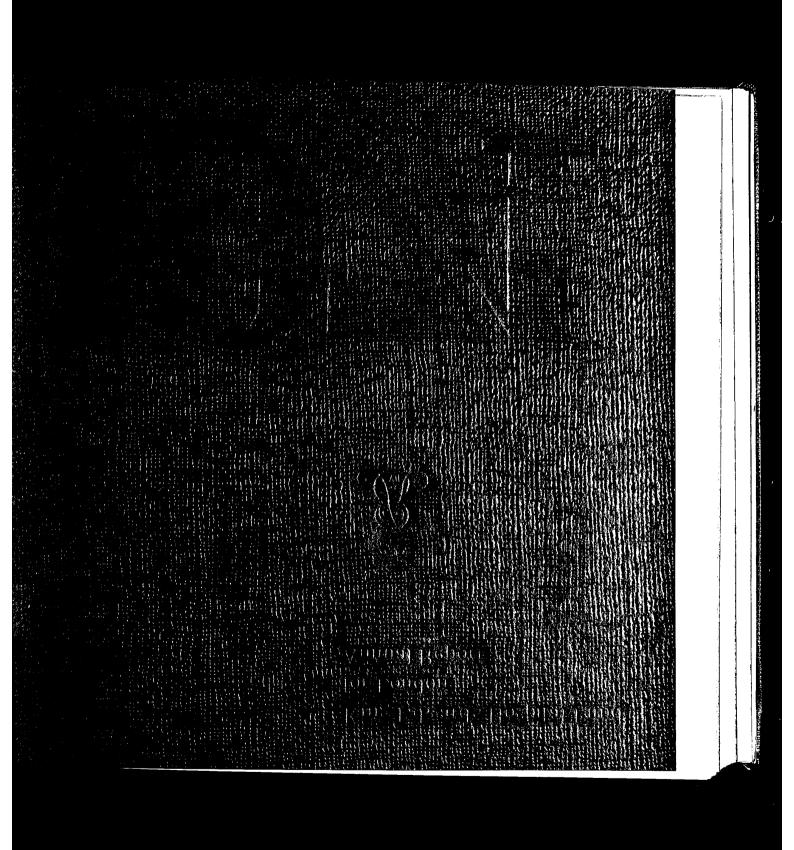
King Edward's Hospital Fund for London Annual Report





## KING EDWARD'S HOSPITAL FUND FOR LONDON

Patron: Her Majesty The Queen

Governors: HRH Princess Alexandra,

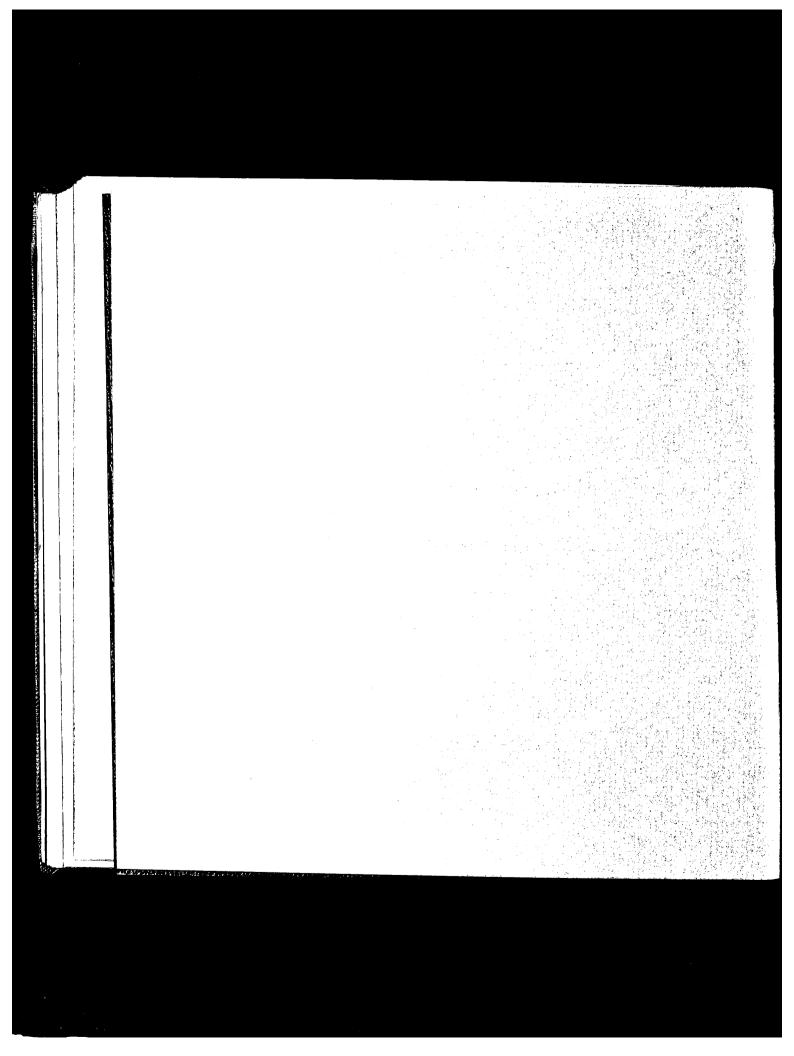
The Hon Mrs Angus Ogilvy GCVO Lord Ashburton KG KCVO JP Lord Cottesloe GBE TD

Treasurer: R J Dent

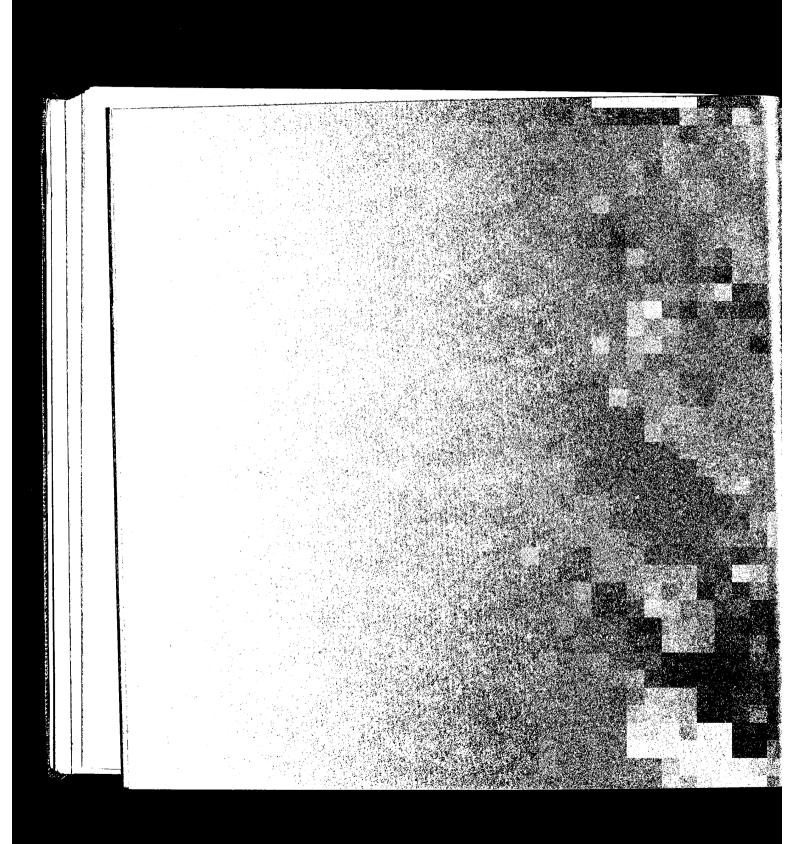
Chairman of the Management Committee: Lord Hayter

Secretary: G A Phalp CBE TD

14 Palace Court London W2 4HT Telephone: 01-727 0581



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CONTENTS		
	page	
Report 1974	5	
Finance	13	
Contributors	. 17	
Five-year analysis of grants 1970 to 1974	18–19	
Grants made in 1974	20	
to National Health Service authorities	20	
to independent homes and hospitals	21	
to organisations and educational centres	22	
in-house grants	24	
King's Fund Centre conferences, meetings and exhibitions	26–27	
King's Fund College academic year 1974/5	28	
Emergency Bed Service	29	
General Council and committees	30	•
Hospital visitors	33	
Staff directory	34	



#### **REPORT 1974**

In a troubled year for the whole nation, people in the health services had their full share of difficulties as planning for reorganisation of the National Health Service began to give way to action. In the midst of much unrest, most of it seemingly unconnected with the reorganisation programme, new statutory authorities, management teams and community health councils were being formed.

