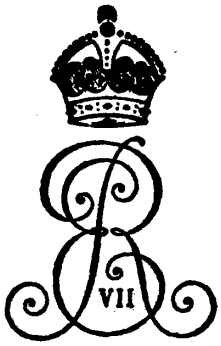
KING EDWARD'S HOSPITAL FUND FOR LONDON



SIXTY-FIFTH
ANNUAL REPORT

1961

34 KING STREET *LONDON, E.C.2*

KING EDWARD'S HOSPITAL FUND FOR LONDON

PATRON:
HER MAJESTY THE QUEEN

PRESIDENT:
HIS ROYAL HIGHNESS THE DUKE OF GLOUCESTER

TREASURER:
LORD ASHBURTON, K.C.V.O.

CHAIRMAN OF THE MANAGEMENT COMMITTEE:
LORD McCORQUODALE, P.C.

SECRETARY:
R. E. PEERS

The Fund was founded in 1897 *by His Majesty King Edward VII (when Prince of Wales) for the "support, benefit or extension of the hospitals of London."*

It was incorporated by Act of Parliament in 1907, *and is not directly affected by the provisions of the National Health Service Act of* 1946.

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HOSPITALS must change with the times and have always done so. Back in the mists of time the sick were given shelter and comfort by the charitably disposed; first by religious bodies, then by secular ones and finally by the State. The Hospital Plan for England and Wales is the latest step forward in this long history. It is in effect the first attempt to create a real hospital service designed for the purpose, as against using whatever happened to be available on the Appointed Day in 1948.

The Plan is a serious attempt to assess the needs of the future and to prepare for them. As has often happened in the past, many old ties and traditions will be broken as the new scheme emerges but, sad though this may be, such things are inevitable in a fast changing world. The Ministry of Health has made it clear that this is not a ten-year plan: it is an attempt to look forward ten years. The proposals for the far end of the period are necessarily less firm than for the immediate future but the plan will be kept up to date yearly so that the forward end of the plan is always ten years ahead. Although mainly concerned with hospitals, it points out the need to make a single service out of the branches as they now exist. At present a patient having to go from one branch to another—say from his family doctor to hospital—is like a man going abroad who has to learn new habits and customs. Gradually the separate branches, the hospitals, the general practitioners and the Local Health Author-

ities, must be drawn into closer harmony so that the individual can move freely from one branch to another as his needs may dictate.

The history of the Fund goes back only 65 years, but these years seem to have been more than ordinarily full of change and the Fund has had to change with them. In 1897 the charitable public who supported the hospitals were aware only of the voluntary hospitals. The existence of municipal infirmaries—the offshoot of the workhouse—was but dimly known to the charitable public and preventive medicine had never been a subject for charity. In these circumstances the Fund was born, and it is interesting to note that the Act of Incorporation, passed in 1907, refers to hospitals without the prefix "voluntary". Perhaps it is fair to guess that in the minds of the promoters of the Act there were no other hospitals.

When Albert Edward, Prince of Wales, asked for subscriptions of 1s. 0d. and upwards he wanted to raise £100,000 per annum which would meet the annual deficits of all the hospitals in London. Such was the idea of the founders of the Fund in 1897. Until 1948 the main use of the Fund's income was to help the running costs of the voluntary hospitals. Nevertheless, the intention to meet the whole of their annual deficits had not been attained. It is indeed doubtful if this intention was ever attainable, since the enthusiastic people who run charities are always prone to overspend regardless of what their income may be.

But quite apart from the distribution of money, the Fund was gradually drawn in to the problems arising from the general policy and daily administration of hospitals. This began through the scrutiny of plans for enlargements towards which the Fund was asked to give money. Inevitably the members of the Distribution Committee began to ask such questions as: Do you really need the extra beds? Can you support them when you have got them? Have you studied the plans of the latest designs? Where will you house the additional nurses? and so on indefinitely. Each of

these questions led off into a whole area of enquiry and gradually the Fund acquired an extensive knowledge of hospital problems and management. For instance, a system of hospital accounting had to be devised, partly in order that the accounts should be competently kept and partly to provide comparative figures. This system lasted on until the health service took over and indeed it is still used by independent hospitals.

At the same time, the Fund was inevitably drawn towards the practical details of management and this led to the publication in 1907 of the Memorandum on Fire Precautions. The first edition was written largely on the advice of Sir Eyre Shaw who was distinguished both as the founder of the London Fire Brigade as we now know it and also as Captain Shaw of *Iolanthe*. Many other projects were undertaken for the general assistance of hospitals, quite apart from the actual gifts of money. An enquiry into waiting time in out-patient departments was made in the thirties. An Act of Parliament was promoted concerning the provision of pay beds in hospitals, the Emergency Bed Service was started in 1938, and later, during the Second World War, attention was directed to the recruitment of nurses and to the dietary of hospital patients and staff.

On July 4th, 1948, the greater part of the money granted for the maintenance of hospitals was freed for other purposes and in consequence a drastic re-orientation of the Fund's activities had to take place. Since the Act of Incorporation did not mention voluntary hospitals there was in fact no reason why grants should not be made to state hospitals and when it was discovered, soon after the health service came into being, that the hospitals had a great need for free money, the flow of money to the hospitals was resumed but this time only for capital purposes and not for maintenance.

At the same time the Management Committee decided to turn its thoughts towards the provision of education for hospital staff and in fairly close succession colleges were

opened for Ward Sisters, Administrators, Catering staff and finally Matrons. Owing to the successful management of the King's Fund's capital it has been possible not only to maintain all four Colleges out of increased income but also to make grants to hospitals at the rate of £300,000 a year as had been the case before the health service started. The Colleges are now all well established and the record of their year's work appears in the subsequent pages of this Report.

A great number of people serve the King's Fund voluntarily and it is difficult for the Fund to show its appreciation of the work they do. In an endeavour to remedy this, T.R.H. the Duke and Duchess of Gloucester most kindly agreed to attend a reception given at St. James's Palace in October, 1961. Invitations were sent to all Visitors and Members of Committees, of whom some 150 attended the reception. Their Royal Highnesses talked with many of the guests and the letters of thanks that were subsequently received showed that their action had been greatly appreciated.

GRANTS TO HOSPITALS

By the terms of the Fund's Act grants are made each year, out of the annual income, for "the support benefit or extension" of the hospitals situated inside the Metropolitan Police District or, if outside that area, those which receive a significant proportion of their patients from within. The General Council decides how much of each year's income shall be distributed in grants and this sum is then allocated between three Committees who are responsible for handling the applications which are submitted to the Fund. These Committees are the Hospitals Committee, dealing with grants to all the London general hospitals, including independent hospitals; the Mental Hospitals Committee, who handle grants to hospitals for the mentally ill and those

who are subnormal; and the Auxiliary Hospitals Committee, whose charge includes convalescent homes as well as homes for the chronic sick and the aged. A detailed statement of all the grants made by these three Committees, as well as some grants made direct by the Management Committee, is given on pages 52 to 57. The following paragraphs describe briefly some of the interesting items in this list.

GENERAL HOSPITALS

The largest of the 32 grants to general hospitals was £8,000 for a staff recreation hall at Barnet General Hospital, opened by Sir Parker Morris on behalf of the Fund on November 18th. Previously the only place available for social functions in this large hospital was a sitting room in the nurses' home. The Fund has long since recognized the importance of providing hospital staff of all categories with recreational and social facilities, not only to meet the demand for means of relaxation after work, but also as a direct aid to the recruitment and retention of staff. As well as this grant to Barnet General, help was given during 1961 towards a canteen and rest room at Harefield Hospital and a recreation building at Willesden General Hospital. Additions were also made to earlier grants for a recreation hall at St. Giles' Hospital and a sports pavilion at Queen Mary's Hospital for Children, Carshalton, while £2,000 was added to the £12,000 already given for a large recreation hall at Whipps Cross Hospital. This fine hall, which cost in all £18,000, was opened on behalf of the Fund by the Marquis of Normanby in February, 1962.

The Fund's interest in the development of hospital libraries was demonstrated four years ago by the publication of a report entitled "Hospital Library Services", which included among its recommendations an exhortation to all hospital authorities to "regard it as an essential duty to see that an efficient library service is provided in all hospitals". To date the response to the suggestions which were put forward in this report has been disappointing, so it is all the

more gratifying to record that in 1961 two grants for libraries were made, one at the West Middlesex Hospital and the other at Mount Vernon Hospital. Hospital gardens, another of the Fund's special interests, received three grants, in implementation of the advice so readily given by the Fund's gardening advisers, Mr. W. G. MacKenzie, Mr. G. L. Pilkington and Mr. Lanning Roper: £2,000 was allotted for reconstituting part of the very large grounds at Highlands General Hospital, nearly £1,000 for improving the gardens at St. Olave's Hospital and New Cross General Hospital and £450 for a garden at Croydon General Hospital.

