A BRIEF

HISTORY OF
WESTMINSTER
HOSPITAL
TERCENTENERY 1719–2019

PROFESSOR PAUL AICHROTH, MS, FRCS.
Alumnus of Westminster Medical School,
University of London and Imperial College
In 1716, four friends met in Fleet Street London at the fashionable St. Dunstan’s Coffee House. They were concerned about Westminster and especially the poor, sick and needy of the area. It was close to the most famous Abbey – with surrounding marshy, flooded and unhealthy areas on the north bank of the Thames.

These four gentlemen were:

Mr Henry Hoare – a banker
Mr William Wogan – a writer on religious subjects
Mr Robert Witham – a wine merchant
The Rev. Patrick Cockburn – who had, until recently, been the Curate of St Dunstan’s Church.

They were serious about the sick suffering so regularly from fevers, ‘ague’ and typhoid.

Henry Hoare was the second son of Sir Richard Hoare who had established Hoare’s Bank in Cheapside, London. Henry reported on this day – 14th January 1716 – “he had £10 in his hands” with which the group decided to assist sick prisoners in London jails. A ‘Charitable Proposal’ was drawn up by the Rev. Patrick Cockburn which had the following five headings:-

1. To provide the poor, sick people with food and ‘physic during illness’ and to provide physicians and carers.
2. Many pregnant women were turned out of lodgings near the time they were due and the Society proposed necessities during their lying-in, with nurses if they had no friend or relation.
3. The Society proposed to supply sick prisoners with appropriate necessities.
4. Many poor strangers from different areas suffered hardships in this region and the Society proposed to assist them.
5. ‘The Society designs to reclaim the souls of the sick’ and suggested places of repository for sustenance of the patients with appropriate carers.

Rich persons were asked to give money and others to send goods to sustain the sick and the poor. It was decided that anyone who ‘subscribed’ by becoming a donor should be entitled to recommend patients.

By April 1716 the funds in the bank were exhausted and the Committee felt that the principal care should be confined to the sick and needy persons of St Margaret’s Parish, Westminster, until they became more prosperous.

From May 1716 until December 1719 there were no records of meetings, but in 1719 there was a resurrection of the Committee, and a large group met at the coffee house and were named as “The Trustees and Managers of Charity for Relieving the Sick and Needy”. Much progress was made from this time onwards, and the Committee decided to rent a small private house in Petty France, Pimlico, for £22 per annum, and Westminster Infirmary was born.

The infirmary became the first hospital to be formed since the Reformation, and was the first voluntary hospital in the world, funded entirely by public subscriptions and gifts.
**1719 – 1724**

**THE FIRST INFIRMARY**

The ‘Infirmary for the Sick and Needy’ was born as the first voluntary hospital, and a large inscription in golden letters was put over the door.

The new infirmary constituted only the third hospital in London after St Bartholomew’s in Smithfield and St Thomas’s in Southwark. A matron, a nurse, a housemaid and a messenger were appointed and the first in-patient was a youth named John Kelly with “evil in his joints and scurvy”. He remained for one month in the infirmary and on 8th June 1720 the Minutes announced that he was cured and discharged. The hospital had become a reality.

By 1724 the infirmary, with 18 beds, had become totally inadequate and a larger property was required.

The ‘Infirmary for the Sick and Needy’ was born as the first voluntary hospital, and a large inscription in golden letters was put over the door.

**1724 – 1733**

**THE SECOND WESTMINSTER HOSPITAL**

In 1724 a larger property in Chappell Street was found and became ‘The Broadway’.

The most common admissions were still for infectious diseases and especially malaria (the Ague) and typhoid in these marshy areas of Westminster.

A well-known surgeon, Mr William Cheselden, attended their first meeting and in June 1724 he brought a large donation of £50 from an anonymous benefactor. Mr Cheselden was invited to join the staff of the infirmary as Surgeon and later minutes state that this anonymous donor was thought to be Mr Cheselden himself. He was appointed Surgeon to St. Thomas’s Hospital and became Fellow of the Royal Society in 1713. He would turn his surgical skills to cataract removal as well as ‘cutting for stones’ and he regularly removed a bladder stone in one minute flat. One happy victim wrote “so swift thy hand and I could not feel the progress of the cutting steel”.