Reorganisation is bringing new work, new opportunity and new people into the health services. And it is for the newcomers, and others who may be learning of King Edward's Hospital Fund for London for the first time, that this annual report contains a brief restatement of the Fund's origins and aims, a note on its institutions, and an explanation of its ways of operating.

#### **ORIGINS AND AIMS**

The Fund is an independent charity founded in 1897 and incorporated by Act of Parliament in 1907. Its purposes, set out in the Act, are '... the support benefit or extension of the hospitals of London or some or any of them (whether for the general or any specific purposes of such hospitals) and to do all such things as may be incidental or conducive to the attainment of the foregoing objects'.

These words have been the guide to practice over the years and have enabled the Fund to adjust the form and direction of its work when the organisation of health care changes and new needs can be foreseen. The Fund is permanent, but the means by which it fulfils its purposes are always changing. It is an independent foundation, but has always worked closely with the statutory authorities and hospital managements of the day. Its concern is the promotion of good practice, improvement and innovation in all except the purely clinical aspects of hospital care.

About half its income is distributed in the form of grants. The rest is used to maintain the King's Fund College, King's Fund Centre and the Emergency Bed Service, and for publications and general administration.

### THE FUND'S INSTITUTIONS

The King's Fund College provides management training for senior health service staff and for national administrative trainees, and experimental courses and seminars for various groups. Most courses are multidisciplinary and residential.

The King's Fund Centre organises conferences, meetings for small groups, and exhibitions, and provides an extensive information service on all matters relating to health care.

The Emergency Bed Service arranges urgent admission to hospitals in the Greater London area. It supplements the normal practice, whereby general practitioners make arrangements direct with the hospitals of their choice, by handling cases in which this direct approach is unsuccessful.

The EBS, concerned with what may be termed the 'perpetual' needs of patients and their doctors, is a local service, continuous and virtually unchanged since it was established in 1938. A note on its work and a chart showing admissions dealt with in the past three years appear on page 29.

The services of the College and the Centre, in contrast, extend over the whole country and diversify in response to the changing needs of the great variety of people, professional and volunteer, now engaged in health care. In addition, as they have developed, both the College and the Centre have formed valuable contacts overseas. Their activities during the year are listed on pages 26–28.

The three institutions each began as an experimental enterprise. They are now established on a permanent footing and their running costs are no longer entirely financed by the Fund. The College has a considerable income from fees, and the Centre, having developed a national role, is supported by substantial contributions from the Department of Health and Social Security and Thames regional health authorities. The EBS, as a service for London, is financed chiefly by the Thames RHAs. The Fund, however, provides accommodation and administration, recruits staff and retains responsibility for operational policies. Thus the independence and neutrality of the three institutions are preserved. The financial arrangements, which are adjusted at intervals, accord with the Fund's general policy of avoiding permanent and large-scale commitment of resources in order to release monies for further experiment and innovation.

#### **GRANTS**

The Fund makes grants for two purposes. The more traditional are direct grants for building, furnishing and equipment and other practical improvements to services. These grants are available only to hospitals and homes in the Greater London area, or those elsewhere which take most of their patients from London. Grants to NHS hospitals are given only for projects, or items of them, which cannot be funded entirely from statutory sources. The Fund looks particularly for the experimental or innovating content of any project it is asked to support.

Though little publicised compared with some of the Fund's other activities, and very small in relation to monies spent in building by statutory authorities, such grants from an independent source may often help individual hospitals to develop a new idea or to make life more congenial and purposeful for their patients and staff.

Applications from NHS authorities for grants of this kind are considered by the Hospital Grants Committee and, in some cases, the Fund's Management Committee. Applications from independent hospitals and homes are considered by the Auxiliary Hospitals Committee.

This part of the Fund's work can be traced back to the very early days when hospitals in London depended heavily upon the Fund for their general upkeep. A system of formal visiting was developed to encourage hospitals to raise their standards, to improve the management of their finances, and to ensure that the Fund's grants were being put to good use. When the NHS was established, however, the purpose of such visits was of necessity changed so that nowadays they form part of the general procedure by which the Fund keeps contact with London hospitals. In that connection it should be mentioned that the standing committees of the Fund, and in particular the members of the two grants committees, undertake visits for the study of individual requests or enquiries.

Over the last five years, the Hospital Grants Committee has made 45 visits (usually two to four members for each visit) to NHS hospitals and has distributed £480,000 in grants. Members of the Auxiliary Hospitals Committee have made 350 visits to independent hospitals and homes and grants amounting to £330,000 have been distributed. During the same period, the Fund's official Visitors have made 24 visits.

This small number of visits by the official Visitors is partly due to the fact that four or five years ago there was a temporary cessation of such visits; also, more recently, owing to the preoccupation of the service with administrative reorganisation, the official visits on the Fund's behalf had to be limited to the postgraduate teaching hospitals of London. The Management Committee is now considering whether official visiting by the Fund should in present circumstances be continued.

## ENQUIRY, EXPERIMENT AND EDUCATION

The second main purpose in grant-making is to support enquiry and projects of an experimental or educational nature. Applications for grants for these purposes are considered by the Research and Development Committee and, again in certain cases, by the Management Committee.

Unlike those for building, the grants are not geographically confined to London. Projects based elsewhere may be supported if a suitable base in London cannot be provided. In selecting a project, the Fund takes into account whether its support would help answer a need which, because of the project's timing or for some other reasons, is unlikely to be met by the health authorities or other organisations. The chief criterion is that the project is likely to have some practical outcome which, in its general application, can be of use to the hospitals of London. Clinical and academic research, and education for statutory or clinical qualifications, are excluded.

Within these confines, the projects cover a very wide area. Among those now being supported, for example, are a training programme for long-stay psychiatric patients to prepare them for life outside hospital, an enquiry into the present practice of fire precautions in relation to the requirements of the Chronically Sick and Disabled Persons Act, a study of the use of physiotherapy in general practice, an experi-

mental scheme of comprehensive training for the remedial professions.

From time to time, the Fund concerns itself with a particular need for major initiative and gives substantial support for its development. Some examples are the improvement of hospital catering, the establishment of postgraduate medical centres and hospital libraries, the organisation of voluntary help in hospitals, and the improvement of services for the mentally handicapped. The latest of these large-scale projects is concerned with medical records and includes a study of systems now in use, and pilot studies of the problem-oriented system in both medical care and medical education.

Some projects are 'in-house'; that is, initiated, developed and financed entirely by the Fund, usually based at the Centre or the College and often arising from their work. Some may be supported by the Fund but undertaken by an outside body. In many cases, however, the Fund supports and often initiates a project to be developed in collaboration with other bodies – a health authority, professional or voluntary organisation or an educational centre.

Reports and other materials produced from some projects are published by the Fund, by authority of the Publications Panel. The current booklist contains some 30 titles. Reports of a temporary or specialist nature which are likely to have small readership and do not warrant full-scale publication may be produced in the King's Fund Project Papers series. Occasionally,

the Fund may help towards the cost of publication by another organisation.\*

The Fund has also helped to establish charitable trusts which promote the welfare of people suffering from specific disorders, and new associations of professional or voluntary groups whose work concerns some aspect of the Fund's work.

A five-year analysis of the types of grants made and the groups of recipients is shown on page 18. Grants made during 1974 are listed in more detail on pages 20–25.

#### SOME NEW DIRECTIONS

It is a tradition of the Fund to keep all its activities under continuous review to ensure their relevance to those needs of hospitals which are its particular concern. Two major influences have given contemporary impetus to this traditional practice; these are the general economic condition of the country, and the reorganisation of the NHS.

A comprehensive review, begun by the Management Committee during 1974, is proceeding in which the questions raised by these two influences are being studied in depth.

The Fund has always been fortunate in having distinguished advisers in its financial affairs whose investment policies have ensured its income. But some of the present financial

\*The official booklist, King's Fund Books 1975, is circulated with this annual report and may also be obtained from the Head Office of the Fund. The list of King's Fund Project Papers is available from the King's Fund Centre.

constraints lie outside the Fund's control and their course can only be carefully watched insofar as they affect the Fund's ability to carry out its purpose. They have already led to large increases in running costs and may place further limitation on financial resources. This, in turn, could have profound effect on future practice, though its precise nature cannot yet be foreseen.