With the cessation of the Hospital Catering and Diet Committee at the end of 1960, grants for catering schemes in general hospitals have fallen to the Hospitals Committee who allocated £5,500 to the Metropolitan Hospital for upgrading and re-equipment of the kitchen and the dining rooms, £5,500 for the equipment of a central dining room at the Royal Northern Hospital, £3,500 to the Florence Nightingale Hospital for major alterations to the Catering Department, £1,500 to St. Teresa's Maternity Hospital for improvements to the kitchen and £2,500 to the National Hospital, Queen Square, towards a complete reorganization and refurnishing of the staff dining area. In each instance the grants were made to assist the hospitals in implementing recommendations made by the Hospital Catering Advisory Service. £7,000 was also provided for a non-resident staff canteen at Epsom Hospital which is to be a new building to take the place of a temporary wooden hut put up at the end of the last war.

A section of last year's Report was devoted to the need for accommodation for non-resident staff, for which purpose three grants totalling £40,000 had been made. During 1961 a fourth grant of £3,400 was given to Westminster Hospital for the conversion of part of the basement of the main building to provide a locker and changing room, a dining and rest room, as well as a wash room and lavatories for the 140 members of the non-resident domestic staff. A small grant was also given for a temporary building at Princess

Beatrice Hospital which will include a rest room where the non-resident domestic staff can eat their lunches; hitherto they have had to feed in the ward kitchens.

The comfort of medical and nursing staff also received recognition through grants for the improvement of residents' quarters at the Brook General and St. Nicholas Hospitals in Woolwich and for upgrading the nurses' homes at the National Heart Hospital and St. Olave's Hospital. £3,000 was given to the Friends of the North Middlesex Hospital through the Edmonton H.M.C. towards a new chapel to replace one destroyed in the war. The united efforts of this League of Friends and the matron and her staff had collected the spendid total of £5,000 and the Fund's grant enabled them to reach their target. St. John's Hospital, Battersea, was given £850 for the adaptation and equipping of a former day room as a hairdressing salon for long-stay female patients. Of this sum £100 was a personal gift from one of the Fund's Visitors who was impressed with this need when he visited the hospital.

Finally, mention must be made of the grant of £5,000 to the Central Council for District Nursing in London. For a number of years the Fund has helped the Central Council to meet its head office expenditure and has also provided £1,500 for distribution between the local district associations who, though supported in the main by grants in and from the L.C.C., are nevertheless required to meet a proportion of their maintenance costs from voluntary sources.

HOSPITALS FOR THE MENTALLY ILL AND THE SUB-NORMAL

The hospitals in this group received £142,460 in grants during 1961. The largest donation was £35,000 for the expansion and re-equipment of the industrial training unit at Leavesden Hospital. The original unit, opened in 1959, had also been financed by the Fund. It provided what is in effect a special type of factory or assembly plant where, under the direction of an industrial manager, male patients

have learnt to operate some of the simpler types of machines used in light industry. Already by the end of 1961, seventeen of these trainees had progressed sufficiently to be discharged from the hospital while a further fourteen were working outside the hospital on licence. From the start there has been no lack of contracts from manufacturers in the St. Albans area and the whole scheme has gone so well that the Management Committee have been encouraged to double the unit and in doing so to provide training for female patients as well. The architects studied the problem for several months before making drawings for the new unit, which incorporates the existing building in a most skilful manner. Their objective has been to provide a training establishment for all those patients in Leavesden Hospital who can possibly benefit from a training in industrial techniques, so that they can be fitted to take their place in a normal industrial community.

Another large grant to a hospital for the mentally subnormal was the £17,000 given for a staff club, canteen and sports pavilion at the Royal Earlswood Hospital. Until this building is opened, the only recreational facilities available to the staff are a share of the general recreation hall, itself a most inadequate unit, formed by putting a roof across what was previously an open space between two wings of the main hospital building, and a billiard table in the male staff's day room. There is no sports pavilion, and teams change in the converted male bath house.

Darenth Park is also to have a new building for a staff club and sports pavilion at a cost of £12,000. At present the 400 members of the staff social and sports club meet in what was formerly a workshop, while football and cricket teams have to use a tumbledown wooden hut, where there is only one cold water basin and no lavatory. The sports pavilion at Leybourne Grange is equally inadequate and will shortly be replaced by a fully equipped building, which will be used by both patients and staff. In this case the Fund's grant was £9,000.

At Normansfield, near Kingston, £5,000 has been added to the considerable sum collected by the League of Friends for a school building with six classrooms, cloakrooms and lavatories for the sixty children among the 200 patients in this hospital for the subnormal. The new school is an attractive, light and airy pre-fabricated building and takes the place of overcrowded classrooms in the basement of the main building.

Three grants have been made for patients' social and recreation centres: £18,000 to Banstead Hospital, £20,500 to West Park Hospital and £7,000 to Bexley Hospital, which brings the number of such centres provided wholly or largely by the Fund to nine, at a total cost of £95,500.

Two hospitals, Holloway Sanatorium and Bexley Hospital, have received grants for the improvement of their grounds on the advice of the Fund's garden advisers. Finally, £3,000 was given to the Mental After Care Association, to meet part of the cost of adapting and furnishing a house near Croydon Airport as a hostel for the rehabilitation of patients of either sex, most of whom have been under treatment in a psychiatric hospital. There is accommodation for 40 residents either in single rooms, or in small dormitories of three to five beds. Both the matron and her assistants have been trained in psychiatric nursing and the Association's senior psychiatric worker visits the home at least twice a week.

AUXILIARY HOSPITALS

The requests for help from Convalescent Homes were somewhat greater than in previous years and it was necessary to make grants totalling £22,535 to meet these needs. Some 36 homes benefited, nearly all of them independent homes with local committees which look to the Fund for help and advice in times of difficulty. Indeed, the advice which cannot be measured in terms of cash, may well be an even more important contribution to the wellbeing of these homes than are the actual grants. It is necessary, of course, that

homes should be periodically modernized in order to provide the present day standards which convalescent patients require. The grants this year, as in the past, were directed towards the most progressive convalescent homes to achieve these ends. There are also occasions when a grant to a convalescent home within the National Health Service can be made to advantage, as for example the grant of £1,167 given to Princess Mary's Rehabilitation Home at Margate, for special equipment for a new department for the treatment of heavily handicapped patients.

It has been widely known for some time that the type of convalescent accommodation required for patients from London hospitals has changed in recent years and that further changes are expected in the not too distant future. One aspect of this is the dramatic decrease in demand for children's accommodation in the past ten years. Some idea of this can be obtained from the homes serving the London area listed in the Convalescent Homes Directory, and although this list is not exhaustive it gives a strong indication of present trends. On 1st January, 1952, 3019 beds were available in children's convalescent homes and schools, but ten years later, on 1st January, 1962, there were only 1521, a decrease of nearly 50%. In the case of convalescent homes for adults the emphasis now is on the ability to receive patients from hospital at an earlier stage of recovery than in the past. This has meant the provision of extra nursing staff and better accommodation in the shape of ground floor rooms or lifts for patients unable to manage stairs. Changes in the next ten years may well be even more dramatic.

To investigate these problems the Minister of Health set up, in March 1961, a Standing Joint Advisory Committee on Convalescence to consider and advise the four Metropolitan Regional Hospital Boards and Boards of Governors of London Teaching Hospitals on a wide range of matters relating to convalescent patients' needs. The Boards and Teaching Hospitals are represented on this Committee as well as the Fund, whose representative was elected Chairman.

The claims of institutions concerned with sick and aged people are also very much in mind, because, as everyone knows, the number of these patients is increasing year by year. The eleven Halfway Homes (Homes for the Aged Sick) founded by the Fund ten years ago continue to provide a valuable service, but they need improvements and alterations as the years go by. Nearly all have now been provided with lifts, and this year The Gables at Blackheath was given a grant to modernize the kitchen premises, and Fallowfield at Chislehurst a grant to improve the staff quarters.

The Fund's interest in the elderly has led to making a close and detailed examination into their dietary. Little is known about what old people should eat but it is obvious that their dietary is an important factor in keeping them healthy. Many beds in geriatric wards are occupied by old people who have deteriorated physically because they are too old and feeble to feed and look after themselves. An intercurrent illness may start the vicious circle of ill health, leading to apathy, poor feeding, and thus to continued ill health, and finally to a hospital bed and even a chronic or incurable condition requiring permanent nursing care. As a first step to discovering more about the dietary needs of the elderly an intensive survey was carried out in a Halfway Home. The results were interesting and suggested further research which is now being followed up with more detailed studies of individual dietaries.

Another aspect of the same work has been an investigation into the contribution made to old peoples' dietaries, of meals served in a Darby and Joan luncheon club. It was found that as much as half or a third of the day's needs could be obtained from the one meal given in the club. More work needs to be done along these lines but it appears certain that well balanced meals, provided at reasonable cost, are an important factor in maintaining the health of our elderly population.

A special grant of £5,000 was made to the Royal Hospital and Home for Incurables at Putney towards the cost of

extensive repairs and renewals to buildings and equipment. In a different field was the new project of the Invalid Children's Aid Association to establish a long stay special school for uncommunicating and severely maladjusted children at Banstead. This is pioneer work which is to be tried out and a grant of £2,500 was made towards the equipment of the home.