Mr Henry Hoare died in 1725 at the age of 48. A monument to him was erected in Stourton Church in Stourhead.

By 1733 thoughts again turned to a new hospital for this Broadway Infirmary had become substantially crowded. However, there were problems, especially between the medical staff and the Board of Governors. A final row over the site of a possible new hospital became heated and the entire medical staff resigned and left to found a new hospital – St George’s at Hyde Park Corner.

There were many other reasons for the mass resignation and removal of staff to St George’s Hospital. One plausible reason was that over the preceding few years, the more wealthy trustees were added to this infirmary list and they found it much easier to go to Hyde Park Corner which, at that stage, was in the fields. Therefore, they gave up the teeming, flooded and very offensive back streets of Westminster.

However, the Westminster Broadway Infirmary still had funds and new staff were appointed and a new apothecary elected – Mr William Taylor. The Matron – Mrs Alden – remained at her post. Many influential friends remained, including Sir Hans Sloane.

On 8th January 1734 the trustees signed a 21 year lease on Mr Greene’s three houses in Castle Lane at the junction of James Street and Petty France. The infirmary moved in 1735.
1735 until 1834

THE THIRD WESTMINSTER HOSPITAL

JAMES STREET
‘FROM INFIRMARY TO HOSPITAL’

Innovations were called for and the poor in the infirmary were “clothed in a decent, warm and distinguishing apparel” which were left behind when they were discharged. This regulation was to have the effect of cleanliness, health and good order.

The houses were renovated with new windows, and the site was made much more ‘open’ than the previous Broadway Infirmary.

Another innovative idea was ‘the establishment for incurables’, as patients with certain long term diseases were in greater evidence and the Board received frequent requests and funding for such ‘incurables’.

The range of surgical procedures increased progressively including frequent cataract removals. Physicians and surgeons entered the enlarged staff list of the hospital and, for the first time, in 1746, elections were held to fill vacancies. All the hospital subscribers were allowed to vote.

Two other houses were acquired and improvements in plumbing occurred.

In 1738 the Committee, with some 200 persons present, discussed venereal disease and the following resolution was passed: “Any inpatient being found with venereal disease is to be discharged immediately”. A century later, in 1842, the Board passed a Resolution forbidding the admission of syphilitic patients. However, this cruelty was rescinded in 1856 when six very ill syphilitics were admitted to a separate ward.

In 1750 Westminster Bridge was opened and it was noted that more frequently injured patients from road accidents were admitted to the hospital. A room to the right of the front door was identified as the place where accident cases were admitted and could be treated immediately. This was rather like an early accident and emergency unit of latter days. The room was sometimes used as an isolation ward.

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By 1758 it was reported that the hospital was increasingly dirty and had become infested with bed bugs. One expert cleaner was maintained in the hospital for many years specifically to clean the beds and he became very expert in removing these insects.

The hospital was increasingly known as Westminster Hospital. In 1770 a new sign was put up as “Westminster Hospital for Sick and Lame Patients”. It was supported solely by subscription and benefits as before. By 1767 proposals were put forward to build a specific operating room.

In the latter part of the 18th century, subscriptions and receipts decreased and it was found that one way of making money was to arrange musical concerts in the local St Margaret’s Church and Westminster Abbey. Handel’s music became increasingly popular at this time and the hospital received one-third of the proceeds of the concerts.

Many famous surgeons and physicians were staff of Westminster Hospital but the local neighbourhood remained very unsatisfactory. Charles Dickens knew the area well and stated that the neighbourhood was a dreary one at that time: “as oppressive, sad and solitary as any about London. Coarse grass and rank weeds straggled over the marshy land in the vicinity. In one part, carcasses of houses, inauspiciously begun and never finished, rotted away. Slimy gaps and causeways winding among old wooden piles with sticky substances clinging to them like green hair and the rags of last year’s hand bills, offering rewards for drowned men, fluttering above the high water mark led down through the ooze and slush to the ebb tide”.

Dr William George Maton was a physician to the hospital and later physician to the Duchess of Kent and her daughter, the Princess Victoria. This connection ensured Queen Victoria’s interest in the hospital throughout the rest of her life.