The second influence, reorganisation of the NHS, brings into question the role of a charitable foundation established at a time when a hospital had a clear, separate and independent function. It has now become a specialised, technical and very expensive component of an integrated health care system, controlled and financed by a central government department. The changes for hospitals are concomitant with changes in the Fund's practice to meet new needs and to discard activities no longer relevant.

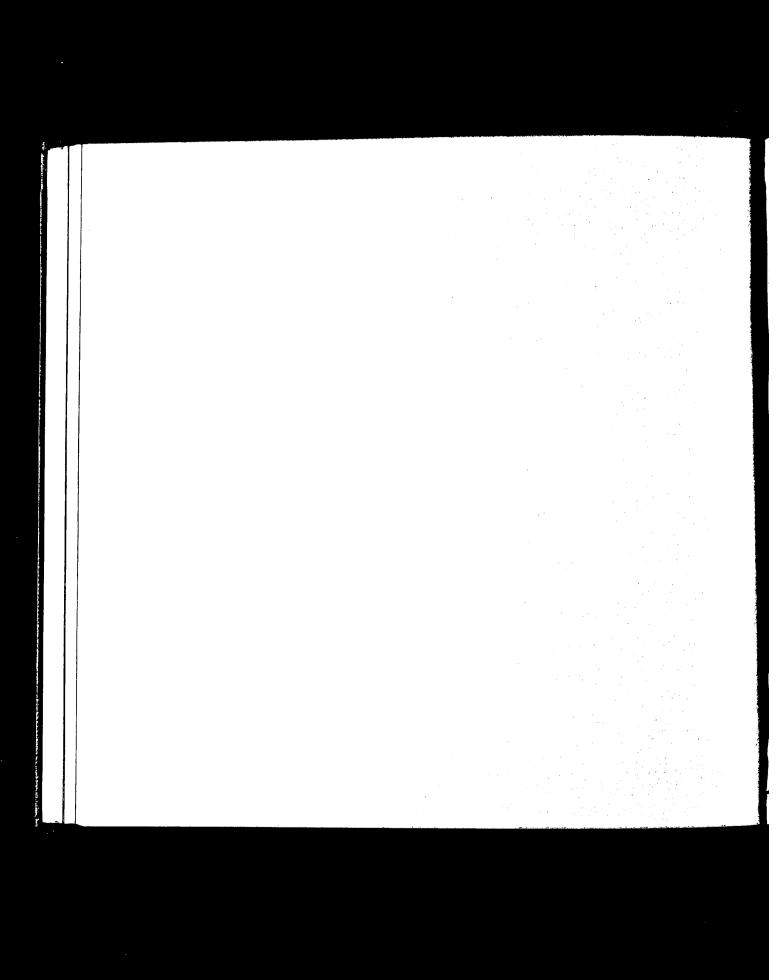
Reorganisation has become the focus for many of the Fund's newer activities and for some changes of direction and emphasis in work already underway. The College, for example, expanded its special programme for members of the new health authorities, their teams of officers and for district management teams. Included during the year were courses for secretaries of the new community health councils and courses on industrial relations in the NHS.

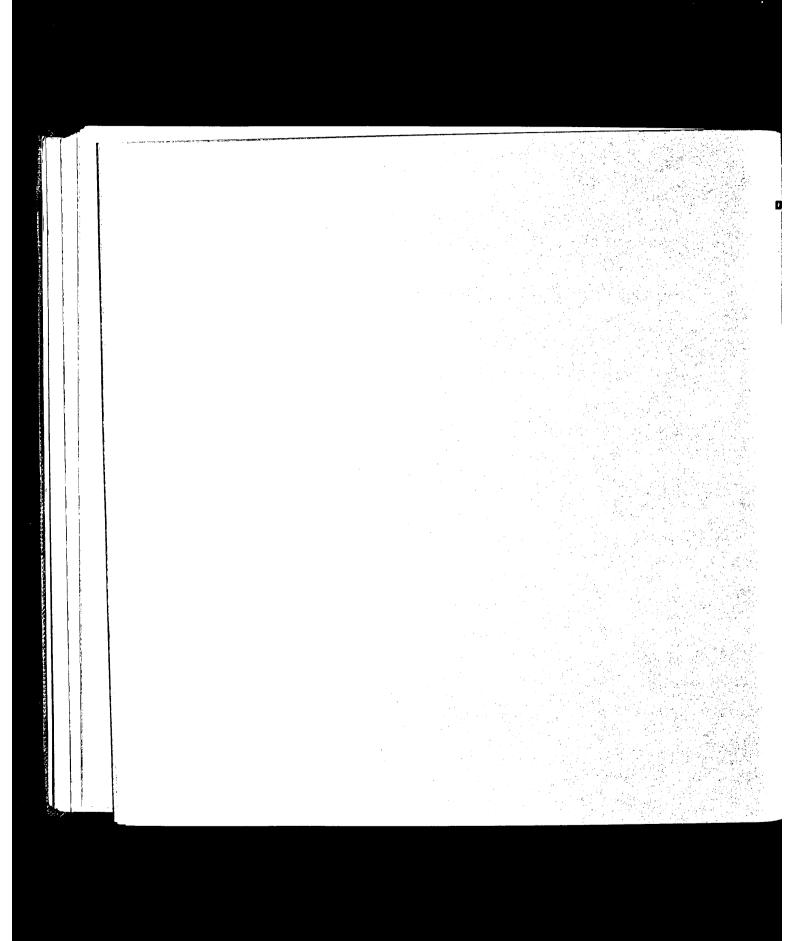
The mental handicap project, originally a fiveyear programme, is extended for two years. The project involves the Centre, the College, and a growing number of people in hospitals, residential homes, the community services and voluntary organisations, in a variety of experimental and educational activities to improve the care of the mentally handicapped and the training and outlook of staff. The two-year extension is intended to ensure continuity of these activities during the early stages of the NHS reorganisation.

One major problem which reorganisation has highlighted is the demand for adequate information services. The Fund has supported a number of projects in recent years to help develop systems for the collection, presentation and use of information. An open day was arranged jointly by the College and the Centre in which staff of information units from central, regional and area health authorities demonstrated the services they provide and exchanged views on their problems, needs and aspirations. Also on view were some of the Fund's own information services developed for internal use and available generally to health service staff.

Towards the end of the year, the Fund was asked by DHSS to support a project to prepare the way for the establishment of a national body for community health councils. It was important for this preliminary and short-term work to be supported from an independent source, and undertaken in neutral territory by staff not employed or in any way attached to the health service authorities. The Fund is peculiarly well fitted to provide all such requirements. A secretariat staffed by the Fund has been set up at the Centre and work is now proceeding.

The project is a good example of the Fund's way of operating, its capacity to respond quickly to a need, and the unique contribution it is able to make towards innovation and improvement in health care.





#### FINANCE

The following pages contain abridged financial statements extracted from the full accounts of the King's Fund which have been audited by Deloitte & Co, and are available on request. The statements show that at 31 December 1974 the total market value of the Fund's assets was £18 500 000 (1973 £25 500 000) and the income for the year £1 359 000 (1973 £1 098 000). Since 31 December 1974 there has been a substantial recovery in the market value of the Fund's quoted investments.

The increase of income reflects the continued effect of deposit at relatively high rates of interest of proceeds from the sales of property made in 1973. Reinvestment of these funds in property, in particular for the new King's Fund Centre, is being made over some two or three years and in consequence the income of the Fund continues at a rate which may prove to be exceptionally high.

Although this increase in the resources of the Fund is extremely welcome, it is nevertheless true that in these times of inflation the King's Fund, in common with other similar organisations, faces the difficult problem of increasing costs. The Fund will therefore always welcome new sources of money to enable it to continue and develop the part which it plays in the growth and change of hospital practice.

The Treasurer gratefully acknowledges all contributions that have been made to the Fund, and will be glad to receive any donations, large or small. In particular, he would suggest that the Fund is a most suitable object for charitable legacies. Forms for use in connection with legacies, annual subscriptions and donations will be found at the back of this report.