The Annual Convalescent Homes Conference, held at Queen Elizabeth College, Campden Hill, was again well attended. These functions provide an occasion for matrons and staff of convalescent homes to attend an address by some distinguished medical man about some subject connected with their own work. It is also an occasion for social contacts between a wide variety of persons concerned with the welfare and treatment of convalescent patients. The workers in convalescent homes lead a hard and exacting life and this Conference is the only opportunity of gathering together and discussing their problems free from their day to day worries. There can be no doubt as to the value of these meetings, which the Fund has promoted annually for eleven years.

HOSPITAL DEVELOPMENT COMMITTEE

Last year's Report referred to the establishment of the Hospital Development Committee, under the chairmanship of Lord Cunliffe, to guide the experiments and investigations undertaken by the Division of Hospital Facilities and the Hospital Catering Advisory Service. Information on the work done by these two branches of the Fund is given in succeeding sections, but in addition to these specialized activities, the Development Committee has also set in motion three major enquiries, each under the direction of a member of the Committee supported by a working party. In addition a grant of £8,000 had been made to finance a survey into the out-patient department at Guy's Hospital by Professor Butterfield and Dr. Acheson, supported by a small

team of research assistants. This survey is complementary to similar ones now in progress at Edinburgh and Manchester, which have been sponsored by the Nuffield Provincial Hospitals Trust. It is intended to publish the results of all these surveys which, besides being of direct consequence to each of the three hospitals concerned, will also, it is hoped, be capable of wider application in the planning of new out-patient departments throughout the country.

The first of the Committee's current enquiries to be launched was started at the request of the Ministry of Health, who asked for the Fund's suggestions on the need for training schemes for the supervisors of manual and domestic staff. Two working parties have been formed, one to consider domestic and the other portering and male ancillary staff. Both groups have the same Chairman, Major Simon Whitbread, and the same terms of reference which are "To enquire into the need for and best means of providing training for supervisors of manual staff, particularly head porters and domestic supervisors". The extensive enquiries covering the whole country which must be made before the working parties can draft their report are being carried out by Mr. Irfon Roberts, recently Secretary of Westminster Children's Hospital and now a temporary member of the Fund's staff. He has made such rapid progress that there is every possibility of the report being published during 1962.

The next investigation concerns the relationship of hospitals and general practitioners, a subject in which the Fund has been much interested in recent years—an interest which was given practical shape last year with a grant of £42,700 for the Doctor's Centre at Kingston Hospital, which should be in use before the end of 1962. Mr. P. H. Constable is the Chairman of the Working Party who have the following terms of reference: "To study ways in which the general practitioner can be brought into closer association with hospitals in the best interest of the health service". The group includes a consultant from a teaching hospital, a senior medical officer from the Ministry and four general practi-

tioners, representing urban, industrial and rural practices. Dr. Maurice Shaw, formerly Dean of West London Hospital's Medical School has accepted the Fund's invitation to conduct the necessary enquiries which, it should be emphasized, will be directed mainly towards the manner in which written and verbal communications pass between medical staff in hospitals and local general practitioners.

The third investigation, into the role of the hospital chaplain, has only just begun. It is being undertaken at the request of the Hospital Chaplaincies Council of the Church Assembly, but will of course be concerned with hospital chaplains of every denomination. The Chairman of this enquiry is Mr. Selwyn Taylor whose working party includes a matron, a group secretary, a hospital psychiatrist as well as representatives of the Church of England, the Roman Catholic Church, the Free Church and the Jewish faith. The Rev. A. E. Barton, who has been chaplain to the United Sheffield Hospitals for the past five years and who is also Secretary to the Church of England Hospital Chaplains Fellowship, is being seconded to the Fund in June, 1962, to obtain the detailed information required by the terms of reference which are "to consider the role of the chaplain in hospitals of all types, the qualities and training desirable to fulfil it and to make recommendations". As in the case of each of the other enquiries, this working party's findings and recommendations will be published in due course.

A fourth investigation is taking place which was in existence before the Development Committee came into being. Several finance officers from London teaching hospitals were, on their own initiative, trying to devise some method of measuring a hospital's performance. Their immediate aim is to establish in descriptive and qualitative terms what is involved in the normal working of a teaching hospital, and to use this data subsequently to identify both the irremovable and the removable variations in conditions affecting individual hospitals. The subject is highly complex and time

consuming and the Fund is helping them by the provision of skilled assistance which should speed up their work which hitherto was done by busy men in their spare time. The Chairman of this group is Mr. P. H. Constable, House Governor of St. George's Hospital. The work goes on steadily but of its nature cannot be expected to produce results rapidly.

DIVISION OF HOSPITAL FACILITIES

The provision of an information and advisory service which incorporates opinions and assessments as well as facts does depend very much upon the help received from a great many sources, and in this respect the Division is particularly fortunate. Without the ready co-operation of hospital officers and authorities and of manufacturers and suppliers in forwarding information, in participating in trials, and in expressing frank opinions upon which assessments can be based, the present standard of service could not be achieved, and once again the Division wishes to express its thanks to all who have helped in this way.

For some time it has been apparent that the Fund could render valuable additional assistance to the hospitals if greater strength were given to its information and advisory services. By the end of the year plans were far advanced for setting up a Hospital Centre. New premises are to be leased in the Edgware Road within easy distance of the Staff Colleges of the Fund, which not only provide room for a considerable expansion of the present services but will include greatly improved facilities for lectures, lending library, exhibition of equipment and models, etc. This further development of the Division as a centre of hospital information, advice, study and assessment comes at a time when so much attention is being given to improvement in the hospital services and to the hospital building programmes.

CENTRAL INFORMATION BUREAU AND ADVISORY SERVICE

Once again the number of enquiries from the provinces exceeded those from London, and nursing matters are now included in the very wide range of subjects covered by this service. Enquiries involving a detailed reply increased by some 20%, but such figures do not provide a reliable index of the activity of the Division nor of the extent to which it is being used. The reason for this is that many of the supplementary questions which would normally follow an original enquiry are now anticipated in the wider circulation of the package-library folders and prepared stencilled memoranda.

The package library service is now more generally known and has a special appeal to those concerned with building developments and the preparation of the architect's brief. This is evidenced by the popularity of folders on such topics as—trends in hospital design in the United Kingdom and the U.S.A.; central sterile supply departments; stores organization; central hospital laundries; progressive patient care; maternity units; operating theatres; race-track wards.

The preparation of stencilled memoranda involves a considerable amount of work, and it is necessary to revise them periodically in order to keep them up to date. Even so, the number of topics dealt with in this way has been extended and more recent examples include hospital incinerators, plastic flooring materials, dictating machines, ward toilets, dishwashing machines, and disposable paper goods.

Copies of the memoranda are now distributed regularly to all the central hospital authorities and to some authorities abroad but, so far as the hospitals themselves are concerned, the policy of issuing the memoranda only on demand is to be maintained for the time being so as to ensure that the recipients receive up-to-date copies.

SPECIAL STUDIES AND INVESTIGATIONS

(1) *Hospital floors and cleaning procedures.*

The Division has continued its interest in the problems of

flooring, floor maintenance and cleaning procedures generally in hospitals, and the following are some of the special studies undertaken. In February a report on floor seals in hospital wards based on investigations at St. Peter's Hospital, Chertsey, was published in "The Hospital"; several hundred reprints were distributed and the article was later reproduced in full in three other technical journals. A further report, on hospital corridor flooring, was also published in "The Hospital". This was based on an investigation carried out at Ashford Hospital. In both cases the Division enjoyed the willing co-operation of the hospital staff as well as the companies participating in the trials.

At Ashford Hospital further trials are concerned with the problems of ward cleaning procedures and equipment; also four wards have been equipped with different types of cubicle curtain tracks and curtains of various materials so that their suitability can be tested under practical conditions. The Division also co-operated with Dr. J. G. Bate, Pathologist at Princess Louise Hospital for Children, in the testing of different types of vacuum cleaners used in hospitals, and since the publication of his report in the medical and technical press many of the manufacturers have introduced modifications in the designs of their models.

(2) *Films for Hospitals.*

Early in 1961 the Division initiated an enquiry into the subject of entertainment filmshows for patients and films for the instruction of hospital staff, and a great deal of information was obtained from over 65 hospital authorities, including every hospital management committee in the South West Metropolitan Region. Later, a detailed report was published and circulated to all hospitals. It is evident that there is considerable scope for extending the use of films for instructional purposes as well as for the entertainment of patients.

(3) *Noise Control in Hospitals.*

It is now five years since the Fund first took an interest in the question of noise control in hospitals. It was then a

subject to which little attention was paid. A few hospitals were interested in reducing noise but it is fair to say that generally speaking it was not seriously considered as a problem and in so far as it was recognized as a defect it was assumed to be inevitable. Largely as a result of the Fund's campaign, noise is now a problem in the forefront of administrators' minds and the methods of reducing it are well known. Continual attention needs to be paid to the subject and it must be kept constantly in the minds of all hospital workers. With this in mind, the Fund asked Fougasse if he would draw a set of posters illustrative of unnecessary noises. This he most generously did and the posters will be distributed for display in all the hospitals in the United Kingdom in the course of 1962-63.