A site was cleared opposite the west door of the great Westminster Abbey, called The Broad Sanctuary. Eventually, the site was purchased for £6,000 in 1831. The new hospital was built and the final lead roofing was put on at the end of 1833. This was the first Westminster Hospital new build.
The Duchess of Kent became a Vice Patroness and this office was then filled by Queen Victoria on her accession in 1837. She was always very interested in the hospital and her descendants continued this involvement.

This hospital accommodated 106 in-patients and there were more than 1,000 in-patients admitted per annum. This number gradually increased.

In 1852 the first major alteration was planned, for the Medical School had to be incorporated in this main Westminster Hospital building. An operating 'theatre' was required as students and medical visitors wished to watch operations in increasing numbers. This required the operating theatre to be built out on a bracket from the second floor into the back yard.

Hale Thompson was an infamous surgeon who, in 1847, performed the first operation under general anaesthetic at the Westminster. The development of anaesthesia was initially in the USA and then rapidly spread throughout Europe within months. The ether anaesthetic was given by a dentist – Mr Robinson – of Gower Street. Anaesthetics were progressively developed at the hospital by another dental surgeon – Mr J. Chitty Clarendon. The Westminster man who developed the science of anaesthesia, notably for Queen Victoria in two of her children's deliveries, was John Snow. Snow is also noted for his remarkable epidemiological work during the 1854 cholera epidemic; he carefully traced the source to a public water pump and cured the epidemic by removing the pump handle.

In 1860 the Board felt that expensive repairs and renovations were required. New nurses’ rooms were urgently required, a proper dedicated chapel was planned, and an obstetric ward was required for Frederick Bird – the first obstetric physician appointed to the staff. These adjustments were all due to an ambitious Ladies’ Committee in the hospital led by an even more ambitious leader – Lady Augusta Stanley. Funds were raised by holding dinners in nearby Westminster restaurants.

In 1874 there was an outbreak of erysipelas, a severe skin infection, due to poor hygiene. It was so bad that the President of the Board of Governors – the Duke of Westminster – strongly suggested moving to a new site on nearby Millbank to include the Medical School and Nurses’ Home. The site was available but it was too costly and the plan was abandoned. However, the architects devised a plan for building ‘sanitary towers’ to the corners of the hospital building. The wards were renovated and teak floors were laid which were close fitted and easy to wash.

Westminster Hospital surgeons performed the first operations in the hospital using new antiseptic methods in 1877. The very first procedure using these safer techniques was undertaken by Dr McDowell – and the patient recovered from this abdominal operation without infection. Painless surgery could now become clean surgery also, and the two together meant safe surgery. Later, completely aseptic surgery became the norm with removal of all bacteria using steam sterilisation. In 1899 a clinical laboratory was built on the roof and was opened in 1900 by Lord Lister, the surgeon responsible for developing the antiseptic technique.

In 1899 the ‘Imperial Yeomanry Field Hospital and Bearer Company’ was on its way to the Boer War. This body was commanded by Charles Stonham, Major (RAMC) with three surgeons and one physician – Dr James Purves Stewart – who also gave anaesthetics. Seven medical students went as dressers with the honorary rank of Private. Their ship, the tramp steamer ‘Winkfield’ arrived at Cape Town on 6th April after colliding with, and sinking, the RMSS Mexican in a fog on 4th April. No lives were lost. On 7th June the field hospital became prisoners of a Boer commando, but they were rescued by British forces on 12th June.

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Mr A.H. Evans was one of the party and his two sons became Westminster surgeons, Mr David Evans – Orthopaedic Surgeon and Mr Bryant Evans – Obstetrician. Mr E. Rock Carling was also one of the field hospital surgeons who returned to become Assistant Surgeon to the hospital and later full surgeon – 1924–1942.

Shortly after the turn of the century, the hospital expenditure was outrunning its income and many fundraising activities occurred with success. In 1905 a ladies bazaar was held under the patronage of their Majesties King Edward VII and Queen Alexandra. Eleven Duchesses were on the committee and it raised over £6,000.

At the beginning of the First World War, the Governors offered 150 beds for military service and Voluntary Aid Division nurses were accepted for training. The Medical School was also taken over by the Army for training pathologists. By the end of the First World War the hospital building was dilapidated. The financial position was precarious and simply repainting and general cleaning of the whole hospital was undertaken as an interim measure. There was, however, the introduction of a hot water system, another operating theatre and better nursing and resident staff accommodation.

