations and Batson remained its sole, active champion. However, the terms of the Trust were satisfied for many years. In 1844, following the death of Batson, new trustees were appointed and a new indenture declared the Trust again (**figures 3 and 4**).<sup>37</sup> The Address was revised in 1851 but does not seem to have been printed for distribution and presumably was never revised or issued again.<sup>38</sup> In 1868 the Clerk pointed out that the Trust needed to be updated, again because of the death of a trustee. The cost of this re-execution was not insubstantial. The governors agreed to divert money from the fund to pay for the preparation and engrossing of a new deed appointing a new trustee and declaring the Trust anew (**figures 5 and 6**).<sup>39</sup> Thereafter, the hospital governors as a corporate body apparently acted as trustee for the fund and no further deeds were executed. In 1948 the Trust still existed as a

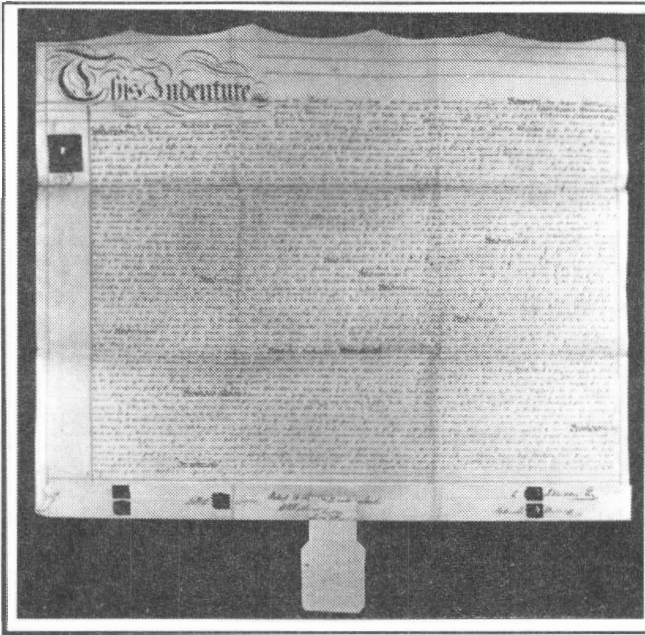
responsibility of the hospital governors and was listed in the massive stock-taking exercise that preceded the declaration of the National Health Service in April 1948.<sup>40</sup> By this time the fund was virtually dormant and its provisions for printing the Address, based on updated provisions for administration and records, had long since fallen into disuse although periodic pro forma audits were minuted by the House Committee at least until the 1890s.<sup>41</sup>



**Figure 3**

*Docket (entered on a portion of the reverse) "Appointment of new trustees and declaration of trust ... 30 May 1844," LH/D/4/1.*