(4) *Other subjects.*

The Fund has agreed to pay for the installation of background music services in a number of hospitals so as to examine its suitability in such places as the waiting areas of casualty departments, out-patient departments, ante-natal clinics, physiotherapy departments, as well as relaying it to the patients' headphones in the wards. The six hospitals taking part in this experiment have kindly undertaken to distribute to patients and staff a detailed questionnaire and it is intended to publish a report on the trials in due course.

At West Middlesex Hospital the Division is co-operating in planning the conversion of an existing building into a hospital central stores. This is intended as an example of the use of metal racking with mezzanine flooring and mechanical lifting apparatus, and of an organization designed to suit modern stores distribution, clerical and accounting procedures. Special study is also being given to laundry packaging, plastic foam mattresses, and overhead infra-red heating on out-door ward balconies.

OTHER ACTIVITIES

Thirty-one visitors from thirteen countries were included in the large number of visitors who came to the Department,

and twenty-four tours were arranged for overseas or British visitors wishing to see hospitals in this country or abroad. Visits to hospitals and attendances by members of the staff at conferences exhibitions, displays and meetings of other authorities numbered 355, and 39 lectures and talks were given, many of them followed by discussions that led to valuable exchanges of information.

HOSPITAL CATERING ADVISORY SERVICE

For many years the major work of the Hospital Catering Advisory Service has been the planning of new kitchens in old hospitals. This work was undertaken in the early days of the hospital service when there was little knowledge of the design of hospital kitchens available. Now, owing partly to the work of the service, this is no longer the case and the need for the Fund's pioneering work accordingly ceases.

The Catering Advisory Service is turning its attention to the testing of new equipment and the application of new ideas to problems which arise in the preparation, service and removal of meals. For instance, there are the eternal problems of how to ensure that the meal is hot and palatable on reaching the patient and how to deal with the resultant mass of washing-up efficiently and economically. These and many other problems need to be faced now, and doubtless more will arise as time goes by.

TROLLEYS

One of the first of the new projects arose through the policy advocated by the Catering Advisory Service of providing a choice of dishes to patients. It is pleasing to see the progress which this idea has made, both in London and in the Provinces. However, the provision of a choice of four meat dishes, a choice of potatoes and vegetables, and four sweets in addition to a first course of soup, has rendered the

present design of trolleys and containers inadequate. Therefore the Advisory service has designed a trolley with containers, which it is hoped will meet most of the requirements of those hospitals giving a choice of dishes. Three prototypes are being built, each of which has slight variations. These trolleys will be tested in hospitals and changed from one hospital to another to find out the best features in the designs.

CROCKERY

Towards the end of the year, an earlier investigation into crockery washing was re-opened and experiments are now being carried out in a number of hospitals. In these experiments particular attention is being paid to hygiene, the use of detergents and detergent dispensers, as well as to the layout of the crockery washing units. Both the hospitals and the manufacturers concerned are co-operating fully in these experiments, the results of which should be ready for publication before the end of 1962.

OTHER SUBJECTS

During the year a considerable number of hospitals, mainly in the Provinces have been given advice by letter. The subjects covered have been microwave ovens, vending machines, food trolleys, containers, liquidisors, refrigerators, knife sharpeners, draining boards, fish fryers, pastry ovens, cake mixes, coffee, butter and margarine, bread buttering machines, equipment specifications, food costs, central crockery washing, plated meal service to patients, staff meals service, private patients' meals, disposable ware, scale of issues, general diets, purchase of foodstuffs and equipment, contract catering, left over foods, waste disposal, work study in catering departments, catering department layouts and careers in hospital catering. To support the advice given, a very comprehensive library is maintained which runs into more than a thousand files of the latest information which is further backed by users' opinions whenever possible.

In addition, 18 hospitals have been assisted in selecting catering officers and 29 have received planning advice. Several hospital committees and architects have consulted the Catering Advisory Service on food service methods, and the layout of catering departments for new hospitals. During the year many people have sought detailed information on such matters as the layout of catering units, selection of equipment and specifications.

NURSING RECRUITMENT SERVICE

The 31st March 1961 was a day of particular significance for the Nursing Recruitment Service in that it marked both its twenty-first anniversary and the retirement of Miss Edwards, its first Secretary and for many years its Director. A few days before this, the Council of the Royal College of Nursing, in whose building the service had rented accommodation since 1940, gave notice that, owing to expansion of their own work, they were forced regretfully to ask the Nursing Recruitment Service to find other premises. This was not easy, but eventually new offices were found on the top floor of a pleasant house—No. 6, Cavendish Square—and the move took place on 11th November.

These changes are, as might be expected, reflected in the work of the service: nearly 12,000 letters were received, as compared with 14,000 in 1960; 4,231 new candidates were registered; and there were many more new enquiries from girls too young to be carried forward for follow-up later (generally speaking, this applies to those under 14 or 15), but who nevertheless wanted information and advice on the best preparation which they could make for their future training. Some 1,330 notifications of acceptance for training were received, including over 70 for the course for enrolment, and about 460 others were guided into nursery training, recognized pre-nursing courses and hospital work.

In spite of—or perhaps because of—the publicity which nursing now receives in the general press, and by radio and television, the services of the advisory staff are still much in demand, to prepare or check articles, to speak in schools, to attend careers conventions and parents' meetings, and to address groups of young people in clubs, the British Red Cross Society, etc. Others who are asked to give talks of this kind—young nurses going back to their own schools; married nurses invited to address Youth Clubs, Young Wives' Clubs, Women's Institutes and Townswomen's Guilds; Health Visitors in the School Health Service, who are consulted by the girls whom they meet in the course of their work—often come to the Nursing Recruitment Service for up-to-date information and to talk over the questions which they may anticipate from their audiences. Matrons and tutors concerned in recruitment campaigns have been supplied with copies of "Nursing at the Present Day" for distribution, and large numbers of this booklet were sent to exhibitions all over the country during Commonwealth Technical Training Week. The Travelling Secretary and Secretary gave 121 talks during the year—22 fewer than last year, but some invitations had regretfully to be refused and less have been sought because of other demands on their time. It is hoped to revert to previous practice in 1962. After a talk at one girls' grammar school the headmistress wrote: "Both girls and staff found it most interesting and most helpful; so much information in so short a time and put across in such a fresh and interesting way that we did not realize until afterwards how hard we had been working."

There has been an interesting development in recent months in the type of talk asked for in many schools. No longer is it as necessary as in the past to aim at persuading reluctant headmistresses, girls and parents that nursing is a worthwhile career for the able, though small pockets of prejudice may still exist here and there. Nor is it always so necessary to give factual information about such matters as the age for starting training and the opportunities open to nurses, though some misconceptions, for example that

exciting and glamorous-sounding posts abroad are available for the newly-qualified, must still be corrected. What is often sought and always eagerly received is a picture of all careers in the health service, and how they dovetail in meeting the needs of the community. Enquiries about work other than nursing are referred to the appropriate organizations, and leaflets on these careers are distributed.

Comments have been made in previous Reports on possible changes in the training of nurses and on factors which will have to be taken into account in planning the future nursing services. Some of these factors, e.g. the re-introduction of minimum educational standards for some courses for State registration, and new regulations about the size of hospitals approved as training schools for general nurses do not come into force until 1962 and 1964 respectively, but their influence is already being felt. The changes may well come about more quickly and have to be more radical than had been foreseen, at least by many nurses, and the Nursing Recruitment Service will continue to gather as much information as possible, in the course of visits by its staff to hospitals, about present developments and future plans, both small and large, so that this is available when needed.

The Secretary, Miss Darnell, has continued to serve on the Careers Advisory Sub-Committee of the Education Committee of the London County Council and has been appointed to succeed Miss Edwards as a member of the National Consultative Council on the Recruitment of Nurses and Midwives (Ministry of Health).

HOSPITAL PERSONAL AID SERVICE FOR THE ELDERLY

Since the first tentative enquiries 12 years ago showed that hospitals were being asked to admit numbers of elderly and chronically ill patients who did not need treatment, this service has directed its interests and activities towards reducing the demand for in-patient beds.

There was a growing anxiety about the number of patients whose discharge was prevented by various social reasons and who continued to occupy hospital accommodation when they no longer needed treatment. To try to ease the whole situation, the service started a domiciliary assessment of patients' waiting lists; a service that has continued year by year. The number of patients visited last year was 2,613, bringing the total number assessed by the service to nearly 20,000. Records have been kept of all these cases, which show how long those who have been admitted to hospital had to wait for a vacancy, how long they stayed in hospital and whether they died or were discharged, and which patients were withdrawn from the waiting lists and the reasons why this was possible.

SURVEY OF WAITING LISTS

In the last report it was stated that the service was to make an investigation into waiting lists over a fairly wide area. This investigation, which covered 23 Hospital Management Committee groups and a total of 1,129 patients, has now been completed. The object was to discover whether waiting lists were, in general, accurate records of patients needing in-patient treatment, or if not, to ascertain the reasons for any inaccuracies. The enquiry resulted in a reduction of 364 cases; 218 of these were withdrawn by agreement between the hospitals and general practitioners because they did not appear to need hospital care, 75 others had been admitted and 71 had died although their names remained on the waiting lists. During the enquiry the hospitals admitted 231 cases and withdrew the names of 50

patients who died or were not considered to need treatment. Fresh applications for admission were, of course, being received all the time and of these 380 patients still awaited admission when the enquiry ended. When these were taken into consideration, the original list was found to have been reduced to 872, a decrease of 23%. Of these 298 were patients already occupying hospital beds and awaiting transfer to other wards or hospitals. Thus the true number awaiting admission to hospital was 574.

