Acquisition and Disposal Policy

Name of museum: Anaesthesia Museum

Name of governing body: The Association of Anaesthetists of Great Britain and Ireland

Date on which this policy was approved by governing body: June 2008

Date at which this policy is due To be reviewed: June 2013

1. Statement of Purpose:

The Anaesthesia Museum as part of the Anaesthesia Heritage Centre enables people to explore its collections for inspiration, learning and enjoyment. It seeks to collect, safeguard and make accessible artefacts which are held in trust for society relating to the development of the speciality anaesthesia. It promotes awareness of the history of the speciality amongst anaesthetists and the general public.

2. Existing collections, including the subjects or themes and the periods of time and/or geographic areas to which the collections relate

The existing collection covers all aspects of the work of anaesthetists including anaesthesia, pain relief, resuscitation and intensive care. The earliest object in the collection, a resuscitation set, is dated 1774. However, the collections mainly span the period in which the specialty developed (the early nineteenth century onwards). Items relating to pain relief and resuscitation, however, might be of much earlier origin.

The Anaesthesia Museum owes its establishment to the donation by A. Charles King of his collection of historic anaesthetic apparatus to the Association of Anaesthetists of Great Britain and Ireland in 1953.

Initially the collection continued to be kept at King’s premises in 27 Devonshire Street and was looked after by King’s friend and successor James Juby. In 1966 the collection was transferred to the Association’s office at the Royal College of Surgeons of England where it was displayed. When the Association purchased its first headquarters in 1986, the collection was transferred to the building at 9 Bedford Square and its first museum was developed.

When the Association moved to 21 Portland Place in 2002, a new museum area was designed to tell the story of the history of anaesthesia.

The Anaesthesia Museum is situated within the headquarters of its governing body, The Association of Anaesthetists of Great Britain and Ireland at 21 Portland Place in central London. It is housed in the basement of the building but has demountable cabinets on the ground and first floors also. Storage space is rented in Sussex for objects that cannot be accommodated on-site.

Due to the limited display area, only a small portion of the collection can be shown in the museum at any one time. However, the majority of items are kept on site and so can be
viewed by advance request. Regrettably, we do not have room to display any of our larger anaesthetic machines, which are kept elsewhere. However, details of events where these can be seen is published. Travelling and temporary exhibitions provide further detail about specific areas of the history of anaesthesia.

The museum is governed by an Archives, Museum and Library Committee which reports to the Executive and Council of the Association of Anaesthetists of Great Britain and Ireland. Executive and/ or Council endorsement is necessary for decisions taken by the Committee.

The artefacts are obtained mainly by donation, often when hospital collections have to be moved to make space for patient care. Curatorial staff develop awareness of hospital collections through membership of the History of Anaesthesia Society and by publicising themselves in the Association’s journal *Anaesthesia News*.

The collections are photographed and entered onto an AdLib database. Two of the demountable cabinets are used to show recent acquisitions and there is a recent acquisitions page on the heritage part of the Association’s website. In addition, the cabinets are used for two travelling exhibitions which are produced each year and taken to the Association’s main outside events. Posters produced in conjunction with these exhibitions are made available for loan as well as being taken to international meetings. Wider access to the collections is also promoted by lending artefacts to suitable repositories.

The artefacts are supported by the Heritage Centre’s collection of rare books, archives, films, photographs and technical literature.

The Anaesthesia Museum is recognised by people who research the history of anaesthesia as being the best collection of its kind. Its strength lies in the A. Charles King Collection which contains an original John Snow Chloroform Inhaler, 1850 (LDBOC: 5.9.1); as well as other early inhalers such as the Ellis Alcohol/ Ether/ Chloroform Inhaler, 1966 (LDBOC: 1.5); Clove’s Portable Regulating Ether Inhaler, 1877 (LDBOC: 1.8) and facepieces, for example, the Murphy Inhaler, 1850 (LDBOC: 1.3) and a Murray Facepiece, 1862 (LDBOC: 1.51.) and a Kocher Facepiece, 1890 (LDBOC: 1.49. There is also an excellent selection of mouthgags. Analgesia is represented too and the Museum holds a Minnitt Apparatus used for pain relief during childbirth, 1939 (LDBOC: 1.45). The ECG machine used during King George’s pneumonectomy, c1951, is held in the collection (LDBOC: 2000.576).

The current collecting policy adopted by the committee does not allow for the acquisition of large items, drugs related to anaesthesia or pain relief (packaging is accepted) and gas cylinders are these are normally hired by hospitals and should be returned to the manufacturer. Items already held within the collection are also not accepted as facilities do not allow us to keep duplicates. The only exception to this is where items can be added to the loan box that is available for teaching purposes.