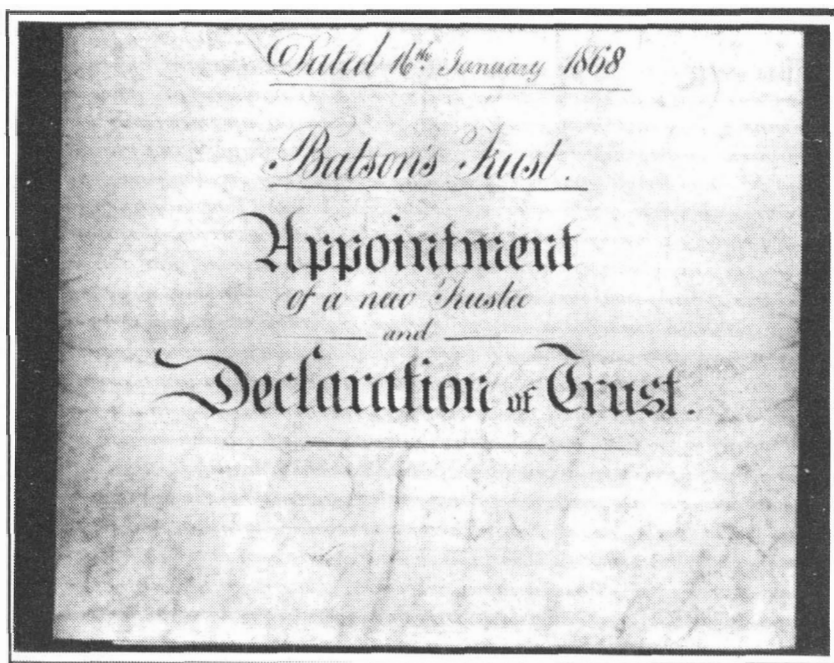
**Figure 4**

Obverse of "Appointment of new trustees and declaration of trust ... 30 May 184," LH/D/4/1, parchment, 22 x 27 ins. The parchment was commercially prepared and its formal beginning "This indenture" is printed. The cameo stamp below the "his" in the first word "This" bears the supplier's name viz., "sold by Waterlow and sons, Birchin Lane Cornhill." The payment seals in the left margin is crossed with a stamp bearing the date 17.4.44. The photograph does not clearly show the pencil endorsement of "35s," above the payment seal. Presumably this is the amount of duty paid for this indenture.

The clerk's hand is a clear cursive. The identification of operative clauses is again easy to scan because of the size differential between the initiating phrases and the remaining text in the clause. Conditional clauses precede the operative declaration of the indenture. From top to bottom these are "This Indenture," "between," "whereas," "and whereas" (repeated 7 times), "now this indenture witnesseth," "provided always," "provided lastly," and "witnesses."

The indenture rehearsed the history of the trust, the status of the original trustees, and the actions of the House Committee in appointing new trustees.

The new trustees were Octavius Edward Coope (in place of Robert Batson, deceased), Christopher Dowson the younger (in place of Sir John Hall [formerly John Hall]), and Frederick Young (in place of Christopher Richardson Jr.). All were life governors of the hospital. Dowson and Young were also subscribers to the National School in Limehouse.



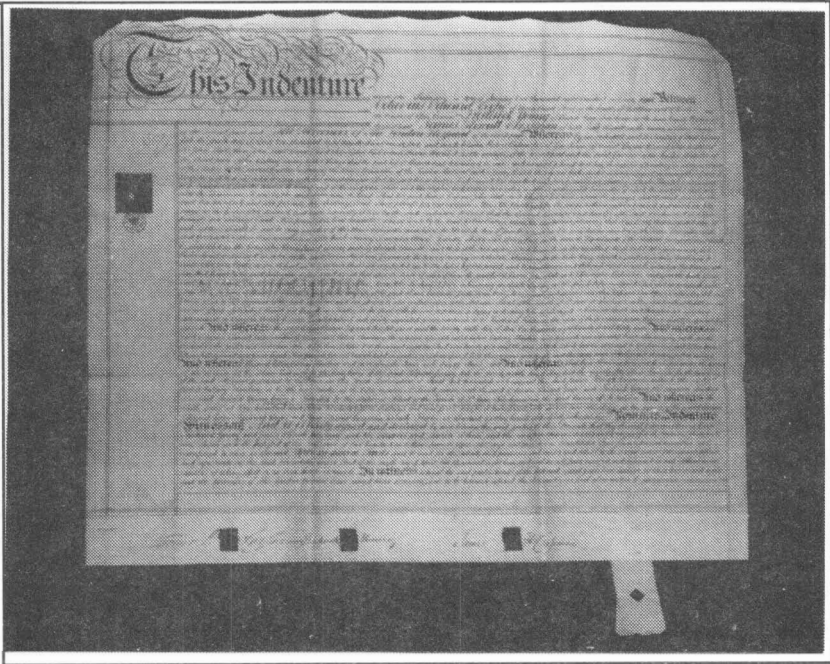
**Figure 5**

Docket (reverse) "Batson's Trust appointment of a new trustee and declaration of trust 16 January 1868," LH/D/4/1.

