

MEMORANDUMFUTURE OF THE KING GEORGE V HOSPITAL

The trustees of the King George V Hospital (The Seamen's Christian Friends Society Hospital Trust) have decided that the hospital shall be closed on the 31st January unless before that date they have been able to negotiate the transfer of the hospital to the Government of Malta as a going concern.

The Secretary to the Trust, Mr Frank M. Trumble, is coming to Malta on January 9th and expects to return to London on January 14th.

What the trustees have in mind appears to be as follows:

The Government would take over the physical assets - building, furnishings and equipment - without any payment.

A proportion of the existing Trust funds would be transferred if the hospital was kept open to seamen and the general public, both British and Maltese. This might amount to about £27,000.

The Government would be required to assume responsibility for the current overdraft not exceeding £12,000.

The Government would be expected to offer continued employment for the existing staff, i.e. the matron, sisters, nurses and domestic staff.

Before any Trust funds could be transferred, the approval of the Charity Commissioners in the United Kingdom would have to be obtained. There are certain Trust funds, the Wiseley and Hardeman bequests, amounting to about £20,000 which could not be transferred because  
there ....

there is a bequest-over - that is to say, when the original endowments were made it was provided that in the event of the hospital ceasing to be conducted as a Protestant Hospital, these funds should be used for missionary activity elsewhere.

In considering what should be the future of the hospital, some regard should be paid to its previous history. It has been built and maintained by the raising of funds, primarily in Britain, in memory of the sacrifices of many during the First and Second World Wars. Lord Methuen launched the original appeal which was widely supported - the Wisely and Hardman funds were given, the interest only from which was supported the Hospital. After World War II the Scottish Red Cross provided about £160,000 to rebuild the hospital and the Silver Thimble Fund (primarily subscribed by nurses) £27,000 - Lady Bernard was responsible for much of the success of these appeals. The Trust was initially and has throughout been primarily an administering authority. The bulk of the capital has been raised by others. A brief outline of the history of the hospital is contained in Appendix I.

There are broadly three courses of action open to the Government:

- a) to refuse the offer of the Trust and to have nothing to do with it;
- b) to seek to make arrangements which would enable it to continue as a private hospital providing for the general public;
- c) to take it over as a purely Government institution.

(a) To Refuse The Offer

If this were to result in the Trust being forced to negotiate with the existing Council of Management, and if the Council could carry on without further financial

/ support ...

support, there would be something to be said for this course of action.

But the Trust would almost certainly close the Hospital immediately. The Council cannot carry on without some interim outside finance. The result would be that existing staff numbering nearly 60 would be discharged.

The Hospital is built on land now belonging to the Government - Services 'perpetual user' land transferred at Independence to the Malta Government and not subsequently leased, transferred or otherwise regularized. The Government must ultimately be involved in its future.

To refuse the offer does not seem wise.

(b) To continue as a non-Government hospital

There is already a need for more beds for local patients in private hospitals. Existing facilities, except for K.G.V., are even now overstrained.

The following factors -

the growing number of people settling in Malta, many of whom are ageing;  
the increasing tourist influx;  
the growing international community brought about by new industries and by Malta's Independence;  
developments in Libya;  
larger numbers of ships in Drydocks and the Free Port;  
the probable contraction of Services medical facilities -

all to a greater or lesser extent support the view that more and not less private hospital accommodation is needed - particularly having the high nursing standards K.G.V. could provide.

The Hospital's magnificent site, its layout and atmosphere, the high standard which it has achieved in the

/ past ...

past and which, given continuity of good local management, it could attain in the future, - these considerations all argue for its continuance under new management as 'a cottage hospital' providing facilities of a high calibre which would be open to all doctors and patients. This would have to operate under some form of charitable Trust or other public control.

In the long run, if successful, this form of operation relieves the Government financially.

(c) To take over as a Government institution

The Minister would be able to make good use of the building, equipment, and site. Various possibilities have been mentioned at different times, e.g.

rehousing of an existing government institution,  
a new children's hospital,  
an obstetrical and gynaecological unit of the Medical School.

No doubt, many other uses could be examined.

Sir Clement Price-Thomas, President of the BMA, who visited the Hospital at the request of the Trust during 1966, urged this course in a letter of which a copy is attached as Appendix II. There could, of course, be no question of handing over the hospital to a private body even under course (b) above, as he seemed to think. Secondly, a continuation of X.G.V. as 'a cottage hospital' providing services to all would be dependent on Government since the buildings would ultimately revert to the Government.