**3. Criteria governing future acquisition policy including the subjects or themes, periods of time and/or geographic areas and any collections which will not be subject to further acquisition.**

The Anaesthesia Museum seeks to collect objects relating to the history of anaesthesia including pain relief, resuscitation and intensive care. Objects relating to the origin and
development of these specialties that are not already held within the collections will be accepted. Surgical and dental instruments associated with anaesthesia may be collected. Replicas and models may be collected or commissioned.

The Anaesthesia Museum’s collections at present hold some of the early vaporizers that were used at the very start of the specialty as mentioned above.

A Startin Inhaler is on loan from the Science Museum in order to allow us to tell the story of anaesthesia in the museum despite this gap. The Anaesthesia Museum would also like to acquire an original John Snow ether inhaler (a replica is held within the collection) a Squire’s Inhaler and a Tracy’s Hookah; a Skinner’s Facepiece and a Hyderabad Cone as both these facepieces are seen as important to the history of anaesthesia. The Museum accepts material as it becomes obsolescent in anaesthetic practices and therefore contemporary material is represented in the collections.

The collections are chiefly of British origin, but items may be acquired from other parts of the world.

4. Limitations on collecting

The museum recognises its responsibility, in acquiring additions to its collections, to ensure that care of collections, documentation arrangements and use of collections will meet the requirements of the Accreditation Standard. It will take into account limitations on collecting imposed by such factors as staffing, storage and care of collection arrangements.

Large machines that are not accepted are referred to other Accredited museums. Staff at the Heritage Centre also advise and facilitate the advertisement of those parts of hospital collections that do not fall within this policy in the Museum’s Journal.

5. Collecting policies of other museums

The museum will take account of the collecting policies of other museums and other organisations collecting in the same or related areas or subject fields. It will consult with these organisations where conflicts of interest may arise or to define areas of specialisms, in order to avoid unnecessary duplication and waste of resources.

Specific reference is made to the following museum(s):

The Science Museum
The British Dental Association Museum
The Thackray Medical Museum
The Wellcome Collection

6. Policy review procedure

The Acquisition and Disposal Policy will be published and reviewed from time to time, at least once every five years. The date when the policy is next due for review is noted above.

The Regional MLA (MLA London or its successor) will be notified of any changes to the Acquisition and Disposal Policy, and the implications of any such changes for the future of existing collections.
7. Acquisitions not covered by the policy

Acquisitions outside the current stated policy will only be made in very exceptional circumstances, and then only after proper consideration by the governing body of the museum itself, having regard to the interests of other museums.

8. Acquisition procedures

a. The museum will exercise due diligence and make every effort not to acquire, whether by purchase, gift, bequest or exchange, any object or specimen unless the governing body or responsible officer is satisfied that the museum can acquire a valid title to the item in question.

b. In particular, the museum will not acquire any object or specimen unless it is satisfied that the object or specimen has not been acquired in, or exported from, its country of origin (or any intermediate country in which it may have been legally owned) in violation of that country’s laws. (For the purposes of this paragraph ‘country of origin’ includes the United Kingdom).

c. In accordance with the provisions of the UNESCO 1970 Convention on the Means of Prohibiting and Preventing the Illicit Import, Export and Transfer of Ownership of Cultural Property, which the UK ratified with effect from November 1 2002, and the Dealing in Cultural Objects (Offences) Act 2003, the museum will reject any items that have been illicitly traded. The governing body will be guided by the national guidance on the responsible acquisition of cultural property issued by the Department for Culture, Media and Sport in 2005.

d. So far as biological and geological material is concerned, the museum will not acquire by any direct or indirect means any specimen that has been collected, sold or otherwise transferred in contravention of any national or international wildlife protection or natural history conservation law or treaty of the United Kingdom or any other country, except with the express consent of an appropriate outside authority.

e. The museum will not acquire any archaeological material.

f. Any exceptions to the above clauses 8a, 8b, 8c, or 8e will only be because the museum is either:

   acquiring an item of minor importance that lacks secure ownership history but in the best judgement of experts in the field concerned has not been illicitly traded; or

   acting with the permission of authorities with the requisite jurisdiction in the country of origin; or

   in possession of reliable documentary evidence that the item was exported from its country of origin before 1970.
In these cases the museum will be open and transparent in the way it makes decisions and will act only with the express consent of an appropriate outside authority.

g. The museum does not hold or intend to acquire any human remains.

9. Spoliation

The museum will use the statement of principles ‘Spoliation of Works of Art during the Nazi, Holocaust and World War II period’, issued for non-national museums in 1999 by the Museums and Galleries Commission.