**Figure 6**

Obverse of "Batson's Trust appointment of a new trustee and declaration of trust 16 January 1868," LH/D/4/1, parchment, 22 x 28 ins. A parchment, prepared commercially, with its intended form of document printed as the incipit "This Indenture." The printed cameo across the stem of the "T" in "This" identifies the supplier as "Witherby London." The hand is a clear cursive with no embellishments; however, the initiating phrases of the operative clauses are in a stylized hand and the double "ss" in the text are rendered "fs," suggesting either an older form was used as the model or a conscious attempt to convey formality by using an older form of these letters. The duty stamp in the left margin is crossed with a date stamp "London 16.7.67" and above is the clear pencil endorsement of the "35s" paid as duty for this document.

The operative clauses are easily picked out by the large point phrases or words with which these commence. Nine lines up from the bottom, an interlineation in small letters explains the reduction of the original amount of the trust's capital by the "sale of twelve pounds six shillings and ten pence part thereof to defray the costs of these presents...." This indenture, agreed by the majority of the House Committee as required by the condition of the earlier indenture and in common with the 1844 indenture, provides for the perpetual succession of trustees-- "... and the survivors or



survivor of them and the executors administrators and assigns of such survivor shall and will be possessed of the said sum...."--and adjusts the original terms of the Trust--".... agreements in the .... Deed of the sixth day of April one thousand eight hundred and twenty four expressed and contained or such of them as are capable of taking effect or as near thereto as may be ...."

The new trustee was John Hiscutt Crossman, named to replace Robert Hanbury, who was recently deceased. Hanbury must have been an assign of Christopher Dowson although this descent of trusteeship is not stated in the indenture or the House Committee resolution.

The Batson's Trust documents package (LH/D/4/1) contains the resolution of the House Committee (1844) appointing new trustees, signed by all members of that committee. This document was then used as the form for the draft of the 1867 resolution. A fair copy of the resolution of the House Committee appointing new trustees on 28 May 1867 is also included.

### ***Batson's Trust as Records Management***

Management by powerful volunteers who visited the hospital for relatively brief periods of time was a management "*in absentia*." Among its attributes were a special vulnerability to a loss of administrative memory, because of the change in managers at annual elections, and a reliance on current and historical records to provide continuity. Effective oversight of the hospital's daily business depended on a regularity in procedure and records to connect the part-time managers, who only convened in a

weekly meeting, with the hospital's full-time staff.<sup>42</sup> The experience of Batson and the other governors in business confirmed the importance of system and regularity in records as a condition for profitable trading. They expected no less in the hospital. But beyond requiring current records to promote consistency in administration, the governors of the charity needed the support of historical records to maintain the bonds of community. The governors as a group derived their identities from strong social and business connections outside the hospital. They clearly felt obliged to honour the wishes of this larger community, particularly their predecessors at the hospital who supported its development as life-long subscribers. Their intentions were embodied in the hospital's records of transactions and decisions. Consequently, consistent records were doubly important in the charity because documents integrated the intentions of the past with the decisions of the present.

The Trust was a quintessential example of the timelessness of intent through its union with a document. The indentures, along with their associated documents and mandatory actions, confirmed the relationship between officers, committees, and records that had developed since 1750, partly by restoring system and regularity to records and partly by establishing a common induction for new managers to make them aware of the hospital's documentary information and their responsibilities for accountable records. The device of an indenture to affect a trust was a tried technique to declare intent and to provide perpetual income to support it by protecting the capital from diversions. The charity was accustomed to and confident with accounting for donated funds and the form of a trust deed was familiar to the governors as were its uses.<sup>43</sup> Batson's Trust was one of the first conditional donations received by the "London" and its terms were integrated seamlessly with the regular routines of the House Committee regardless of its current interests and priorities. However, the Trust was not easily adjusted to accommodate new developments in the hospital which were unforeseen in the 1820s.