But if taken over as a Government institution, then it is doubtful whether the Charity Commissioners could transfer the balance of the endowment (£27,000) and they would have to consider what alternative use it could be put to.



Summary

On balance the advantage seems to the present K.G.V. Council of Management to lie in course (b) - continuing to keep the Hospital open as a non-Government institution. The longer term arrangements are important but the immediate need is for short term action to enable the Hospital to keep open on the 31st January. It is suggested that the best way to proceed would be as follows:

Short term - for the Government or Ministry of Health

- (i) to decide that whatever the long term future, it wished the Hospital to remain open and continue to operate after the 31st January.
- (ii) to accept the surrender of the buildings, equipment and furnishings from the Trust. There could be argument with the representative of the Trust about responsibility for the whole of the overdraft.
- (iii) to invite the existing Council of Management, augmented or changed as the Government may wish, to continue to operate the Hospital pending consideration of its longer term future.
- (iv) to assure them of financial support not exceeding £3,000 up to the 31st March, 1967. Figures and argument based on recent experience can be adduced to support this.
- (v) to ask them for estimates for the following year based on financial support not exceeding £4,500 in the first six months and £3,000 in the second six months of the next financial year. Since the Hospital has been rundown it will take time to recruit staff and to recapture public confidence. For this reason a subsidy would be heavier in the initial stages and should diminish as the Hospital gets under way.

- for the Council of Management

- (vi) to assure existing staff that they would be re-engaged on not less favourable terms than those they now enjoyed. This should be done immediately they are in a position to do so.
- (vii) to put in hand immediate steps to recruit nurses, sisters and a new matron. Essential staff have not been recruited in recent months by the Trust in view of their decision to close.
- (viii) to announce the continuation of the hospital under an interim arrangement pending consideration of the longer term future.

- for the Governor-General

- (ix) to explain the position to the Charity Commissioners and seek their consent in principle to making available the Endowment Funds and such other funds as could be

/ retained ...

retained subject to their being eventually satisfied about the arrangements for the future of the Hospital.

Longer Term consideration of the Future

The immediate future of the staff and the hospital would in this way be **secured**. If it is allowed to close at the end of the month, it is very doubtful if it could be reopened - except as a Government institution. It would then be possible to consider the longer term future.

One suggestion which would be worth considering would be the establishment of K.G.V. as a Red Cross Hospital operating under a form of Trust Agreement or Contract with the Government, which provided for the representation of the Government on the Board of Management, the eventual reversion of the property to the Government, and to which the Silver Thimble Fund and any other endowments could be entrusted by the Charity Commissioners. The details of this would take longer to work out but there do not seem to be insuperable difficulties. The Scottish Red Cross having done so much, it would be fitting to associate it with Red Cross. Red Cross could help with recruiting staff and possibly giving equipment, but not

/ with ...

with finance. It would make a suitable focus of activity for a local Red Cross formed from those already interested in the Hospital.

If after two or three years of efficient local management the Hospital still could not make its way, then little harm would have been done and the Government would have to take it over for its own purposes. All that would have been lost would be time.

The existing members of the Council of Management listed at the end of Appendix I have no vested interest themselves in the Hospital. They consented to serve at the request of the Governor-General as a voluntary body of public-spirited persons to assist the Trust in managing the Hospital more efficiently. Their advice is disinterested, impartial, but experienced. If action along the lines outlined above is acceptable, it is suggested that Dr. Cheverton (ex Western Region Hospital Board of Management in U.S., with experience in Cyprus, the Caribbean and West Africa, now settling in Malta) should be invited to help on a voluntary basis.

9th January, 1967.

---

APPENDIX I.

KING GEORGE V MERCHANT SEAMEN'S MEMORIAL HOSPITAL  
MALTA G.C.

The hospital was built after the first World War as a memorial to merchant seamen who died in the War. The Governor of Malta, at the time, Lord Methuen, launched an appeal in The Times. The response was generous and the subscribers included the three sons of the Rev. George Wisely, Presbyterian Minister in Malta. The funds were vested initially in the names of Lord Methuen and Captain Wisely until their transfer to the Seamen's Christian Friend Society who agreed to administer the Trust and to equip King George V Hospital as a protestant hospital and to provide and minister to the spiritual and temporal welfare of seamen and others.