Bankers:

Bank of England

Baring Brothers and Co Limited

Midland Bank Limited

Solicitors:

Turner Peacock

## KING EDWARD'S HOSPITAL FUND FOR LONDON ABRIDGED STATEMENT OF ASSETS AND LIABILITIES AT 31 DECEMBER 1974

9 833	11 108	Current assets	11 108	9 833
42 627	<i>32 0</i> 97	Special Funds Investments Quoted	59 567	59 567
19 388 480	14 711 093		13 367 019	12 688 136
17 496 777 1 891 703	13 044 047 1 667 046	Net current assets	11 699 973 1 667 046	10 796 433 1 891 703
- <del>-</del>	—	Reversionary interests— nominal value	1	1
7 272 769 62 008 10 162 000	4 472 861 40 208 8 530 978	General Fund Investments Quoted securities Unquoted securities Properties, including Fund premises	6 527 272 60 000 5 112 700	7 092 188 85 400 3 618 844
6 081 121	3 834 705	-	4 705 449	4 552 716
211 898	742 470	Current assets	742 470	211 898
5 869 223	3 092 235		3 962 979	4 340 818
5 810 375 58 848	3 034 943 57 292	Investments Quoted securities Unquoted securities	3 861 782 101 197	4 261 765 79 053
£	£	Capital Fund	~	
<b>Valuation 31 (</b> 1973	December 1974		Book Value 31 1974 £	December 1973 £

## ABRIDGED INCOME AND EXPENDITURE ACCOUNT YEAR ENDED 31 DECEMBER 1974

		197	74	19	73
Income Investments Properties		£ 1 042 166 309 819	£ 1 351 985	£ 816 843 273 508	£ 1 090 351
Subscriptions and donations Legacies allocated to income		7 012 301	7 313	6 778 1 575	8 353
			£1 359 298		£1 098 704
Expenditure Grants allocated Less grants lapsed	481 243 29 054		452 189	495 241 11 880	483 361
King's Fund Centre		230 502		192 494	
Less contribution from DHSS from Thames RHAs	100 000 22 500	122 500	108 002	87 500 —	104 994
King's Fund College Less course fees received		268 034 72 608	195 426	228 104 81 873	146 231
Emergency Bed Service Less contribution from Thames RHAs		145 130 138 630	6 500	113 238 106 738	6 500
Publications <i>Less sales</i>		32 159 3 437	28 722	27 222 8 755	18 467
Administration Salaries and pensions Establishment and office		124 013 26 767	150 780	93 366 24 022	117 388
Other Expenses Maintenance of Fund premises Professional fees, etc		17 338 21 421	38 759	14 461 18 824	33 285
Special contribution to Pension Fund			980 378 116 180		910 226 20 913
			1 096 558		931 139
Excess of Income over Expenditure for the year, transferred to General Fund			262 740		167 565
			£1 359 298		£1 098 704

## SUMMARY OF SPECIAL FUNDS AT 31 DECEMBER 1974

Special Anonymous Trust (Greenwich and Bexley A H A)	£ 19 068
Special Anonymous Trust (Greenwich and Boxie) 77777	4 090
Mrs L L Layborn, deceased, Trust (St Luke's Nursing Home for the Clergy)  A Brooke-Smith, deceased, Trust (Emergency Bed Service)	758
Miss A A Sampson, deceased, Trust (Independent Hospitals)	9
NH Vernon, deceased, Trust (Diabetes Research)	42 928
N H Vernon, deceased, Trust (Ear, Nose and Throat Research)	3 772
Spinal Injuries Association	50
	£70 675

### **LEGACIES RECEIVED IN 1974**

### Capital:

Cmdr F W Chaine John Leighton Miss F E Milne F C T Mortimer Emile Wertheimer	6 420 279 10 147 654 110 994
	£128 494

Allocated to Income:	
Miss V Curtis Bennett Miss N M Goldsmith	£ 200 100
G G Halsted	£301

#### **CONTRIBUTORS 1974**

Her Majesty The Queen Her Majesty Queen Elizabeth The Queen Mother Gloucester Charitable Trust

Anonymous ('E M E')

Bank of England
Barclays Bank Ltd
Baring Foundation Ltd
Bawden Fund
Miss A G Blaikie
G A Boston
Viscountess Broome

A H Chester Coutts & Co

Miss V Dodson

Miss W Edwards

Gillett Bros Discount Co Ltd Guardian Royal Exchange Assurance Group

Lord Hayter Cardinal Heenan Miss E V Howells

Mrs G Inchbald Innes Memorial Fund

Jensen & Son

Reverend E S C Lennard Lloyds Bank Ltd London & Northern Estates Co Ltd

Marks & Spencer Ltd Metropolitan Bonded Warehouses Ltd Midland Bank Ltd Morgan Grenfell & Co Ltd John Mowlem & Co

National Westminster Bank Ltd

Major R O'Brien MVO TD

Worshipful Company of Pewterers P F Charitable Trust Prudential Assurance Co Ltd

Albert Reckitt Charitable Trust T B Robson N M Rothschild & Sons

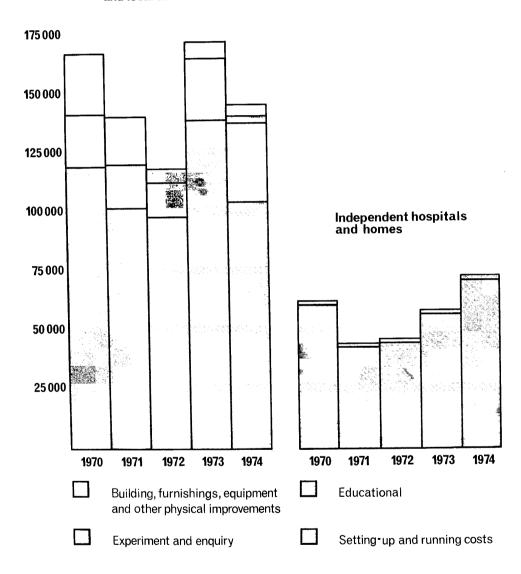
Schwartze Buchanan & Co O N Senior Mrs R M Simon

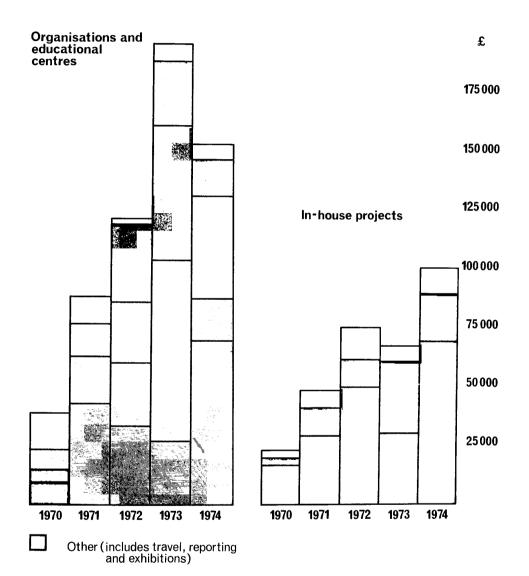
Ernest Taylor CBE Trust House Forte Ltd

Wernher Charitable Trust L S White Williams & Glyn's Bank Ltd Judge R B Willis TD