By the latter part of the nineteenth century the importance of the traditional financial and managerial roles of the governors had been eclipsed by the transformation of hospitals into centres of medical care and research. As the hospital changed from a volunteer charity to a social necessity there were associated changes in administration. Medical committees assumed a larger role in directing the affairs of the institution and full-time officers took over most of the active duties of the volunteer House Committee. By the end of the nineteenth century, management *in absentia* had been virtually replaced by management *in situ*. Records still needed to be transactionally clear and transparent, but to this requirement were added new roles in current communications within the hospital, particularly as key supports for a greatly expanded system for managing patients and pursuing medical research. Many bridges knit the institution together, cementing the hospital more to current goals and less to the wishes of governors and donors in the past. Some of these new links were formally embodied in records, but many were informal, based on daily contact, impromptu meetings, shared expectations, and understandings. The present became enlarged, embracing more time and involving more types of communications and records. Except for establishing responsibilities and rights, mostly of a fiduciary or legal nature, the records of the past were no longer accorded a preeminent place as sources of authority in administration. It was the covenant among current governors and managers with an eye to the future, the result of their commitment to medical science and research, that motivated the hospital.

In this new administrative environment, the Trust was silent about the records created by medical and surgical practice, which soon came to absorb the hospital's record-keeping energies. These records were never part of Batson's Trust. Moreover, a full-time management *in situ* produced new types of records to meet the current administration's needs for up-to-date operational clarity and information. The indentures established a permanent relationship between the donor, the hospital, and the Fund's trustees, fixing purposes that might be lost because the managerial group changed each year. Full-time administrators, by contrast, established their procedural relationships based on a general presumption of continuity over several years of service. This stable base allowed intent to be supported by less formal means. Regular adjustments of procedures and forms could accommodate new requirements and these changes were agreed and absorbed by the group because they had close daily contacts which permitted agreement to be in perpetual adjustment. The strength of the Trust was its resistance to variations and over time this proved to be its greatest weakness. Because trusts were difficult to change, they lacked a flexibility to respond to new needs, in this case to records and management's requirements for them. Batson's Trust lost its relevance to the hospital despite its binding provisions and its clear intent.<sup>44</sup> Its procedures bound the parties to forms and enactments in tune with the volunteer style of administration of the 1820s and with the particular concerns of contemporary governors for specific records. It did not provide sufficient guidance or funds to support new requirements for record-keeping or new directions in administration.<sup>45</sup> The Trust's deeds, the Address, and the inventory of records are only a snapshot of records management from the 1820s. These were not the first frames of a moving picture into the coming decades.

### Notes

- 1 "Declaration of Trust regarding a fund established by Robert Batson Esq. for defraying the expence of printing an address to the House Committee and exhibiting a list of Books used at the London Hospital, 6 April 1824" [Figures 1 and 2]. "Appointment of New Trustees and Declaration of Trust regarding a fund established by Robert Batson Esquire for defraying the expence of printing an address to the House Committee and exhibiting a list of the books in use at the London Hospital, 30 May 1844" [Figures 3 and 4]. "Batson's Trust Appointment of New Trustees and Declaration of Trust, 16 January 1868." LH/D/4/1 [Figures 5 and 6].  
The Batson's Trust package includes, in addition to the three indentures agreeing and declaring or re-declaring the trust; A short address to be forwarded to each member of the House Committee of the London Hospital after their election to serve on that Committee, and which they are earnestly requested to peruse, London: Free-School, Gower's Walk, Whitechapel, 1824; resolutions of the House Committee, 1844 and 1868; and a copy of a list of all books and reports to which the attention of the House-Committee is earnestly requested. Whitechapel: Free-School, Gower's walk, [n.d. c. 1824]. This list is reproduced in the Appendix.
- 2 "Declaration of Trust ... 6 April 1824," LH/D/4/1.
- 3 A recent report in Britain identifies hospital information needs in relation to the potential of new technologies. Great Britain. Audit Commission, *Review of Patient Records-keeping in the National Health Service* (London, 1995). The archival perspective on hospital records in the United States is provided by Joan Krizack, ed., *Documentation Planning for the U.S. Health Care System* (Baltimore, 1994) and Nancy McCall and Lisa A. Mix, eds., *Designing Archival Programs to Advance Knowledge in the Health Fields* (Baltimore, 1995). In Canada a preliminary report on the needs of archives in health care is Hannah Institute for the History of Medicine and Associated Medical Services Incorporated, "Enhancing Communication and Community: a Proactive Healthcare Archives Assistance Policy," (Toronto, 1994). For a general history of technology in hospitals see Joel D. Howell, *Technology in the Hospital; Transforming Patient Care in the Early Twentieth Century* (Baltimore, 1995).
- 4 The two standard histories of the London Hospital are E.W. Morris, *A History of the London Hospital* (London, 1910) and A.E. Clark-Kennedy, *The London* (2 vols) (London, 1962).