The hospital with an initial capacity of 24 beds was opened in 1922. The building was soon extended until 48 beds were available. The Hospital played an important part in the life of Malta until 1942 when it was destroyed completely by enemy action. After the War it was decided to rebuild the hospital completely on the original site. The number of dependants of Service personnel on the Island was considered in the rebuilding programme. Appeals in the U.K. and Malta were successful and the Scottish Branch British Red Cross Society contributed over £160,000 to the rebuilding of the hospital which was reopened on St Andrew's Day 1948 by Lady Louis Mountbatten. The new Hospital was larger than the original one.

Sick and injured seamen of all nationalities were treated at the hospital and also many of the dependants of Service personnel. The changing circumstances of the last twenty years led to a reduction in potential patients and new policies were required. In consequence of the introduction of the National Health Scheme in the United Kingdom, the responsibility for service families was assumed by the Armed Forces in 1948 and many patients were lost. The number of merchant ships using Malta has fallen and the numbers of ill seamen has been reduced. It has always been the policy of the hospital to admit Maltese patients as long as there was room.

/ During ...



"A"

During the last five years, suggestions by the Trust that the hospital might have to be closed have been resisted. Many people felt that it still had an important part to play in Malta but that it was not being adequately managed. The Trust in London were persuaded to accept the appointment of a local Council of Management. The names of those now composing the Council of Management are in the attached addendum. This arrangement worked unusually, partly at least because the Trust in London never fully accepted the local Council of Management - they regarded it as a Maltese attempt to take over the hospital. Eighteen months ago, the Trust gave notice of their wish to surrender the Trust. The Charity Commissioners who exercise control in such matters intimated that, in such circumstances, the normal course was to realize the assets of the charity, to pool the resulting funds and to apply them as nearly as possible, to the original intentions of the Trust. For instance, the funds might be used for the benefit of British merchant seamen elsewhere in the Mediterranean. This idea was opposed and was not pursued. But, in consequence, discussions were opened with the Trust and the Charity Commissioners with a view to altering the Trust Deed so that the hospital might be designated as a Christian rather than a Protestant hospital, and it was hoped that this might lead to the development of the work of the hospital on a wider basis.

Early in 1966, the Trust decided against pursuing this further and thought that they would be able to raise funds from new sources for the support of the hospital. They drew up a memorandum explaining the needs for the future and arranged for a medical management committee to be set up in London, under the chairmanship of Sir Clement Price Thomas, who had been one of the King's Physicians and is the President of the British Medical Association. This Committee visited Malta in June of last year and made an encouraging report. The local Management Committee assumed that steps were being taken to raise more funds in England to carry out the recommendations of the Medical Committee. When nothing had been heard by September, further enquiries were made. Towards the end of October, the Trust decided that the hospital would have to close or be transferred to the Government. The reasons for their decision were given as follows:

- "a) that we are unable to recruit staff to run the hospital as at present organised with the money available;
- b) that less use has been made of the hospital in the 9 months to 30th September 1966, than in the same period of 1965; and
- c) that we are not justified in the light of reduced local support, in continuing to apply Trust moneys for the upkeep of a hospital of a kind quite different to that authorised by the Trust Deeds.

/ While ...

While there seemed some chance that the hospital would be allowed to fulfil a need, my Committee were prepared to ask the Charity Commissioners to condone a breach of the trusts on which the premises and certain moneys were held, in order to keep the hospital open. This last year, it has been made clear to my Committee that the hospital is not, as at present organized, to be allowed to play a worthwhile role. The reasons why departments of our hospital are under employed while similar departments of other hospitals in Malta are overcrowded are as well known to you as they are to us.

We accept that there is a very real need for more hospital accommodation in Malta. We have come to the conclusion that the Maltese Government alone is likely to be able to provide the money needed to carry on the hospital and to provide the accommodation needed. It is for this reason that we are approaching the High Commissioner in London with a view to negotiating a transfer to the Government, rather than approach you with a view to a Committee under your aegis assuming control, as was envisaged a year ago."

COUNCIL OF MANAGEMENT  
K.G.V. HOSPITAL

PRESIDENT

His Excellency the Governor-General, Sir Maurice Dorman,  
G.C.M.G., G.C.V.O.