CO-ORDINATING SERVICES FOR THE ELDERLY

A brief mention was made last year of the scheme which had been started in the Borough of Lewisham to see what could be accomplished with full co-operation between all the services for the elderly and to ascertain whether any exist and how they could best be filled. The work of the Co-ordinating Committee which the Fund sponsored is nearly completed and it is hoped that a full report will be available soon. This report will include a house-to-house survey which was made by the Government Social Survey.

EMERGENCY BED SERVICE

The volume of work during the year under review was much the same as for the preceding year, requests for beds totalling 64,407, compared with 63,461 in the year ended 31st March, 1961, but the pattern differed in several respects. Except in October, every month up to December showed a modest increase in applications compared with the corresponding month of the previous year. The reason for this is not entirely clear; a substantial contribution to the rise came from gynæcological and maternity cases, but several other disease categories also showed increases. It seems possible that the gradual introduction of Subscriber Trunk Dialling has had the effect of causing more doctors to use the service, for in most cases it will cost more to arrange admission by direct approach to hospitals.

Applications during the Christmas holiday period were abnormally high and, as expected, heralded a sharp rise immediately after the holiday season. Weekly applications for the admission of general acute cases reached a peak of 1,995 during the seven days ending 4th January, 1962—some 260 above the New Year "high" of 1961. From this point work decreased, and after the 8th fell rapidly, so that by the end of the month weekly applications were about 1,300—an unusually low figure for the time of year.

A second peak was confidently expected in February, past experience having shown that, in winters of heavy demand, this second peak nearly always occurs. In the event, however, it failed to materialize despite a long spell of severe weather, and requests for beds for general acute cases remained at about 1,250 per week until early March, when a further rise set in.

THE WARNING SYSTEM

On Monday, 1st January, 1962, it was decided to issue a Red Warning without the usual preliminary Yellow Warning. This step was most effective: on 31st December the Medical Referee procedure had to be used for 43 out of 200 admissions, i.e., 21.5%, and on 1st January, for 50 out of 343 patients, i.e., 14.6%. For the whole period of the Red Warning the Referee rate averaged 14.1%. As in past years, the response to the Warning varied. Many hospitals took a much larger number of cases from the E.B.S., and to them the service owes a great debt of gratitude.

A "Yellow" Warning was substituted for the "Red" on January 10th. As was expected, this resulted in a rise in the Referee rate but, with requests for beds falling quickly, the service did not feel itself justified in asking hospitals to continue the exceptional steps required by a Red Warning. With the continuing decrease in applications, the Referee rate should also have fallen, but did not do so, and on January 23rd the Yellow Warning was cancelled as it appeared that it was being largely ignored. At this stage weekly applications were 1,409 and the Referee rate 15.8%.

MATERNITY CASES

The maternity situation, to which reference has been made in previous Reports, continued to deteriorate during the year under review, each month showing an increase in the number of cases handled by the service compared with the corresponding month of the previous year. The total number of such cases was 4,014, as compared with 3,263 in the previous twelve months, and 2,693 in the year ended 31st March, 1960. To place these figures in proportion, it must be recorded that in 1955, the service dealt with only 1,207 maternity cases.

As in previous years, the majority of these patients were known well in advance to need hospital confinement for social reasons. To have to seek a bed for such a patient after labour has started is most unfair to her and to her general practitioner, both of whom suffer a great deal of unnecessary anxiety and inconvenience. The service is, of course, happy to deal with genuine obstetric emergencies, but it has repeatedly protested at having to handle what a leading article in the *Lancet** has called "deliberate emergencies".

HOSPITAL ADMINISTRATIVE STAFF COLLEGE

In April 1961 the Hospital Administrative Staff College reached its tenth anniversary. In these ten years the Staff College has increased threefold the number of students it can take at any one time, but the more significant development over the years has been the widening of the range of both the courses and their content. Furthermore, the new decade has started with a re-appraisal of the work in the light of hospital service trends. The result of this was that in 1961 there were 24 separate courses covering a wide range of subjects and the plans for 1962 envisage a wider variety still.

A completely new departure in 1961 was a three-day conference of Chairmen of Hospital Management Committees

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at which the Minister of Health, Mr. Enoch Powell, led the first morning's discussion. On the second day the conference was addressed by the Permanent Secretary, Sir Bruce Fraser, and on the third day by the Chief Medical Officer, Sir George Godber. The Chairmen thus gained a clear picture of the trends in the health service and the discussions which followed were stimulating and informative. The Minister expressed the view that this idea of bringing together the Chairmen of Hospital Management Committees should be the beginning of an important series, and arrangements are being made to hold a similar conference during 1962.

The year opened with the 1st Work Study Officers' Training Course and this was followed by new courses for clinical psychiatrists, for hospital administrators from overseas, for deputy regional hospital board secretaries and a pilot course in the Preparation of a Brief for a Hospital Building Project.

REFRESHER COURSES

The lecture-room sessions usually take the form of a lecture followed by discussion and there has been particular emphasis, according to the type of course, on the capital building programme, work study and other aids to management efficiency, questions of financial control and measurement and training for hospital administration. These courses vary from one to four weeks' duration and the demand for them generally remains unabated.

TRAINING COURSES IN HOSPITAL ADMINISTRATION

The Staff College is responsible for half the trainees selected under the Ministry of Health Selective Recruitment and Training Scheme and this means that there are always three groups in training in their first, second and third years respectively. So far three three-year courses have been completed. The trainees have found permanent posts and are moving up the career ladder satisfactorily.

In addition to the National Training Course a Regional Training Course of two and a half years' duration, inaugurated by the Ministry of Health, will start in July 1962. This will be the responsibility of the Regional Hospital Boards through their Regional Staff Advisory Committees and Training Officers. At the invitation of the Ministry of Health the Staff College will provide the theoretical content of training for the regional trainees of the four Metropolitan and the Wessex Regional Hospital Boards. If sufficient satisfactory candidates present themselves the first intake into these regions will number 15, the annual intake of national trainees into the Staff College being fixed at 12. For the whole country the annual intake of National and Regional trainees will be 69.

The problems of recruitment, the approaches to training and the career ladder have been matters of frequent discussion within the Staff College. Considerable attention has been given to the practical and theoretical content of training for hospital administration and a manual on the subject is in course of preparation.

It is for this reason that the College welcomes the Minister of Health's invitation to the Principal to serve on the Lycett Green Committee, "to enquire into the present arrangements for recruitment, training and promotion of administrative and clerical staffs in the hospital service, and to make recommendations".

WORK STUDY

The Training Courses for Work Study Officers and the Appreciation Courses, for those responsible for introducing and maintaining work study in hospitals, have now been firmly established. Thus the request from the Minister of Health that the Fund should undertake these activities has been met and it is confidently expected that the work of the College will be reflected in increasing efficiency in the hospital service.

Progress has also been made in studying the best means of developing work study to meet the special needs of the hospital service and in establishing the College as a centre for advice on work study. In addition to the Training and Appreciation Courses work study sessions have been included in the Staff College general courses and at the other King's Fund Colleges. There are indications that work study is becoming a more recognized aid in hospital work and encouraging results have already been achieved by some of the trainees since returning to their posts. Further expansion of work study in the hospital service is, however, at present hampered by a shortage of suitable applicants for work study posts.

GUESTS AND VISITORS

Visitors from many parts of the world still come to learn about the work of the Staff College as there is no other establishment run on quite the same lines. The usual guest night dinners and receptions continue to be held and both the Staff College and members of the courses benefit greatly from these occasions. Most of the receptions are, in effect, reunion gatherings of previous members of courses who now number nearly 1,000 and who come from all parts of the country to spend a short evening in the College.

OTHER ACTIVITIES

The Staff College Recruitment Advisory Service and the Staff College Medical Records Advisory Service, with its Advisory Panel, deal with many enquiries each year. The Hospital Discussion Group meets regularly at the College and it is pleasing that so many of the members of this Group who are ex-King's Fund bursars now hold some of the most senior administrative posts in the hospital service.

The strength of the Staff College comes, of course, from the King's Fund and its position of independence, together with the support of the Ministry of Health, hospital authorities and the large number of part-time lecturers. New

lecturers are, in fact, constantly being brought in to add freshness and new slants to the programmes.

The various developments during the year, i.e., hospital service trends, new Staff College courses and increased contacts between the Staff College and hospital authorities etc., were stimulating and added to the effectiveness of the tutorial work.

STAFF COLLEGE FOR MATRONS

The courses during 1961 were fully booked and it has been a pleasure to welcome a number of visitors from abroad who are interested in the work being undertaken at the Staff College.

A new type of refresher course for a group of senior midwifery superintendents from the metropolitan regions was arranged for the Spring of 1962. At the present time a heavy burden is placed upon certain midwifery units particularly in London. The rising birthrate, the increase in hospital confinements, a high marriage rate in the earliest age groups—which may mean a loss to the midwifery profession of the younger midwife—plus a shorter working week make great demands on those who have the responsibility for patients and staff in these units. The syllabus has been planned after consultation with the Royal College of Midwives and has been warmly welcomed by those invited for the pilot course.