- 5 The London Hospital was founded in 1740 by a group of charitably minded men, mostly from the business community in East London, in association with members of the medical profession drawn from the royal colleges of physicians and surgeons. For several years the hospital operated modestly out of rented premises, gradually expanding its work to the point where a permanent home was required. In 1749 the governors acquired a large site on the south side of Whitechapel Road in East London. The first part of what would become today's substantial medical facility was opened in 1757 and in 1759 a royal Charter regularized the corporation and its powers. Additional clarification of the hospital's corporate rights, particularly concerning real estate, was provided by the *London Hospital Act* of 1884. In 1989 the name of the hospital was changed to the Royal London Hospital.
- 6 For example see the special meetings of the House and Accounts Committees in 1823 and 1824 concerning the new system for the financial books and the House Committee Minutes, 1826, concerning the admission of patients.
- 7 A donation of five guineas conferred governorship for one year and a minimum of thirty guineas made the donor a governor for life.
- 8 For a general review of the increase in financial business attendant upon the development of real estate, see the Memorial of the Secretary in LH/A/4/9 1823.06.04. Also see the discussions concerning the possible uses of pro forma contracts to ease business paperwork, LH/A/5/17 1824.07.27 p. 362.
- 9 For example, see LH/A/4/9 1826.02.28 concerning the admission of patients and LH/A/5/18, 1827.03.05, p. 145.
- 10 Leases and other legal documents were always held by the hospital's solicitor. For an example of records which were not at the hospital see LH/A/5/17 1822.01.08, pp. 68-69. In 1827 the House Committee ordered the minutes of special meetings entered in the main minute books rather than continuing the ad hoc practice of using a separate book, see LH/A/5/8, p. 144.
- 11 LH/A/13/3, pp. 124-26, Inventory of Committee Room and Inventory of the Clerks Office, pp. 164, 1824. Also see the following for references to security: space for securing the hospital's records and fitting-up of the clerk's room in 1824, LH/A/5/17, pp. 385, 1824.11.30, and LH/A/9/1 1824.06.19; custody of the seal and security of the House Governor's report book LH/A/5/18 1826.10.10; special access to records LH/A/9/1 1824.04.30; prevention of tampering by discontinuing use of lithographic writing on parchment in favour of manuscript, LH/A/9/1 1824.12.04 and LH/A/5/18 1824.12.07. Concerns for security and confidentiality of records is revealed by a House Committee minute, 1826.10.10, ordering the House Governor's report books sealed and deposited in a safe closet in the Committee room, LH/A/5/18, p. 110. A similar order for security was made in 1828, LH/A/5/18, p. 188. The governors' control of access to records was sufficiently well-established by 1833 for Mr. Andrews, a surgeon of the hospital, to seek permission for access to the records, see LH/A/4/9, p. 387. The earliest reference to security is in Vol. "T" of the Transactions, 1762.
- 12 In 1823 the Secretary outlined the increase in the work of his office since 1802. He reported that over three thousand letters had been received in the first eight months of 1822, LH/A/4/9 1823.06.04. The correspondence of the hospital was done by hand and was an onerous task. Also see references to the superintendent's duties concerning accounts for goods and services in LH/A/5/17, p. 320.
- 13 LH/A/5/17, 1824.12.01 refers to the chair's "arduous office of three years." Also see LH/A/4/8 (1806-1821), p. 152 on the books of account in 1814. The difficulties experienced in these years was probably more acute than the records indicate. The by-laws were altered in 1818 to tighten up the conduct of debate at sessions of the Court and the powers of the chair were enhanced. LH/A/2/6 1807-1833, p. 128. John Hall was thanked on more than one occasion for his "... able, upright and impartial conduct in the chair," LH/A/2/6 1807-1833, p. 102. There are also references to internal divisions over admission policy and over the allocation of jobs and responsibilities among the senior officers. One of the honorary medical staff accused the house governor of reporting on meetings to the press in 1832 and 1833. This was probably part of a wider dispute between the governors and the staff over rules and privileges for admitting patients to the hospital.
- 14 A short address .... p. 6. LH/D/4/1. In 1824 the House Committee reminded the House Governor of the importance of controlling access to the hospital to prevent stealing by the staff and importation of forbidden articles, particularly alcohol, LH/A/5/17, 1824.11.16, p. 383.
- 15 For example, see LH/A/4/9, 1826.02.28, p. 176-77; 1826.03.14, p. 179; and 1826.04.11, p. 182. In 1826 notice boards bearing rules of the hospital were hung in various places in the hospital to inform staff and patients of rules and decisions, see LH/A/4/9, 1826.03.14, p. 179. Another example was the continuing effort of the House Committee to exercise effective control over the pupils in the hospital and particularly over their conduct and eventual certification, see LH/A/4/9, 1826.03.14, p. 180. Also see the orders of the House Committee for records to be kept concerning: outpatients, LH/A/4/9, 1822.10.27, p. 27; nurses services for gratuities, *ibid.*, 1826.02.28, p. 175; register of burials, LH/A/5/18, 1825.11.29;