In 1924 the Board considered the future and decided that it would be impossible to expand the hospital, nurses’ home and Medical School on their present sites, and a decision had to be faced. In 1933 a large site on both sides of St John’s Gardens in Westminster became available. The House Committee rose to the challenge and major fundraising commenced. The Executive Planning Committee was chaired by Sir Bernard Docker, a very wealthy businessman. After a long period of consultation the President, HRH The Prince of Wales, laid the foundation stone of the Nurses’ Home on 26th June 1935 and this was the first part of the new building scheme which was finally declared open in March 1939 by Her Majesty The Queen Mary.
The early Medical School emerged in 1734 when there was first mention of ‘cubs’, as these initial students were called. At first, three cubs were allowed to each staff surgeon, and the numbers slowly increased.

The medical student in London was able to attend the infirmary with a physician or surgeon to whom he had to pay a fee. Alternatively, the student could become an apprentice to a specific surgeon for a longer period but the payment was then substantial – stated to be in the order of £200 or more. If he then passed the Barber Surgeons’ Company examinations he was entitled to practise in London only. As an alternative he could attend a private anatomy school or medical school of which there were many in the capital. It was not until the Apothecaries’ Act of 1815 that passing the examinations became a legal requirement for a medical career. In 1826 the number of beds in Westminster Hospital increased to 100 and students’ fees increased so that £21 was recorded for a physician’s or surgeon’s pupil.

Mr George James Guthrie gave free lectures at Tuson’s, Little Windmill Street School of Medicine, in the early 1830s which became famous. In 1834 Mr Guthrie placed a proposal before the Westminster Hospital Board for the founding of a medical school to be run in connection with the hospital. Guthrie and his colleagues had bought a site in Great Smith Street and they intended to form a medical school. They asked for the patronage of the Governors for permission to call their venture ‘The Westminster Hospital School of Medicine’.

In 1885 the School moved to Caxton Street where the new building was stated to be in ‘the Tudor style’ and it remained open for 53 years until 1938. There was a large lecture theatre and an extensive museum. The upper floor housed the dissection room. The variety and quality of the hospital teachers – both medical and surgical – increased and improved over time with the increasing eminence of all the Westminster Hospital staff.

Several other medical schools in Westminster failed to thrive but in 1838 the Lancet described the school united with Westminster Hospital as ‘initially prospering’. However, due to a shortage of medical students a temporary closure of the school occurred, to be re-established in 1849 in Westminster Mews behind the hospital.

Until 1905 the Westminster Medical School taught anatomy, physiology and biochemistry. This was not sustainable in the cramped conditions of the Medical School building. It was, therefore, decided that pre-clinical medical students should join those from King’s College Hospital at King’s College in the Strand. St George’s and Charing Cross students also joined them. Both the Lancet and the BMJ praised the decision and the University of London approved.

In 1916, women medical students were admitted. This decision was reversed from 1928 until 1946. Post war, the numbers of women studying at the Medical School increased.

The Senior Surgeon, Secretary, Matron and Nursing Staff at Westminster Hospital, 1922. The Matron at this time was Matron Edith Smith OBE; it is said that the striking personality and excellent work of Smith raised the standard of Westminster nursing to a level envied by all other nursing schools. Image from the historical archive at Chelsea and Westminster Hospital NHS Foundation Trust.
The Medical School was also opened later in 1939 by the Earl of Athlone – Chancellor of London University. On 20th April 1939 King George VI declared the hospital open. He was accompanied by HM Queen Elizabeth and it was an important, wonderful day for Westminster Hospital. In the new hospital there was much to learn and little time to learn it, for on 3rd September 1939 war was declared.

The hospital essentially became a casualty clearing station and a major accident unit in the early days of the Blitz. Injured patients admitted were immediately triaged and were treated vigorously by the on-call medical and surgical teams. After initial treatment, many patients were dispersed to more peripheral hospitals in the south-west sector and if the treatment or operation was relatively minor they were released home or to a nursing home. If the injuries were severe, the Westminster Hospital would retain them for a much longer period but their rehabilitation, nevertheless, would be in the peripheral hospitals in this sector. This gave Westminster Hospital a vital role in preparing for the next patients – usually the following night.