CHAIRMAN

Mr Paul Sciberras, 81, Desiro Street, Sliema.

SECRETARY

Surgeon Major R.L. Casolani, 51 Villa Casolani, Ta' Xbiex.

MEMBERS

Dr E.A. Agius, M.D., D.Obst., M.C.O.G., M.R.C.O.G. (Lond.),  
Peveril, Kappara Lane, Msierah.

Rev. J.R.L. Ash, Senior RAF Chaplain C. of E.,  
24D, Officers' Married Quarters, RAF Luqa.

Mrs. C. Celeiro, "Casa Semut", Main Street, Balzan.

Mr J.J. Canroy, Villa Gourgion, 123, Main Street, Lija.

Prof. A.J. Craig, O.B.E., M.D., F.R.C.S., "The Pines", Ta' Xbiex.

Prof. J.B. Debono, C.B.E., M.D., F.R.C.P. (Lond.),  
6, The Gardens, St Julian's.

Mrs. Josephine Debono, 6, The Gardens, St Julian's.

Capt. M. Everard, C.B.E., R.M. (Rtd.) Sonoli Bldgs., Dragut  
Street, Qui-si-Sana, Sliema.

J.A. Harding, Esq., M.D., D.L.O. (Eng.), F.R.C.S. (Ed.),  
29 Luzio Street, Sliema.

Surg. Cdr. J. Kirkpatrick, M.B., Ch.D., F.R.C.S. (Edin.),  
Royal Naval Hospital, Bighi.

Mr J.A. Maitland, B.A. (Contab.), Torre Cavallerizza, M'Xlokk.

The Rev. J.M. Milne, 206/2, Old Bakery Street, Valletta.

The Rev. Dr P. Serracino Inglott, B.A., Ph.D. (Milan),  
M.A. (Oxon.), B.D. (Paris), 336, St Paul's Street, Valletta.

The Hon. Dr Vincent Tabone, M.D., D.O. (Oxon.), D.O.M.S. (Lond.),  
F.R.C.S. (Edin.), D.M.J. (Lond.), M.P., 35 Carmel Street,  
St Julian's.

The Very Rev. Archpriest Carmelo Xuereb, Domus Curialis,  
Floriana.

His Excellency Sir John Martin, K.C.M.G., C.B., C.V.O.,  
British High Commission, 7 St Anne Street, Floriana.

EX OFFICIO

Miss J.T. Purcell, S.A.N., S.C.L., - Matron, K.G.V. Hospital

Mr W.D. Piddaman - Treasurer, K.G.V. Hospital.



28, Blenheim Road,  
R.W.8

17 November 1966.

Dear Mr Minister,

I hope you will forgive my trespassing on your time, but I am doing so on the strength of your very charming reception of myself and my colleagues when we came to discuss with you earlier this year the fate of the King George Vth Hospital.

You will, I know, have heard that without the financial support which unfortunately was not forthcoming despite extensive exploration to this end, the Seamen's Christian Friend Society is unable to continue to run the Hospital as it had done hitherto.

I myself have become very interested in its fate, and you may remember that the aim and purpose of the visit of my colleagues was to make the Hospital of greater service to the people of Malta, an aim to which you graciously gave assent.

I have been given to understand that there is a suggestion that the Hospital may pass into private hands. I sincerely hope that this is not the case, for I am sure you will agree that this would be contrary to the spirit of its foundation and most certainly would conflict with the ideas which we ventured to voice when we paid a visit to your charming island.

My own view and very earnest desire is that the Hospital will be taken over by your government and I would have hoped that it would be linked with the University in some way, for example as the obstetrical and gynaecological unit of the Medical School, which purpose it would serve admirably: my medical colleagues, I am sure, concur in these wishes.

I realise, Mr Minister, that such decisions rest with you and your cabinet colleagues and I hope you will accept these suggestions as an earnest of my interest and warm sense of friendliness towards not only your government but also the Maltese people in general.

I am as a matter of courtesy sending a copy of this letter to the Governor General and I hope I have not thus transgressed any protocol.

I do sincerely hope, Sir, that you will give this letter most sympathetic consideration. I know that my friends of the Seamen's Christian Friend Society would be very happy if your government decides to take this Hospital under its administration.

Yours very sincerely,

(sgd) Clement Price Thomas

The Minister of Health,  
Ministry of Health,  
Castellania Palace,  
Valletta,