10. The Repatriation and Restitution of objects and human remains

The museum’s governing body, acting on the advice of the museum’s professional staff, if any, may take a decision to return human remains (unless covered by the “Guidance for the care of human remains in museums” issued by DCMS in 2005), objects or specimens to a country or people of origin. The museum will take such decisions on a case by case basis; within its legal position and taking into account all ethical implications and available guidance. This will mean that the procedures described in 11a-11d, 11g and 11s below will be followed but the remaining procedures are not appropriate.

11. Management of archives

The Archives of the Association of Anaesthetists of Great Britain and Ireland are held separately to the Museum and Library collections and are managed independently of them. The Museum does not hold or intend to acquire archives.

The descriptive standards used for the Association’s archives are the General International Standard for Archival Description [ISAD(G)], the International Standard for Archival Authority Records (Corporate, Personal and Family) [ISAAR(CPF)] and the National Council on Archives Rules for the Construction of Personal, Place and Corporate Names, NCA Rules. The archives are kept in accordance with BS 5454:2000 Recommendations for the Storage and Exhibition of Archival Documents.

11. Disposal procedures

Disposal preliminaries

a. The governing body will ensure that the disposal process is carried out openly and with transparency.

b. By definition, the museum has a long-term purpose and holds collections in trust for society in relation to its stated objectives. The governing body therefore accepts the principle that sound curatorial reasons for disposal must be established before consideration is given to the disposal of any items in the museum’s collection.

c. The museum will confirm that it is legally free to dispose of an item and agreements on disposal made with donors will be taken into account.

d. When disposal of a museum object is being considered, the museum will establish if it was acquired with the aid of an external funding organisation. In such cases,
any conditions attached to the original grant will be followed. This may include repayment of the original grant and a proportion of the proceeds if the item is disposed of by sale.

Motivation for disposal and method of disposal

e. When disposal is motivated by curatorial reasons the procedures outlined in paragraphs 11g-11s will be followed and the method of disposal may be by gift, sale or exchange.

f. The museum will not undertake disposal motivated principally by financial reasons

The disposal decision-making process

g. Whether the disposal is motivated either by curatorial or financial reasons, the decision to dispose of material from the collections will be taken by the governing body only after full consideration of the reasons for disposal. Other factors including the public benefit, the implications for the museum’s collections and collections held by museums and other organisations collecting the same material or in related fields will be considered. External expert advice will be obtained and the views of stakeholders such as donors, researchers, local and source communities and others served by the museum will also be sought.

Responsibility for disposal decision-making

h. A decision to dispose of a specimen or object, whether by gift, exchange, sale or destruction (in the case of an item too badly damaged or deteriorated to be of any use for the purposes of the collections or for reasons of health and safety), will be the responsibility of the governing body of the museum acting on the advice of professional curatorial staff, if any, and not of the curator of the collection acting alone.

Use of proceeds of sale

i. Any monies received by the museum governing body from the disposal of items will be applied for the benefit of the collections. This normally means the purchase of further acquisitions. In exceptional cases, improvements relating to the care of collections in order to meet or exceed Accreditation requirements relating to the risk of damage to and deterioration of the collections may be justifiable. Any monies received in compensation for the damage, loss or destruction of items will be applied in the same way. Advice on those cases where the monies are intended to be used for the care of collections will be sought from MLA.

j. The proceeds of a sale will be ring-fenced so it can be demonstrated that they are spent in a manner compatible with the requirements of the Accreditation standard.

Disposal by gift or sale

k. Once a decision to dispose of material in the collection has been taken, priority will be given to retaining it within the public domain, unless it is to be destroyed. It will therefore be offered in the first instance, by gift or sale, directly to other Accredited Museums likely to be interested in its acquisition.
l. If the material is not acquired by any Accredited Museums to which it was offered directly as a gift or for sale, then the museum community at large will be advised of the intention to dispose of the material, normally through an announcement in the Museums Association’s Museums Journal, and in other specialist journals where appropriate.

m. The announcement relating to gift or sale will indicate the number and nature of specimens or objects involved, and the basis on which the material will be transferred to another institution. Preference will be given to expressions of interest from other Accredited Museums. A period of at least two months will be allowed for an interest in acquiring the material to be expressed. At the end of this period, if no expressions of interest have been received, the museum may consider disposing of the material to other interested individuals and organisations giving priority to organisations in the public domain.

Disposal by exchange

n. The museum will not dispose of items by exchange.

Documenting disposal

o. Full records will be kept of all decisions on disposals and the items involved and proper arrangements made for the preservation and/or transfer, as appropriate, of the documentation relating to the items concerned, including photographic records where practicable in accordance with SPECTRUM Procedure on deaccession and disposal.