- carpenters' books, *ibid.*, weekly report on the state of the hospital, *ibid.*, 1826.01.24; wine books, *ibid.*, 1827.02.20. The number of these "small books" is unknown but was probably large in number and diverse in nature: see the Batson Trustees' statement in the hospital's Annual Report, 1845, LH/A/15.
- 16 See examples of the importance of records in this era: accounts for tradesmen and irregularities, LH/A/10/4, 1825.07.03; policy on admissions, LH/A/4/9, 1826.02.28, pp. 176-77; and search for earlier records on policy LH/A/5/18, p. 146. Also see "A short address..." pp. 3 and 5.
- 17 "A short address..." p. 8.
- 18 *Ibid.*, pp. 3 and 12. Also see LH/A/4/9, 1828.04.09, p. 228 and LH/A/9/1, 1824.06.19.
- 19 *Ibid.*, p. 9.
- 20 *Ibid.*, p. 12.
- 21 LH/A/9/1, 3 January 1824, 10 January 1824, 30 April 1824, 10 June 1824, 19 June 1824, and 4 December 1824. Also see the following for references to the House Committee's concern over records: LH/A/4/8, 1806-1821, p. 152 and LH/A/9/1, 1823.12.18.
- 22 "A short address..." p. 4.
- 23 *Ibid.*, p. 20.
- 24 Robert Batson, a life-time governor of the hospital since 1792, may have been the son of John Batson, a governor active in the management of the hospital in the 1770s. The minutes record several meetings of the governors before 1800 at "Batson's Coffee House in Cornhill." Robert lived in Limehouse, in the vicinity of the hospital, until the 1830s, when his address published in the annual report changes to Kennington in south London. He died in 1839. One Alfred Batson, presumably a son, and Sarah Batson, possibly a daughter, continue to be listed as governors. Alfred Batson's name disappears from the list of governors in the 1890s. No member of the Batson family was active as a governor or manager after the death of Robert in 1839.
- 25 "Declaration of Trust...April 6 1824," LH/D/4/1.
- 26 LH/A/9/1, 1823.12.18; 1824.01.03; 1824.01.10; 1824.01.31; 1824.04.30; and 1824.06.01.
- 27 LH/A/9/1, 19 June 1824. The difference in the presentation of accounts and the financial picture of the hospital is seen in the published statements in the annual reports, for example, that for 1822, pp. 20-31 and for 1827, pp. 30 and 31, LH/A/15.
- 28 Batson served as member and Chair of the House and Accounts Committees, hospital Treasurer and Visitor. During his terms of office, he seems to have paid particular attention to the records of the hospital, and to its finances and physical fabric, making many recommendations for improvements in buildings, administration, and record-keeping throughout the 1820s and 1830s. For example, see LH/A/5/18, 1826.01.24.
- 29 The Trust appears in various wordings and in a draft form in several places. Batson first suggested a system and a fund to support it on 3 March 1824 in a formal letter to the chair of the House Committee. While the letter has not survived, it appears as a transcribed copy in the Minutes of the House Committee and again in the Committee's report book which was submitted for the quarterly Court of Governors. On 9 March the House Committee authorized the hospital's solicitor to draw up a short trust deed in "rough draft ... under the direction of Mr. Batson." Formal thanks to Batson for his gift is recorded on 27 April 1824, LH/A/6/16.
- 30 "Declaration of Trust .... April 6 1824," LH/D/4/1.
- 31 *Ibid.*
- 32 Batson drafted the address which was revised by John Hall and the Committee. He also prepared "an abstract of the index of the minutes of the House Committee from 1821 and also a collection of all the printed forms adopted by the Committee..." The abstract was published as an appendix to "A short address..." Also, see LH/A/5/17, 1824.04.27, p. 328.
- 33 "Declaration of trust ... April 6 1824," LH/D/4/1.
- 34 LH/A/5/17, pp. 316-17, 3 March 1824.
- 35 LH/A/4/9, 1826.08.30, pp. 185-86 and 1834.11.27, p. 435. Batson suggested that the accumulating fund be called, "A fund for the preservation of the regulations of the London Hospital and of the books, records and documents belonging thereto," LH/A/49, 1826.08.30, p. 186.
- 36 See the accumulating fund statement in the annual report for 1833, p. 37 and 1845 (unpaginated), LH/A 15.
- 37 "Appointment of new trustees ... May 30 1844," LH/D/4/1.
- 38 The revised address has not been located.
- 39 "Batson's trust appointment of new trustees ... January 16 1868," LH/D/4/1.
- 40 "Return of assets (Return "A"), endowments, holdings other than land as of 30.12.1946," LH/F/9/37.
- 41 A very complete report on the examination of the books is contained in the Minute Books for 9 November 1824, LH/A/5/17, 1824.11.09, p. 381-82. For other examples of the audit according to Batson's