### FIVE-YEAR ANALYSIS OF GRANTS

£ National Health Service and local authorities





GRANTS MADE IN 1974	£		£
TO NATIONAL HEALTH SERVICE AUTHORITIES		East Sussex AHA Hastings Health District BEXHILL CONVALESCENT HOME	
Bedfordshire AHA Northern Health District		towards extra bathroom and lavatories for colostomy patients	1 000
DANESWOOD CONVALESCENT HOME colour television set	200	Guy's Hospital BoG NEW CROSS HOSPITAL	
Bethlem Royal Hospital and		towards art room for elderly patients	10 500
Maudsley Hospital BoG to improve and extend triennial statistical report exhibition of a patient's paintings	1 750 200	Guy's Hospital Special Trustees study of issues of health policy by department of community medicine (first instalment on three-year grant)	16 000
Brent and Harrow AHA CENTRAL MIDDLESEX HOSPITAL towards improving library service towards landscaping grounds SHENLEY HOSPITAL	300 600	Hammersmith Hospital and Royal Postgraduate Medical School furnishing for flats for visiting doctors and scientists undertaking postgraduate clinical training and research (first instalment on two-year grant)	20 000
towards landscaping grounds round patients' club	6 500	Hendon HMC	
Cambridgeshire AHA FULBOURN HOSPITAL project to develop method of bringing about		EDGWARE GENERAL HOSPITAL towards library for postgraduate medical centre	11 000
informed change (first instalment on two-year grant)	5 100	Hillingdon AHA MOUNT VERNON HOSPITAL	
City and East London AHA (T) EAST HAM MEMORIAL HOSPITAL		towards hydrotherapy pool for physical medicine department	3 000
(Newham Medical Society) towards fitting out a multidisciplinary education centre	2 255	Kent AHA JOYCE GREEN HOSPITAL towards extension to postgraduate medical	
HACKNEY HOSPITAL		centre	4 000
towards conversion of building for chapel  Dartford and Darenth HMC  WEST HILL HOSPITAL	1 000	Merton, Sutton and Wandsworth AHA (T) St EBBA'S HOSPITAL stocking and furnishing nursing school	
towards installing patients' radio system incorporating nurse-call system	10 000	library SUTTON HOSPITAL	3 000
Doncaster AHA		towards model flat for psychiatric unit	13 000
management audit in nursing services (final instalment on three-year grant)	2 500	Middlesex Hospital Special Trustees study of referrals to medical outpatients department (first instalment on two-year	
Dorset AHA WEST DORSET DMT		grant)	3 350
towards development of a classified filing system in reorganised health service	850	Moorfields Eye Hospital BoG towards children's assessment unit	5 500

Northwick Park HMC NORTHWICK PARK HOSPITAL	£	Dedisham School for Autistic Children, Slinfold	£
towards bus for psychiatric unit	850	towards fire precautions	879
Redbridge and Waltham Forest AHA KING GEORGE HOSPITAL changing rooms for non-resident staff	10 000	Fallowfield, Chislehurst carpet for lounge	300
St Crispin HMC case-aides training programme (final instalment on two-year grant)	1 380	Florence Nightingale House, London SW towards redecorating and recarpeting	8 000
Surrey AHA ROYAL EARLSWOOD HOSPITAL	7 380	Hamilton Lodge, Great Bromley towards replacing boiler	1 500
towards fitting out patients' social centre Wessex RHA	2 500	Hertfordshire Seaside Convalescent Hom St Leonards-on-Sea nurse-call system	1 010
towards appointment of information officer in planning unit (final instalment on three-year grant)	2 000	Homefield, Bickley improvements to kitchen	2 300
Westminster Hospital BoG WESTMINSTER HOSPITAL		House of St Barnabas-in-Soho towards renovations	2 000
investigation into development of indices of effectiveness in care of patients	2 500 £140 835	King Edward VII Hospital, Midhurst towards improvements to patients' reception area	4 000
TO INDEPENDENT HOMES AND HOSPITALS	£	King Edward VII's Hospital for Officers, London W1 mobile x-ray unit	4 500
Alexander Residential Club, London SW5		Kingston House, Leigh-on-Sea improvements to kitchen and building	
improvements to staff quarters	1 606	extra bedrooms	2 000
British Home and Hospital for Incurables London SW16 towards re equipming littles		London and Ascot Priory Convalescent Home, Ascot	
towards re-equipping kitchen	2 500	re-equipping laundry	986
Catharine House, St Leonards-on-Sea towards fire precautions	1 000	Lyle Park Home, London SW15 nurse-call system	1 500
Catisfield House, Hove towards installing central heating and renovating bedrooms	2 000	Marillac Hospital, Warley towards fire precautions	1 700
Compton Lodge, London NW3 equipment for sickbay	700	Moor House School, Oxted towards new staff quarters	2 000
Convalescent Police Seaside Home, Hov fitting hand-aids	e 330	Roseland, Banstead electric wall heaters in residents' rooms	1 233

Royal Hospital and Home for Incurables,	£	TO ORGANISATIONS AND EDUCATION CENTRES	
London SW15 towards setting up holiday home in Brighton	2 500	Association of Domestic Management appointment of organising secretary (final	£
Royal School for the Blind, Leatherhead equipment for sick bay	1 250	instalment on two-year grant)  Association of Independent Hospitals	2 250
St Cecilia's Home, Bromley towards fire precautions	2 000	and Kindred Organisations towards running costs (further grant)	750
St Christopher's Hospice, London SE26 replacing boiler	7 000	British Association of Social Workers study of social worker-volunteer relationships (final instalment on three-year grant)	2 750
St Luke's Nursing Home for the Clergy, London W1 towards rewiring	3 000	British Postgraduate Medical Federation appointment of librarian to coordinate library	
St Teresa's, Dockenfield lift	2 745	services in postgraduate medical centres, and other costs (second instalment on three-year grant)	8 000
St Teresa's Hospital, London SW20 towards extension to nurses' home	1 500	towards expenses of regional adviser's visit to USA	300
St Vincent's Orthopaedic Hospital, Pinner		Camphill Village Trust towards new housing at rehabilitation centre	11 000
towards setting up unit for young chronic sick	2 000	Central Council for the Disabled review of progress in implementing Section 4,	
Spelthorne St Mary, Harpenden towards floor covering	1 500	Chronically Sick and Disabled Persons Act, and present administration of fire regulations (first instalment on two-year	
Suffolk House, Uxbridge towards repairs to roof	2 000	grant) Charing Cross Holiday Dialysis Trust	1 000
Thomas Banting Memorial Home, Worthing		towards holiday home	10 000
interior decorations	225	Chartered Society of Physiotherapy	
White House Convalescent Home, Bexhil towards improvements to kitchen	l 1 500	experimental inservice training for physiotherapists working with mentally handicapped people (final instalment on	6 700
Yarburgh Children's Home, East Grinstead towards furnishings and improvements	712	three-year grant)  City of Westminster Society for  Mentally Handicapped Children	6 700
Convalescent Homes Conference and	, , ,	towards new premises for day nursery	2 000
visits for ward sisters and social workers	672	Community Service Volunteers	
Token grants to 20 homes and 12 hospitals	3 200 £73 848	to extend service in hospitals (final instalment on two-year grant)	2 500

	£		£
Council for the Education of Handicapped Children		Musicians' Benevolent Fund	a.
towards cost of conference	500	towards expenses of setting up home in Bromley	500
Council for PostgraduateMedical Education in England and Wales		National Association for Mental Health (MIND)	
towards general practitioner's visit to USA (final instalment on two-year grant)	200	appointment of liaison officer for university students in mental health services, and other costs (final instalment on three-year	
Devon County Council social services department study of care of the elderly (first instalment on three-year grant)	3 500	grant)  National Association of Hospital Head Porters appointment of organising secretary (first instalment on two-year grant)	8 340 2 500
Disabled Living Foundation study of clothing and dressing handicapped people (final instalment on three-year grant)	2 000	National Association of Voluntary Hostels towards computerising placing service	250
readership survey of Catalogue of Garments for the Handicapped and Disabled	550	Nottingham Council for Voluntary Service	200
Elderly Invalids Fund towards running costs (further grant)	5 000	appointment of personnel/liaison officer in drug dependency and personal problems (final instalment on three-year grant)	3 865
Friends of the Elderly towards fire precautions in three homes	4 500	Open University bursaries for staff in Thames and Wessex RHAs to	
Geriatric Day Hospital Trust Fund towards building day hospital at St Mary Abbot's Hospital	5 000	attend courses on handicapped people in the community	550
Institute of Hospital Engineering travel expenses (extension to grant)	14	Orpington Mental Health Association to develop voluntary activities (Anchor House Project) (second instalment on three-year	2 000
Invalid Children's Aid Association kitchen equipment (Meath School) and towards cost of minibus (Edith Edwards		grant) Oxford Centre for Management Studies corporate membership subscription (annual	
House)  Law and Local Government	390	grant) Peter Bedford Project	1 000
Publications Ltd towards publishing <i>British Health Care and</i>		towards training long-stay psychiatric patients for life outside hospital	7 000
Technology series (further grant)	2 000	Psychiatric Rehabilitation Association towards setting up restaurant lunch club	2 000
LondonMedical Group towards running costs (further grant)	5 000	Queen Elizabeth's Foundation for the	
Mental After-care Association		Disabled	
extension to central heating system at King's House, Bournemouth	636	towards setting up assessment centre for severely handicapped school leavers (second grant)	14 000