In the preparation of those who will hold senior nursing appointments in the hospital service in the next decade, one of the most important aims of the College is to help them to face with zest and determination an increasingly complex task and to gain, while on the course, some understanding of the rapid and fundamental social changes in our society. It is unlikely that the nursing profession can expect a much larger share of the total available woman power. To make the best use of the available resources—a phrase often used by those who do not carry direct responsibility for the work

and welfare of others in an organization—means in practice, considerable administrative skill, moral courage, and the willingness to accept changes in methods of work. Perhaps too, what is even as important in getting effective results, is the ability to gain the co-operation of medical and administrative staff in order that the skill and training of nurses are used to the best advantage of the patient. It is encouraging to receive each year a large number of applications from senior nurses anxious to train for posts which demand both physical and mental resilience, if the day's work is to be enjoyed. It is of the greatest importance to the future of the nursing service that those who are prepared to accept the position of matron find a satisfying and happy life in the hospital service, for by their influence and ability the well being of many is affected. The following extract from a letter from one of our students suggests that our teaching bears fruit:—

> "I enjoyed every minute of the course and was particularly pleased to notice the emphasis placed throughout the lectures and discussions on the importance of the individual. I have always tried to do this, but in future will pursue that path with greater conviction."

Several members of past courses are now serving both on Regional Hospital Boards and Area Nursing Training Committees and it is encouraging to hear from time to time of the progress of all those who have been at the College. One former student, who now holds the post of matron in a new hospital, has made some interesting innovations and experiments both in the staffing structure of wards and the methods of inducting new staff. Her work was thought of sufficient national interest to warrant a television programme. The College is indebted to many past students for the help they give both in preparing programmes for students on field work studies and to those who come to lecture at the Staff College. A debt of gratitude is also owed to the many industrial firms who help so willingly and unfailingly year by year. The interest and welcome they give to students is one of the important aspects of the preparatory courses.

STAFF COLLEGE FOR WARD SISTERS

During 1961, 102 ward sisters and 19 charge nurses attended courses at this College. Of the courses held there two were preparatory courses—each of 12 weeks; both were fully booked several months in advance. The aims of this course remain the same today as when the College was first opened 12 years ago. They are to give recently appointed sisters and staff nurses an opportunity to study three main problems which will confront them. First, how to give the student nurses all the ward teaching they should have; secondly, how to bring out the best in their team and obtain easy staff relationships; and thirdly, how to manage their wards efficiently and with an economy of labour. The other four courses were refresher courses, each of four weeks' duration and all were for experienced sisters and charge nurses. Two courses were for sisters and charge nurses from psychiatric hospitals and two courses for sisters and charge nurses from General Hospitals. Here again the courses are designed to help sisters and charge nurses with ward teaching, staff relationships and ward administration and it is disquieting to note that their problems in these three fields are multiplying.

Increasingly, members of the senior courses show anxiety on three counts: (i) the amount of non-nursing work demanded of all nurses; (ii) the short length of time spent by the student nurse in many wards; (iii) the lack of trained staff in the wards. These three factors combined lead the sisters and charge nurses to feel that patients are not receiving as much skilled nursing care as they should have, and that the teaching of the student nurse, the creation of good relationships, and the efficient management of the ward all suffer because the leader of the team is under too great a pressure to use her skill to its full advantage. The first and second of these three factors may well contribute substantially to the third, namely the shortage of trained staff in hospital wards.

Some effort is being made to relieve this pressure on the sister and charge nurse; for instance, by the introduction of

ward clerks and clinical instructors, the opening of five-day wards, the provision of a seven-day service by the clerical staff and the supply of certain items to the wards on the topping-up system, without requisition from the sister or charge nurse; but it would seem that experiment must proceed at a quicker rate if nurses are to be prevented from leaving hospital work because they are not allowed to nurse.

None of these six courses could have been held without the valuable help and support given to the College by many colleagues in the health service—some by lecturing at the College and others by arranging for practical experience in the hospitals, to all of whom grateful thanks are due.

SCHOOL OF HOSPITAL CATERING

The tenth anniversary of the School occurred during the year and the occasion was marked by a dinner at which the guest of honour was the Parliamentary Secretary to the Ministry of Health, Miss Edith Pitt. The first students were admitted on the 3rd September, 1951, and since then nearly 2,000 students have attended regular courses and 1,700 have been to one-day sessions in catering subjects. Some idea of the demand for training and the consequent growth of the School's work is to be found in the variety of courses held; last year fifteen different courses were run, compared with three when the school opened.

During 1961 major revisions to the cookery courses were introduced and these have proved acceptable to hospitals. There are now four grades of cookery courses providing progressive stages in training, and although the number of courses in the year remains at seven, the new syllabuses provide for an additional four weeks' training. The first course in Catering Administration for assistant catering officers was fully booked and appeared to meet a definite need.

Altogether one hundred and seventy-six students attended courses during the year and one hundred and twenty-three came to one-day catering sessions.

TRAINEE CATERING OFFICERS' COURSE

The second of the seven-month courses for trainees seconded from hospitals commenced in March and, as previously, the co-operation of the Nuffield Provincial Hospitals Trust made it possible for a number of hospitals outside London to second members of their catering staff for this course, which now lasts 30 weeks. During the course each student spends nineteen weeks in three different hospitals, the remainder of the time being passed at the School. Once again the Fund is indebted to the twenty-four hospitals who took the students on this course. All the students completed their training successfully and subsequently found suitable posts, mainly as assistant catering officers.

In view of the great difficulty experienced by many London hospitals in finding suitable catering officers, it is disappointing that this particular course has not received better support from hospitals in London.

COOKERY COURSES

Fifty-five students attended the seven cookery courses; the two new courses in Advanced Cookery and Kitchen Management being in great demand. During the year a start was made to assess the suitability of applicants for particular courses and to allocate vacancies strictly in accordance with this assessment. This attempt at grading is beginning to produce results and a higher standard is now being achieved by a larger percentage of students on each course.

REFRESHER COURSES

Four refresher courses were held and were attended by fifteen catering officers, twenty-three head chefs and fourteen

dining-room supervisors. The syllabuses for catering officers and head chefs have been considerably revised to meet changing needs; minor changes have also been made in the course for dining-room supervisors for which there is still a long waiting list.

SPECIAL COURSES

Fifty-seven students attended the five special courses which included the new course in Catering Administration, the usual courses in Staff Management and Nutrition for Catering Officers (for which the demand remains constant), the courses for National Trainees from the Hospital Administrative Staff College and the Year's course from the Staff College for Matrons.

NURSE CATERERS

For some time the School has been concerned about nurse caterers in the smaller hospitals for whom little opportunity for training or discussion exists, in spite of the fact that they are numerically the largest group of caterers in hospitals. Early in the year, in co-operation with the nursing and catering officers of the South East Metropolitan Regional Hospital Board, a symposium on "Catering in Small Hospitals" was held at the School, under the chairmanship of Dame Ruth Buckley. The audience, which consisted of some forty nurse caterers from the region, discussed in detail many of the problems besetting the small caterer and it is proposed to repeat this successful venture next year for other nurse caterers in that region.

As a result of this meeting, the School was encouraged to go ahead with plans to introduce a special course for the nurse caterer and an eight day pilot course has been included in the 1962 programme, as well as the further symposium mentioned above. This longer course is intended as a step towards basic training for this class of caterer. There are many advantages in bringing together all nurse caterers from one region and it is suggested that other boards may find it useful to hold such meetings from time to time.

OTHER ACTIVITIES

Special one-day courses were arranged for students from a technical school for girls, the Royal College of Nursing and members of courses at the other colleges of the Fund. Greater use was also made of the School as a centre for meetings and discussions in connection with hospital catering, groups of caterers and dietitians. The members of the 1951 Club (which consists of former members of the School's certificate course) used the School on a number of evenings for social and discussion purposes. While such meetings have many advantages for caterers and dietitians, the School also benefits from the opportunity to keep in touch with the current requirements and opinions of caterers from many individual hospitals.

PERSONAL

At the July meeting of the General Council, His Royal Highness The President referred to the departure from the active work of the Fund of two of its most distinguished members, Sir Ernest Pooley and Sir Archibald Gray. "Sir Ernest", he said, "has worked for the Fund since 1928 when he first became a Visitor. He was an Honorary Secretary from 1935 to 1948 and from then until 1956 Chairman of the Management Committee. Throughout his service with the Fund Sir Ernest has been renowned for his economy of speech, great firmness and wonderful benevolence, and his wise counsel will be sadly missed.

"Sir Archibald has served since 1936 and has been of great assistance on many Committees. Perhaps his most important work was to steer the Distribution Committee through the difficult years from 1949 to 1959, for which we must always be grateful to him. The great work that these two men have done made me think of the succession of such men, going right back to Lord Lister and King Edward VII himself, who by their devotion and unselfishness have brought the Fund to the great position it now holds."