- Trust, see the following: LH/A/4/9, 1834.04.03, p. 400; 1834.10.02, p. 480; 1835.09.24, p. 520; 1836.04.05, p. 543; and 1836.10.04. Also see LH/A/5/18, 1825.11.29.
- 42 See minutes concerning the public display of hospital orders, LH/A/4/9, p. 179 and "A short address....," p. 6.
- 43 The annual reports list the growing number of conditional trusts received and managed by the hospital throughout the nineteenth century. For an overview of these trusts, see the list published in the Annual report for 1903, LH/A/15.
- 44 E.W. Morris's history of the London Hospital outlined its departmental organization and the relationship of these departments to the various committees of governors. See especially Chapter xiv, "The Administration of a Modern Hospital." It is interesting to note that Morris, current House Governor in 1910, remembers Batson as a "London" personality although it is clear that Morris has confused Robert with John Batson. Morris's peroration, constructed as a journey through the hospital, remarks on the great men whose achievements left their mark on the "London,"  
Batson, that stickler for sums and figures, and tables and averages, may be found in the Registrars Room and in the Statistical Department, wearing an eternal smile, for his flights of fancy have been exceeded (p. 292).
- 45 The financial records were again in a chaotic state in 1828, this time as a result of illness and the consequent absence of the hired official responsible for their maintenance, see LH/A/4/9, 1828.04.09, p. 228.