	£		£
Queen's Nursing Institute		Comprehensive training for remedial professions (FRR)	
towards kitchen and restaurant at headquarters	10 000	experimental training scheme in association	
ROMA Housing Association Ltd towards setting up short-term home	2 500	with the department of life sciences, Polytechnic of Central London (final instalment on two-year grant)	7 500
Royal College of Nursing towards directory of nursing trusts and funds towards supplement to bibliography of	2 500	Drug dependency discussion group (JBC) expenses of meetings (first instalment on two-year grant)	1 000
nursing research	1 100	Exhibitions (WMA-R)	3 061
Royal Society of Arts		,	3 001
industrial design bursaries: hospital equipment section (further grant)	200	Experimental course for teachers of mentally handicapped people (JRE) part of mental handicap services project	3 360
Shirley Institute			
study of clothing for long-stay patients (final instalment on five-year grant)	6 370	King's Fund seminar of nurses (FRR). for senior nurses from Canada, USA and UK	2 000
Toy Libraries Association towards development (second instalment		Language barrier (MDH) to develop materials for teaching English to	
on four-year grant)	3 000	foreign staff in hospitals (second instalment	: 3 750
Toynbee Hall		on three-year grant)	3 730
towards centre for mentally handicapped people (first instalment on three-year grant)	8 000	Living in hospital (JRE)  preparation of handbook on social needs of people in long-term care	2 000
University of Southampton		Medical records (GAP)	
department of social administration study of social workers in psychiatric hospitals (final instalment on three-year grant)	1 350 	pilot studies of use of problem-oriented medical records in medical practice and medical education and general survey of current records systems (first instalment on three-year grant)	42 000
Ĩ		Mental handicap services project (JRE)	
		to develop ways of improving services (fourth instalment on extended seven-year grant)	13 945
IN-HOUSE GRANTS		Overseas travel	8 250
Art for the elderly (MCH-WGC)	£	Patients' satisfaction studies (DJD)	
to introduce art classes to elderly patients and institute a teachers' training course		study of opinions of outpatients departments (first instalment of new two-year grant)	2 500
(final instalment on four-year grant)	3 000	Physiotherapy in general practice (GAP)	
Brunel University/King's Fund joint appointment (FRR)	0.500	study of use of physiotherapy in a group medical practice (first instalment on	600
to King's Fund College staff (annual grant)	2 500	two-year grant)	000

Reading project (FRR) development of information system for health and social services in Reading and Berkshire (final instalment on three-year grant)	Ī	£
Residential accommodation for visitors		300
to King's Fund (GAP)		
(first instalment on two-year grant)	3	679
Statistical summary (EDH) preparation of statistics on independent homes and hospitals		150
Training voluntary help organisers (MCH-WGC)		
planning for an experimental course	5	000
Voluntary service information office (MCH–WGC)		
to develop voluntary work in health services (final instalment on five-year grant)		200
	£112	995
Total of grants made in 1974	£481	243

Note: Initials in brackets are those of the staff member who can give detailed information on the project concerned. See Staff Directory, pages 34–35, for name and address.

#### KING'S FUND CENTRE CONFERENCES, MEETINGS AND EXHIBITIONS LARGE CONFERENCES

#### **Mental Handicap**

Employment New ideas in staff training Participation by residents Toy workshop View of the nurse

### NHS and EEC

Denmark Eire Germany Italy

#### Nursing

Attitudes of patients Counselling Nurses' retirement Nursing and other organisations Occupational health and counselling Reporting on patients Ward activity and learning

#### Other topics

Admission of patients to hospital Art for the elderly Australian health services Birth control and the reorganised NHS Caring and communication Developing pattern of care in general practice Drug administration and control systems Drug dependency — progress and problems in London Fire symposium Home for the weekend

House journals Language barrier Medical use of hospital grounds

Patients as people Priorities for the professions Problem drinking in the community Psychiatric units attached to general hospitals Psychogeriatric study days Violence in marriage Voice of the patient

#### **LUNCH TALKS**

Accident and emergency services — Dr Howard Baderman Sport and health - Dr Roger Bannister

Health services and personal social services: policy and practice - Mr R Clarke

Research into action — Dr A L Cochrane Health education problems and prospects -Mr A C L Mackie

Rehabilitation in the reorganised NHS -Dr P J R Nichols

Priorities in health care — Mrs Claire Rayner Extending the role of the nurse — Miss Muriel Skeet

#### **SMALL MEETINGS**

Action learning Alcoholic units discussion group Art for the elderly Association of Professions for the Mentally Handicapped Care for the elderly Caring for sick or handicapped children at home Counselling for nurses Drug dependency discussion group Evaluation of health centres Geriatric day hospital Home care Hospital planning Inservice training Long term care

Management of health centres Medical recording service

Medical secretaries and receptionists in hospitals and general practice Mental handicap adult education Mental handicap further education Mental handicap participation Mentally handicapped abnormal offenders New health service 1974 Nurses reporting on patients Nursing and other organisations Nursing audit Patient-nurse dependency Patients are individuals Patients' satisfaction studies Priorities for the caring professions Professional organisations Psychiatric units attached to general hospitals Voluntary help organisers' induction day Ward activity and learning

### **EXHIBITIONS**

Aids to mobility
Multimedia resource centres
Paintings in hospital
Planning for the handicapped
Road to recovery

#### KING'S FUND COLLEGE ACADEMIC YEAR 1974/5 COURSES AND SEMINARS

Administrators' development
Management appreciation for consultants
Management appreciation for senior registrars
Management appreciation for geriatricians
Management development
National administrative trainees

### Special and experimental courses and seminars

Administrators of independent hospitals
Area health authorities
Area teams of officers
Coordinated teaching for nurses
Community health councils (pilot seminar)
District management teams (pilot seminar)
Financial managers (pilot seminar)
Health service planning
Industrial relations
Long stay care
Management information
Secretaries of community health councils
Voluntary help organisers

#### Courses with overseas membership

Belgian administrative students
Canadian College of Health Service Executives
International course in hospital administration
Health service organisation for American students
King's Fund international seminar for administrators

#### **EMERGENCY BED SERVICE**

General practitioners usually have their own direct links with local hospitals for urgent admissions. The Emergency Bed Service handles cases, at the request of general practitioners in the Greater London area, in which the normal direct approach to hospitals has been unsuccessful. The service saves time for patients and trouble for GPs. It covers medical and surgical, but not psychiatric, emergencies.

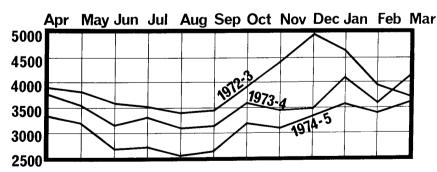
It can ensure acceptance of responsibility for a patient by a local hospital through the medical referee procedure. This is an arrangement whereby the nearest suitable hospital becomes responsible for seeing a patient with a view to admission when applications through normal EBS channels have failed. Regional medical admissions officers, who are seconded from the Thames regional health authorities as medical advisers, can refer patients to the medical referees designated within districts. Once the medical referee procedure is invoked, the hospital concerned must accept responsibility for the patient and the medical referee has full authority to say what is to be done about the admission of a patient refereed in this way. This procedure is held in reserve as much as possible, and by far the greater number of applications are accepted without it. It becomes of special importance in times of stress, such as outbreaks of influenza.

The EBS performs other tasks such as arranging admission for terminally-ill patients to St Joseph's Hospice, Hackney, and answering enquiries for the Medic-Alert Foundation. This organisation keeps records of special medical needs of its subscribers. Its master index is held by the EBS and, in an emergency, information from the records can be obtained by a doctor or other authorised person by a reverse-charge telephone call from anywhere in the world.

The EBS is uniquely placed to form an accurate picture of all aspects of admission of patients to hospitals. It is in close working contact with, and can give advice and information to, those concerned, though it is not an information bureau for the general public. The Fund's publication, *Admission of Patients to Hospital (1973)*, reports a study which came from an idea put forward by the EBS, whence a sequel to take stock of the situation is also to be run.

The chart shows admissions dealt with annually from April 1972 to March 1975. The EBS Committee is examining afresh the trends emerging from these and other statistics in order to determine how the EBS can operate to best effect within the reorganised structure of the health service.