FINANCE

Such success as the King's Fund has attained in the metropolitan hospital world has been due at least in part to its financial capacity for sustained effort. There have been no large fluctuations, but indeed a steady increase, in the volume of assistance given either directly through grants or indirectly through the maintenance of the three Staff Colleges and the Catering School, of which full advantage is being taken by the hospitals.

Since the Fund was founded in 1897, it has been gradually expanded by further subscriptions, a steady flow of legacies, and a consistent policy regarding its finances to a point where its capital resources total some £9,500,000 with an income of around £525,000 per annum. During this period the Fund's total expenditure in the aid and support of the hospitals has amounted to over £18,000,000, of which some £16,000,000 has taken the form of grants and the remainder, largely in the last ten years, used for the maintenance of its staff colleges and other activities.

Her Majesty The Queen, Patron of the Fund, and other members of the Royal Family, continue to give it their consistent and generous support, as do many distinguished individuals and institutions. In the year 1961 the Fund received the final contribution from the Nuffield Trust for the Special Areas. Over the last seventeen years benefactions from this source have totalled £1,900,000. This makes the Trust by far the largest supporter in the history of the King's Fund, and all connected with the Fund are most sincerely grateful to Lord Nuffield and the Trustees.

There is still a strong tradition in this country that hospitals are among the most deserving of destinations for a legacy, and many have felt, with the advent of the health service, that the King's Fund makes a very strong appeal in this respect. Legacies to the Fund are usually treated as accretions to capital and can therefore be regarded as of enduring benefit to hospital patients in years to come.

From the Accounts at the end of this Report it will be seen that for the year 1961 income amounted to £525,588, together with legacies at £18,913, while expenditure amounted to £511,875.

FINANCIAL STATEMENTS

AND

LIST OF GRANTS

The Fund is fortunate in possessing substantial capital resources amounting to between nine and ten million pounds. This great asset it owes largely to the firm determination of King Edward VII fifty years ago to build up a permanent fund. Many large estates have been left to the Fund as residuary legatee and trustee on behalf of the hospitals of London, in confidence that the income would be wisely administered and used in those directions in which it would be of the utmost benefit to the hospitals. Its finances are managed by the Treasurer and Finance Committee, which has always included the Governor of the Bank of England and others well-known in the banking world.

The subscription list is headed by Her Majesty The Queen, followed by many other members of the Royal Family. It includes, too, many of the City Companies, Banks and commercial houses, besides personal subscriptions.

KING EDWARD'S HOSPI

BALANCE SHEET as at

	£	£	£
Fund Accounts:			
Funds to be retained as Capital:			
As at 31st December, 1960	2,184,548		
Add: Receipts during 1961	34,557		
		2,219,105	
General Funds:			
As at 31st December, 1960	4,892,692		
Add: Grant lapsed	25,000		
,, Proceeds of the sale of Radium	6,320		
,, Amount transferred from:			
Income and Expenditure Account	13,713		
Special Receipts Account	28,835		
		4,966,560	
Special Funds:			
per Schedule		24,193	
			7,209,858
Grants Retained (awaiting appropriate time for payment):			
Hospitals and Convalescent Homes		409,203	
Development Committee projects		24,872	
Amount appropriated from Nuffield Trust for the Special Areas		90,000	
Amounts received for allocation to Homes for Aged Sick		6	
,, (Special Legacy)		80	
			524,161
Liabilities:			
Administration and Other Expenses			21,561
Suspense Accounts (Leasehold Properties):			
Amount received for dilapidations		540	
Sinking Fund Appropriations		10,432	
			10,972
			£7,766,552

REPORT OF THE AUDITORS TO KING

We have obtained all the information and explanations which to the best of our proper books of account have been kept by the Fund so far as appears from our annexed Income and Expenditure Account which are in agreement with the books of explanations given us the Balance Sheet gives a true and fair view of the state of the Account gives a true and fair view of the excess of ordinary income over expenditure for

5, London Wall Buildings,
London, E.C.2.
22nd May, 1962

TAL FUND FOR LONDON

31st DECEMBER, 1961

	£	£	£
SECURITIES AND INVESTMENTS:			
STOCKS AND SHARES, etc., held for:—			
Capital Account	2,676,220		
Less Realised net profits	500,391		
		2,175,829	
General Account	3,479,936		
Add Realised net losses	181,608		
		3,661,544	
		5,837,373	
INVESTED GIFT of his late Majesty, King George V, to be retained as Capital		20,000	
		5,857,373	
Special Account		24,090	
		5,881,463	
Valuation of Investments			
Quoted Investments at Market Value	7,441,135		
Unquoted Investments at Treasurer's Valuation	200,201		
	£7,641,336		
FREEHOLD AND LEASEHOLD PROPERTIES, GROUND RENTS AND MORTGAGES	1,689,422		
Less Realised profits	775,928	913,494	
REVERSIONARY INTERESTS, taken for book-keeping purposes at a nominal value of		1	6,794,958

Assets received or acquired before 31st July, 1908, are taken at or under values adjusted as at that date, in accordance with the terms of King Edward's Hospital Fund for London Act, 1907. Assets received or acquired since that date are included at or under the market value at the date of gift or purchase.

CURRENT ASSETS (including £103 for Special Accounts):		
Balances at Banks and Cash in hand	160,792	
Term Deposits maturing by April, 1962	750,000	
Debtors (including interest-free unsecured loans to Homes for Aged Sick, amounting to £6,400)	60,802	971,594
		£7,766,552

NOTES:—

(a) *The King's Fund also owns a stock of Radium which is lent by the Fund to a hospital in London.*

(b) *The total cost of properties for Staff Colleges and Homes for Aged Sick is £557,569. Of this amount £547,042 and the cost of furniture and equipment owned by the Fund has been written off to Income and Expenditure Account or to Special Appropriation Fund as and when such expenditure has been incurred.*

(c) *In some cases, legacies are subject to indemnities given to refund the sum if any, required to meet the liabilities of Executors.*

ASHBURTON, *Treasurer*

EDWARD'S HOSPITAL FUND FOR LONDON.

knowledge and belief were necessary for the purposes of our audit. In our opinion examination of those books. We have examined the above Balance Sheet and the account. In our opinion and to the best of our information and according to the Fund's affairs as at the 31st December, 1961, and the Income and Expenditure the year ended on that date.

DELOITTE, PLENDER GRIFFITHS & CO.,
Chartered Accountants.

INCOME AND EXPENDITURE ACCOUNT FOR

	£	£	£
GRANTS made 1961		305,887	
Less: Amount brought forward from 1960	357		
Balance of Grants made 1960 now lapsed ...	5,530	5,887	300,000
EXPENDITURE ON SPECIAL SERVICES, ETC.:			
Division of Hospital Facilities		16,300	
Nursing Recruitment Service	11,163		
Capital Expenditure	547	11,710	
Staff College for Ward Sisters	11,638		
Capital Expenditure (including £14,005 on new premises)	14,161	25,799	
Staff College for Matrons	9,471		
Capital Expenditure	1,507	10,978	
Catering Advisory Service		8,796	
School of Hospital Catering		13,291	
Hospital Administrative Staff College	55,771		
Capital Expenditure	3,339	59,110	
Hospital Personal Aid Service	11,469		
Less: Amount contributed by the Metropolitan Regional Hospital Boards	2,000		
		9,469	155,453
EMERGENCY BED SERVICE:			
Proportion of Cost to be defrayed by the Fund, as agreed with the Metropolitan Regional Hospital Boards			6,500
ADMINISTRATION EXPENSES:			
Salaries, Pensions, Allowances, and Superannuation Contributions		32,933	
Establishment, including Rent, Rates, Heating and Lighting, Cleaning, Insurance, etc.		3,846	
Printing and Stationery, Telephone and Postage		2,579	
Sundry Miscellaneous Expenses		3,640	
			42,998
OTHER EXPENSES:			
Office Furniture and Equipment		160	
Legal and Other Professional Fees		4,416	
Visiting Expenses		871	
Publications: Cost less Sales		702	6,149
APPROPRIATION to Leasehold Sinking Fund			775
			511,875
TRANSFER TO GENERAL FUND:			
Excess of Ordinary Income over Expenditure			13,713
			£525,588

THE YEAR ENDED 31st DECEMBER, 1961

	£	£
INCOME from:		
Securities and Investments	410,246	
Freehold and Leasehold Properties	106,030	
		516,276
SUBSCRIPTIONS:		
Annual	3,546	
Under Deeds of Covenant for a stated number of years	3,144	
	6,690	
DONATIONS:		
Annual and other	2,622	
		9,312
		£525,588

SPECIAL RECEIPTS

	£
SPECIAL APPROPRIATION from General Legacies	78
,, Nuffield Trust	90,000
TRANSFER TO GENERAL FUND:	
Balance of Special Receipts	28,835
	£118,913

SPECIAL FUNDS 31st DECEMBER, 1961

	£	£	£
SPECIAL ANONYMOUS TRUST (1930):			
CAPITAL ACCOUNT		20,000	
INCOME ACCOUNT:	£		
Balance at 31st December, 1960	1		
Add: Income 1961	679		
	680		
Less: Payments made o/a building	679		
		1	
			20,001
MRS. L. L. LAYBORN TRUST (1943):			
CAPITAL ACCOUNT		4,090	
INCOME ACCOUNT:			
Balance at 31st December, 1960	37		
Receipts during 1961	185		
	222		
Less: Paid to St. Luke's Nursing Home for the Clergy	150		
		72	
			4,162
J. R. CATLIN, DECEASED, TRUST:			
Balance at 31st December, 1960		29	
Add: Receipts during 1961		1	
			30
			£24,193