In March 1939, HM Queen Mary opened the nurses’ home which was the first part of the new building scheme and it was called the ‘Queen Mary’s Nurses’ Home’.

In the weeks before war was declared careful planning of London’s medical services occurred, dividing the City into various sections. Westminster Hospital was in the South-West sector.
The organisation for patient movement and transfer by ambulance was smooth and efficient and some 600+ patients with very major injuries were treated between September 1940 and May 1941. During this time 600 less severely injured patients were treated in the Outpatient Department. The Dean of the Medical School, Sir Adolf Abrahams, organised lectures for the students who were slowly returning to the hospital. The trauma instruction during these first two years of war was unparalleled. The darkest days of the Blitz produced much camaraderie between the medical staff, and on Shrove Tuesday 1940, Chris Hildyard – the Hospital Chaplain – arranged a wonderful dinner in the Refectory and invited a guest of honour – Sir Stanley Woodwark. His witty and exciting speech was left written on the tablecloth as well as his drawn caricature. All present signed it, it was cut out and framed, and since then the Shrove Tuesday dinner has been a feature of the hospital and school right up to the present time. Similarly, a short version of the pantomime, Cinderella, was performed and this was the beginning of the wonderful Christmas pantomime shows which staff enjoyed for many years.

The central location of Westminster Hospital was a great worry for everyone working in and being treated as a patient during the war. Three bombs fell on the building. On 11th September 1940 an armour piercing bomb struck the hospital chapel. It hit a steel girder which deflected the bomb and broke it, and the head was found in a local builders’ yard. The chapel was substantially damaged but no person was injured. On 21 November another bomb hit the north-east corner of the 6th floor but, again, it was deflected by a steel girder. The ward below was damaged and there was a flood. On 16th April 1941 a huge landmine landed by parachute on Cleveland House, across the road from the South Gate of the hospital. A vast number of windows and frames on the Page Street side of the hospital were torn out and the wards on the first, third, fourth and fifth floors collapsed. Again, there were no deaths. A nurse was pierced by a large glass splinter in the rear.

Following this raid there were only 50 beds operational. The subsequent air raids did no harm to the structure of the hospital. The school and nurses’ home continued their usual function during the whole of the rest of the war. In 1944 the hospital sent two surgical teams to the south coast in preparation for the D-Day landings. They operated in Queen Alexandra Hospital, Cosham.
This infamous camp was liberated by British forces – the British 11th Armoured Division – on 15th April 1945 just a few days before the Germans unconditionally surrendered. Ninety-six London medical students volunteered for Red Cross work in Holland for famine relief but were suddenly diverted to Belsen as no medical officers were available at this moment. The medical students were from St Bartholomew’s Hospital, Guy’s, St Thomas’s, Kings College Hospital, the London Hospital and Westminster Hospital and were flown in. Also, a research team led by Dr Janet Vaughan was despatched by the Medical Research Council to test the efficacy of various feeding regimes. Most of the prisoners’ digestive systems were in too weak a state to handle such foods after long-term starvation. Eventually, skimmed milk was used but was still far from acceptable. Intravenous feeding was attempted but abandoned, as the previous intravenous injections were associated by the prisoners with murder by the SS doctors. The medical students found hundreds of dead bodies scattered throughout the camp and many more in open pits. The camp was in a desperate state with continued deaths from typhus, tuberculosis and, of course, the irremediable starvation. Of the 96 medical students, 11 were from Westminster Hospital and these brave young men were all heavily immunised against typhoid, typhus and diphtheria. The names of these were:- G. Woodward, D. Wells, R. Barton, E. Trimmer, R.E. Citrine, K.C. Easton, A.D. Moore, M.J. Hargrave, J.R.E. Jenkins, D.P. Bowles and L.K. Garstin. These students undertook heroic work in clearing the huts and attempting to treat so many sick and dying patients. Feeding these poor, starved patients was incredibly difficult for so many were unable to take even fluid foods. Of these 96 students 4 died of typhus and tuberculosis. Several others contracted tuberculosis and were able to return home for treatment. Dick Jenkins contracted tuberculosis and nearly died on his return home but he eventually recovered and became an anaesthetist at Westminster Hospital. The students remained in the camp for a month and were then relieved by Belgian medical students.