#### **ADMISSIONS**



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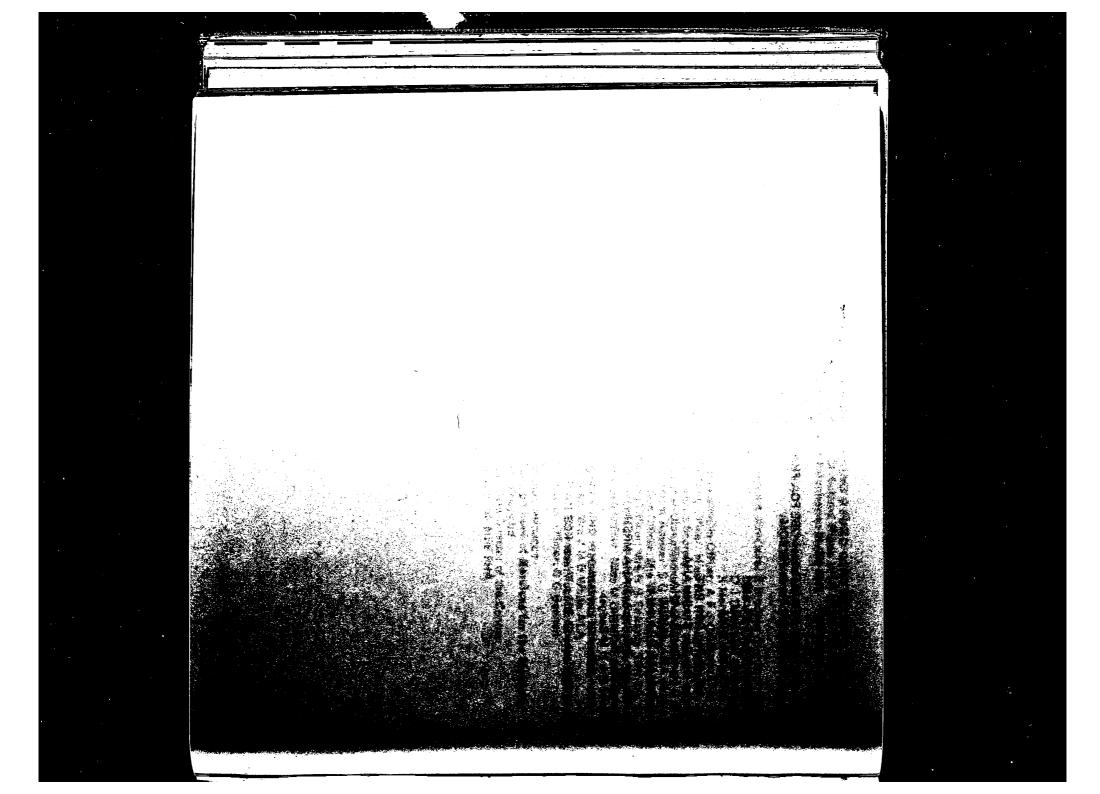
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Miss Thelma Park

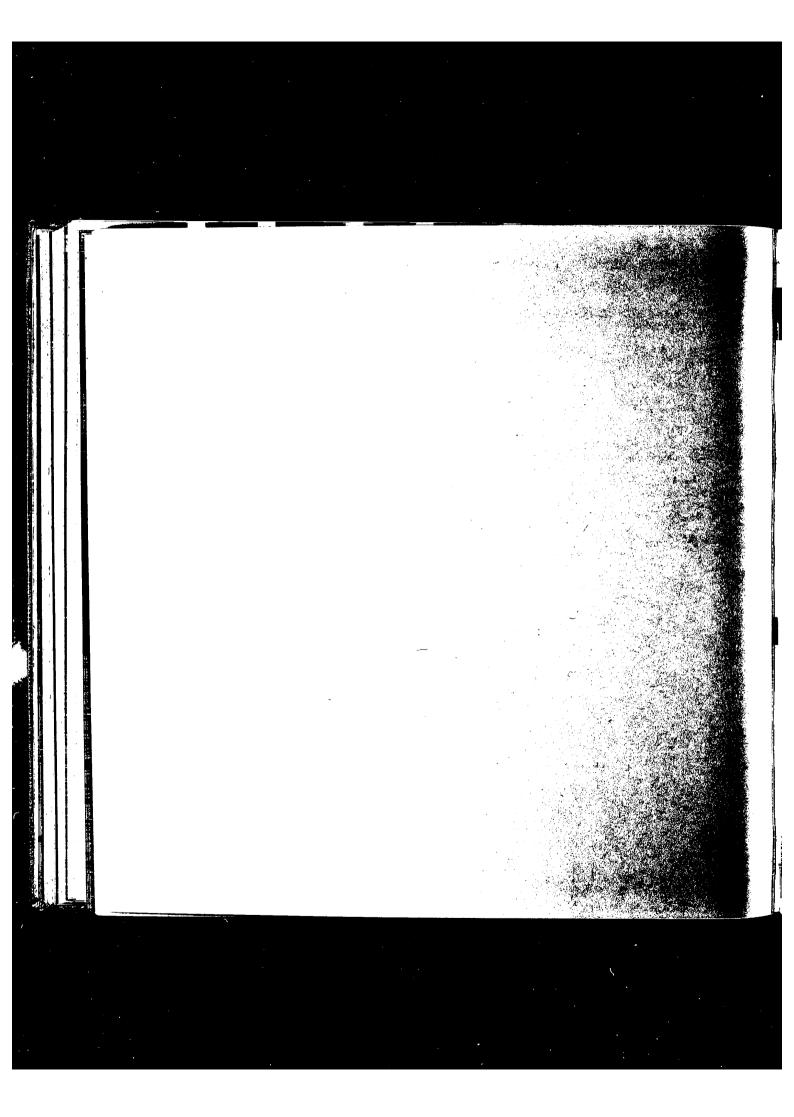
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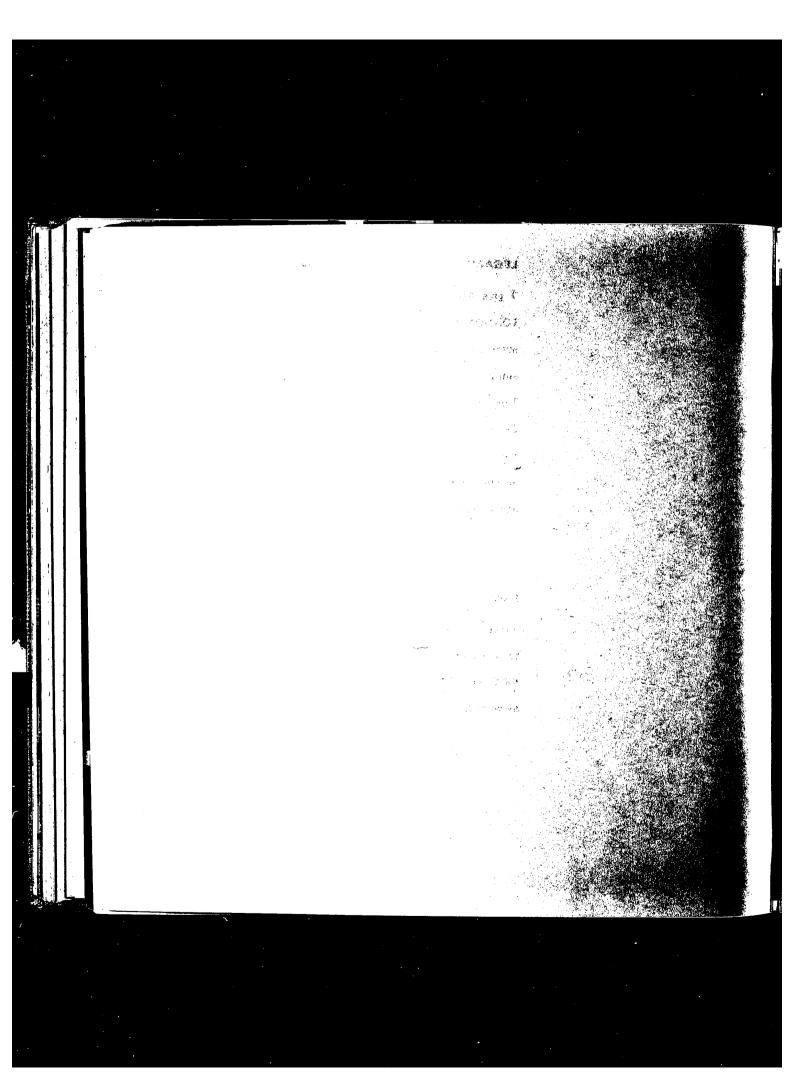
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### Residue