### Appendix

This list was prepared and printed in 1824 and constitutes one of the associated documents of Batson's Fund. A copy hung in the Committee Room of the London Hospital. An "\*" indicates that the series survives, in whole or part, in the archives of the hospital. The span date of the records and the archives reference to the series are provided in parenthesis.

A list of all books and reports to which the constant attention of the House-Committee is earnestly requested.

- \*Minute book of General Courts (1743-1954, LH/A/2)
- \*Report of House Committee to General Courts ([1742-1948], LH/A/4)
- \*Minute Book of House-Committee ([1742-1948], LH/A/6)
- \*" " " Committee of Accounts ([1750-1903], LH/A/9)
- " " " Building committee
- \*House Governors Report Book ([1811-1830], LH/A/17)
- \*House Visitors' ditto ([1750-1924], LH/A/16)

### Pecuniary Books

- \*Cash Book, \*\*Journal and \*\*\*Ledger containing *every* source of income and expenditure (\*[1749-1968], LH/F/2; \*\* 1824-1947, LH/F/3; \*\*\*[1740-1910], LH/F/1)
- \*Rent Ledger ([1724-1966], LH/F/10)
- \*Tradesmen's Ledger, with their accounts examined and filed weekly (1751-1814, LH/F/8)



Books of Columns of Dividends due

.....of Rents due

.....of Annual Subscriptions

\*Salary and Wages book ([1742-1914], LH/F/11)

\*House-Governor's Petty Cash Book ([1749-1947], LH/F/6)

\*Register of Bequests in Reversion, etc ([1743-1942], LH/F/9)

Bankers' Books

### **House-Governor.**

Daily Register

Weekly Report

Chaplin's list of Officers and Servants, and number of patients who attend Divine Service and of those who receive the sacrament

### **Medical Officers.**

Report Book

Physicians' and Surgeons' Minute Books

Surgeons' Order Book for Instruments. etc

Medical Officers' ditto for Patients' Diet, Medicine, etc

Surgeons' List of Patients, cured or discharged, or fit to be so

Physicians ditto

List of those Patients who have been upwards of two months in the House

### **Apothecary.**

Brandy and Porter Book

Wine ditto

Book with all Medicines received and expended

Order book for Agenda

### **Matron.**

Book of Weekly Vacancies of Patients

Ditto of Receipt and Expenditure in her Department

Order Book for Agenda

Account of all Household Linen, Woollen, etc under her care, and when issued

**Clerk.**

- \*Register of In-Patients ([1760-1805], LH/M/1)
- Ditto of Out-Patients
- \*Governors' Book, In-Patients ([1778-1784], LH/M/1)
- Ditto Out-Patients
- Clerk's Agenda for House Committee
- Admission Book for Tuesdays
- Paupers' ditto
- Black ditto
- Diet ditto (General)
- Diet ditto (Meat and Potatoes)
- Petty Order ditto
- Book for Pupils on Leave of Absence

**Head Nurse.**

- Account of All Linen, etc. delivered to her by Matron
- Book with Remarks on the Conduct of Nurses and Assistant Nurses

**Nurses.**

- 8 Diet Books
- 8 Books for extra Bread, etc
- 8 Medicine Books
- 8 Books of Bye-laws for regulation of Nurses, Watchers, etc transcribed by themselves
- 8 Inventories of every Article in their respective Wards
- \*Annual Report of Hospital ([1741-1948], LH/A/5)
- \*Bye-Laws and Standing Orders (1758-1949, LH/A/1)
- Collection of Printed Forms
- Annual Address to House Committee

*N.B. these various Books having been opened or appointed, upon mature consideration; it is recommended they should be examined by Gentlemen of the House Committee frequently, that none of them may drop into arrear or disuse without full discussion, and in which case that this list should be immediately corrected. A General Inspection of them is appointed at the First meeting in April and October every year.*