The ‘St Francis Hospital for Infants’ was founded in 1903 in a small house in Hampstead by Helen Levis, wife of an industrialist chemist, Sir Robert Mond. A year later the name was changed to the ‘Infants’ Hospital’. Sir Robert Mond financed a purpose-built hospital in Vincent Square, very near the main Westminster Hospital. Building work began in 1906 and the Hospital was opened in 1907 with 50 cots and beds for infants. The main specialisation was the nutrition of infants with associated research. In 1914 the Duchess of Albany opened a new but associated building containing an outpatients’ department and nurses’ home together with a modern research laboratory. In 1946 the infants’ hospital fully amalgamated with the Westminster and, following this, it was renamed the Westminster Children’s Hospital and had 108 beds and cots. It closed in 1995 and all paediatric services moved to Chelsea and Westminster Hospital.
In 1951 the chapel received this famous altar piece. The Rev. Christopher Hildyard saw it up for sale at £12,000. He offered £10,000 and brazenly asked for its delivery the next day.

This gave him twenty-four hours to raise the money and he succeeded. The Board of Governors and other benefactors provided the funds very quickly and the beautiful picture was dedicated in November 1952.

The first floor Chapel still holds the 16th Century painting – the Resurrection – by Paolo Veronese as well as the stained glass windows from the Westminster Children’s Hospital, St Mary Abbots and the beautiful window unveiled to the memory of the late King George VI. The names of the medical and nursing team who cared for him in his last illness are engraved on this window.

In 1951 HM King George VI was diagnosed with lung cancer. The King was well enough to open the Festival of Britain exhibition in May 1951 but by September his health had deteriorated badly.

An operation to remove the left lung was undertaken by Mr Clement Price-Thomas FRCS. Sir Clement, as he became, was one of the pioneers of thoracic surgery in London and he insisted that he would treat the King like any other patient. However, he was persuaded to undertake the procedure in an operating room to be set up in Buckingham Palace.

In the days before the operation the surgical staff of Westminster Hospital were perturbed to find certain instruments, and anaesthetic apparatus missing without explanation. Even an operating theatre table went missing from their theatres on the seventh floor.

The operation went well with only minor unexpected findings and the King’s post-operative period was uncomplicated. A Daily Telegraph letter by John Spencer, London W5, has an interesting insight into the final closure of the operative procedure.

He wrote, “It was, and still is, common practice for a Consultant Surgeon having completed a major operation, to leave the closure of the wound to an assistant. This gives time for much needed rest and to write up notes before returning to the table”. Having removed a portion of the lung from his royal patient, Mr. Price-Thomas prepared to leave the theatre.

One of his able assistants, rather perturbed, remarked: “But Sir, aren’t you going to close the chest?” His reply has become part of surgical folklore. “My boy” he said “I haven’t closed a chest for years and I’m not going to practise on a King”.

The King’s sad and untimely death was in January 1953.

1953 was, of course, Coronation year, and the medical arrangements inside the Abbey fell yet again to the hospital. Mr. H.E Harding, who later became Dean of the Medical School, was in charge of any medical problem which arose. Queen Mary, Patroness for 23 years, died in this year and the Queen Mary’s Nurses’ Home remains the memorial to her.
The Westminster Hospital on Horseferry Road closed and reopened in 1993 as Chelsea and Westminster Hospital in a purpose-built premises on Fulham Road.

The new hospital was designed to make the best use of light and incorporate arts, and the large atrium space was created to remove the enclosed corridors of traditional hospitals. It had 580 beds, and brought together the services of Westminster Hospital, Westminster Children’s Hospital, St Steven’s Hospital and St Mary Abbot’s Hospital. Queen Elizabeth II officially opened the building on 13 May 1993.

On 14 March 2014, Charles, Prince of Wales and Camilla, Duchess of Cornwall officially opened Chelsea Children’s Hospital at Chelsea and Westminster Hospital. Today, Chelsea and Westminster Hospital NHS Foundation Trust cares for more than 80,000 children and young people each year.

On 1 September 2015, Chelsea and Westminster Hospital joined with West Middlesex University Hospital to become one NHS Foundation Trust – Chelsea and Westminster Hospital NHS Foundation Trust.
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The author has leant heavily on the following books and documents in the writing of this manuscript:

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