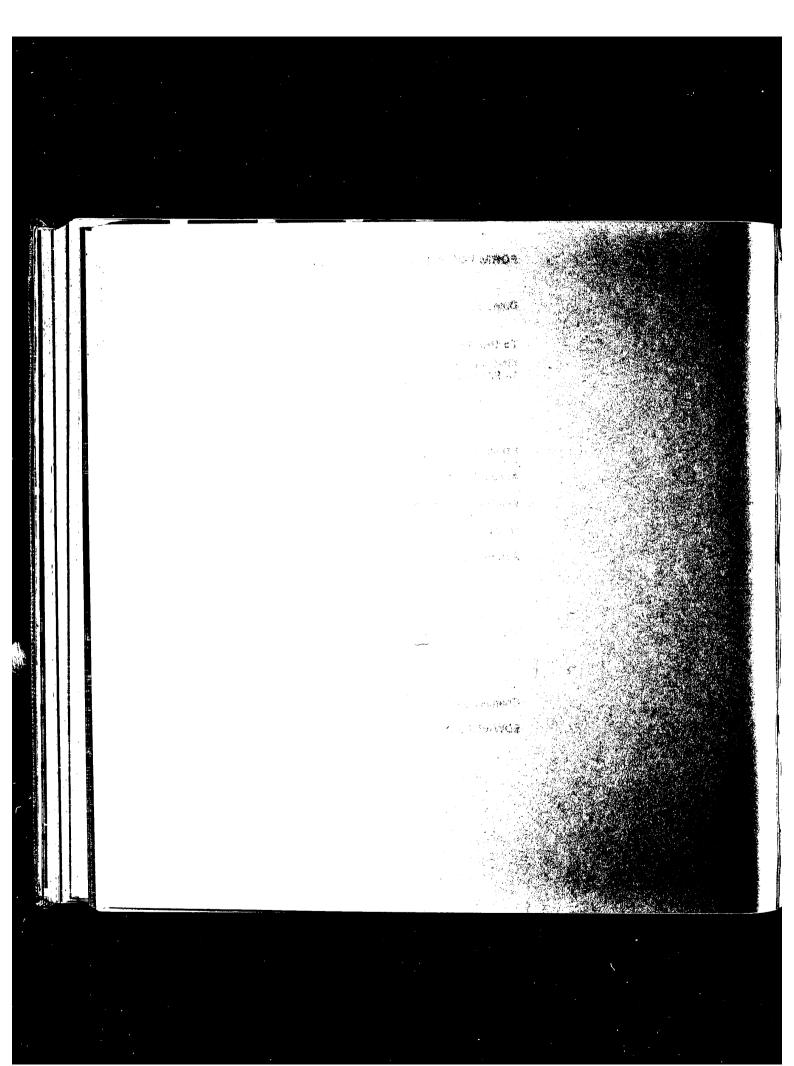
'I give all my property not otherwise disposed of by this my Will subject to and after payment of my funeral and testamentary expenses to KING EDWARD'S HOSPITAL FUND FOR LONDON, to be either expended, etc., etc. (as above).'



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Address

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Please pay on the_	day of	19
to the BANK OF	ENGLAND LONDON EC2R 8A	H for the credit of
KING EDWARD'S I	HOSPITAL FUND FOR LONDON	I, a/c No. 5360000 <b>2</b> ,
the sum of		
and continue to pa	y the same amount on the	
in each future year	until further notice.	
	Signature	
£ p	Name(for postal purposes)	
	Address	

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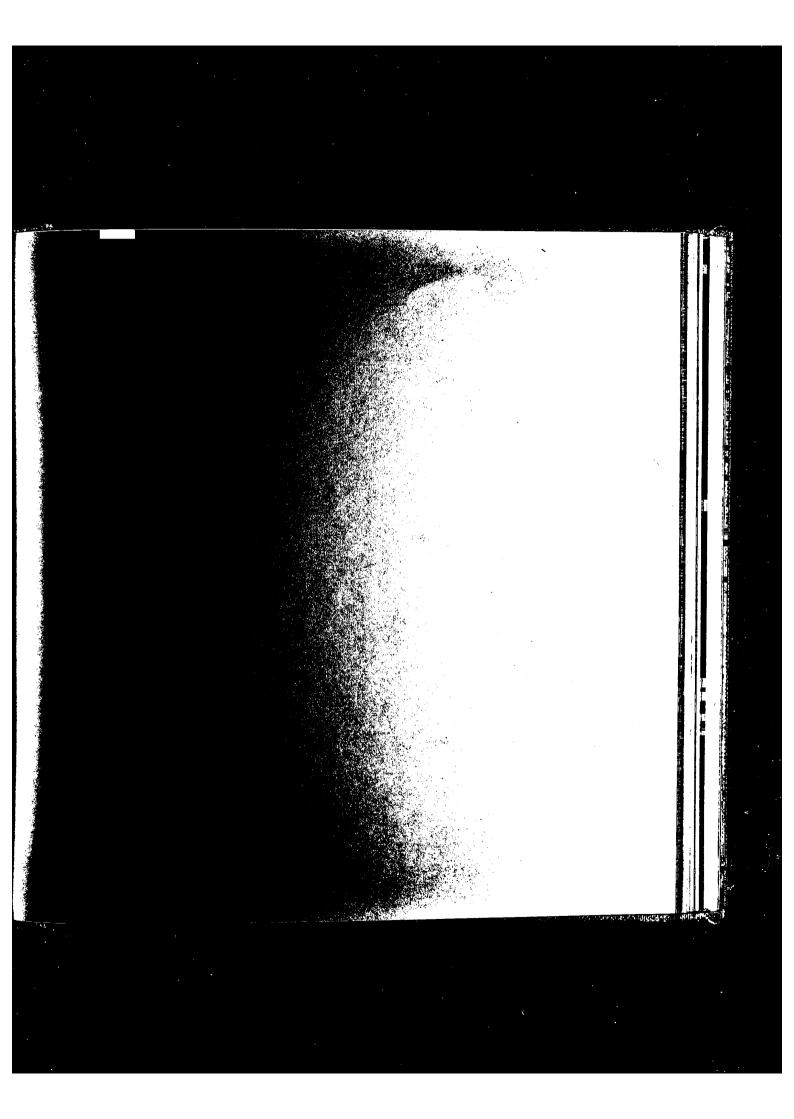
For example, if a contributor who now subscribes £30 per annum, enters into an agreement in the form below, filling in the figure £30, the result will be
(i) the subscriber sends a cheque for £30, with a certificate that he has paid income tax on the amount which, after deducting income tax, leaves £30 (i.e., with income tax at 35p in the £, £46-15); the Fund can supply forms of certificate if desired;
(ii) the King's Fund recovers income tax from the Inland Revenue;
(iii) the contributor appears as a subscriber of £46-15.

The Fund would be pleased to give further information if desired. It is sometimes possible to furnish alternative forms of agreement to meet special circumstances.

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that for a period of seven years from the date hereof or during my life whichever
period shall be shorter I will pay annually to the said Fund such a sum as will after
deduction of income tax leave in the hands of the Fund the net sum of £
(
(words) the first of such annual payments to be made on the (a)day of
19and the six subsequent annual payments to be made on the
same day in each of such subsequent years all such sums to be paid from my general
fund of taxed income so that I shall receive no personal or private benefit in either of
the said periods from the said sums or any part thereof.
IN WITNESS whereof I have hereunto set my hand and seal this (b)————day
of————————————————————————————————————
SIGNED, SEALED AND DELIVERED by the above-
named in the presence of
Signature
Address——————————————————————————————————
(Signature)
Occupation—————
(a) The date must be later than the date of signing (b)

### Notes as to Completion of Agreement

(1) The term of seven years commences from the date of signature.
(2) The directions for filling in the dates at (a) and (b) should be carefully observed.
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(4) The agreement duly completed as above should be forwarded to the King's Fund as soon as signed in order that it may be stamped within the allotted time.



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