NOTE:

The Special Funds are represented by assets maintained in separate designated accounts made up as follows:

Investments	24,090
Debtors and Balances at Banks	103
	£24,193

DURING 1961

	£
GENERAL LEGACIES—per Schedule	18,913
NUFFIELD TRUST FOR THE SPECIAL AREAS	100,000
	£118,913

RECEIPTS FROM LEGACIES IN 1961

	£
GENERAL:	
Mrs. Ethel Kate Burnege	148
Mrs. Emily Burrows	66
Robert Cooper Drury	535
Mrs. Annie Elizabeth Emerson	700
Llewellyn Wolseley James	10
Mrs. Emma Jane Jay	7,750
Miss Edith Agnes MacGillivray	250
Robert Palgrave Page	644
William Vautier Paterson	250
Ronald Edwin Prodgers	10
Miss Elizabeth Robins	124
Frank Samuel	7,659
Alexander Carmichael Stewart	875
	19,021
Less: Amount payable to legatee under Will of Mrs. Gertrude Ellen Crosse	108
	£18,913
CAPITAL:	
Henry William Marshall	£34,557

	£
Athol House, Dulwich	
Establishment of home	1,000
Banstead H.M.C.	
Banstead Hospital—Patients' social centre ..	18,000
Barnet H.M.C.	
Barnet General Hospital—Recreation hall ..	8,000
Battersea and Putney H.M.C.	
St. John's Hospital—Equipping day room as hairdressing salon	850
Bermondsey and Southwark H.M.C.	
New Cross Hospital, St. Olaves' Hospital —Improvement to gardens	997
St. Olave's Hospital—Improvement of nurses' home	2,000
Bexley H.M.C.	
Bexley Hospital—Garden improvements	245
Patients' recreation centre ..	7,000
Botleys Park H.M.C.	
Botleys Park Hospital—Further grant for staff social centre	1,000
Camberwell H.M.C.	
St. Giles' Hospital—Further grant towards recreation hall	1,100
Cane Hill H.M.C.	
Cane Hill Hospital—Staff club house	6,000
Catharine House for Gentlewomen, St. Leonards	
Fire precautions	258
Repainting exterior woodwork	329
Central H.M.C.	
Metropolitan Hospital—Upgrading of catering department	5,500
Central Middlesex H.M.C.	
Willesden General Hospital—Recreation hall ..	1,000
Chelsea and Kensington H.M.C.	
Princess Beatrice Hospital—Temporary building for staff rest rooms	1,500
Croydon H.M.C.	
Croydon General Hospital—Layout of garden for sisters' home	450

	£
Darenth and Stone H.M.C.	
Darenth Park Hospital—Staff social club and sports pavilion	12,000
Day Centre and Club for Old People, Kensington	
Establishment of centre	4,000
Delves House Trust, Kensington	
Oilfiring	1,300
Dominican Convent, Kelvedon	
Extension	3,500
Edith Priday Home, Blackheath	
Lift and decorations	830
Edmonton H.M.C.	
North Middlesex Hospital—Chapel	3,000
Epsom H.M.C.	
Epsom District Hospital—Non-resident staff canteen	7,000
Fallowfield Halfway Home, Chislehurst	
Structural improvements	234
Florence Nightingale Hospital—Kitchen improvements..	3,500
Fountain and Carshalton H.M.C.	
Queen Mary Hospital—Further grant towards sports pavilion	800
The Gables Halfway Home, Blackheath	
Kitchen equipment	491
Hackney H.M.C.	
Mothers' Hospital—Repairs to nurses' tennis court	250
Harefield and Northwood H.M.C.	
Mount Vernon Hospital—Library..	2,000
Harefield Hospital—Canteen and rest room ..	3,000
Hermitage Convalescent Home, Hastings	
Furnishings	200
Hertfordshire Seaside Convalescent Home, St. Leonards	
Rewiring and decorations	1,700
Holloway Sanatorium	
Improvements of two former airing courts ..	900
Hornsey Darby and Joan Club	
Kitchen improvements and new dining room ..	2,000

	£
Invalid Children's Aid Association	
Banstead Home—Equipment	2,500
Brentwood School—Special equipment and wiring	250
John Horniman School—Special equipment ..	30
Meath School—Special equipment	50
John Howard Convalescent Home, Brighton	
Equipment and furnishings	750
Rewiring	800
Kingston H.M.C.	
Kingston Hospital—Doctors' centre	5,000
Leavesden H.M.C.	
Leavesden Hospital—Expansion of industrial training unit	35,000
Leybourne Grange H.M.C.	
Leybourne Grange Hospital—Sports pavilion ..	9,000
Leytonstone H.M.C.	
Whipps Cross Hospital—Further grant towards recreation hall	2,000
Limpsfield Convalescent Home for Women	
Central heating	800
Maitland House, Frinton-on-Sea	
Equipment	95
Fire precautions and bathroom	600
Marie Curie Memorial Foundation	
Harestone, Caterham—New staff quarters ..	5,000
Marillac Hospital, Warley	
Alteration and extension of new building	2,500
Mental After Care Association	
Adapting and equipping hostel at Croydon for discharged mental patients	3,000
Mildmay Convalescent Home, Worthing	
Fire escapes	424
National Heart Hospital—Improvements to nurses' home	5,000
National Hospital for Nervous Diseases—Improvement to staff dining rooms	2,500
Northern H.M.C.	
Highlands General Hospital—Garden improvements	2,000
Royal Northern Hospital—Equipment for central dining room	5,500

	£
Paddington H.M.C.	
Paddington General Hospital—Upgrading of ward	900
Princess Mary's Hospital, Cliftonville	
Physiotherapy equipment	1,167
Rame Halfway Home, Tooting	
Minor improvements	128
Roseacre Home, Banstead—Sick Bay	1,500
Royal Earlswood H.M.C.	
Royal Earlswood Hospital—Staff canteen and recreation centre	17,000
Royal Hospital and Home for Incurables, Putney	
Rewiring and new lift	5,000
Runwell H.M.C.	
Runwell Hospital—Further grant for sports pavilion and club house	1,000
St. Andrew's Hospital, Dollis Hill—Autoclave	1,000
St. Bernard's Convalescent Home for Gentlewomen, Hove	
Renewal of boundary fence	200
St. Cecilia's Home, Bromley	
Equipment	207
St. Dominic's Open Air School for Boys, Godalming	
New boilers and improvements to central heating	500
St. Michael's Convalescent Home, Westgate-on-Sea	
Alterations and repairs	1,000
St. Peter's Home, South Lambeth	
Rebuilding of balcony	750
St. Teresa's, Dockenfield near Farnham	
Equipment for domestic science classroom ..	715
St. Teresa's Maternity Hospital—Kitchen improvements	1,500
Samuel Lewis Seaside Convalescent Home	
Oilfiring	500
Schiff Home of Recovery, Cobham	
New entrance	500
Shenley H.M.C.	
Shenley Hospital—Service counter in ward dining room	1,800
South West Middlesex H.M.C.	
West Middlesex Hospital—Library	4,850

	£
Spelthorne St. Mary, Thorpe	
Modernization of kitchen premises	1,500
Staines H.M.C.	
Normansfield—New building for children's school	5,000
Stuart House, Hampstead	
Sick bay	5,000
Surrey Convalescent Home for Men, Seaford	
Modernization of pantry	300
Thomas Banting Memorial Home, Worthing	
Refrigerator	99
Victorian Convalescent Home, Bognor Regis	
Oilfiring	400
Lift	500
Warlingham Park H.M.C.	
Warlingham Hospital—Bowling green	1,800
West Park H.M.C.	
West Park Hospital—Patients' social centre ..	20,500
Westminster Hospital—Non-resident staff changing rooms	3,400
White House Convalescent Home, Bexhill	
House repairs	250
Windsor H.M.C.	
Church Hill House Hospital—Further grant for industrial occupational therapy unit	2,500
Woolwich H.M.C.	
Memorial Hospital—Sluicing machine	800
Brook General Hospital } —Improvement for	
St. Nicholas Hospital } medical staff quarters	4,500
Central Council for District Nursing in London:	
Expenses of Central Office and District Associations	5,000
Council for Music in Hospitals	250
Elderly Invalids' Fund	1,000
Expenses of Convalescent Homes Conference	233
Maintenance grants to Convalescent Homes	2,550
National League of Hospital Friends	600
Enquiry into out-patient department at Guy's Hospital	8,000
Enquiry into relationship of general practitioners to hospitals	1,500

	£
Enquiry into training of supervisors of manual staff ..	2,750
Enquiry into role of the hospital chaplain	4,316
Sundry minor grants	255
Catering Advisory Service:	
Experiments with:—	
Detergent dispensers	960
Plastic sinks	100
Food trolleys to provide choice of menu for patients	1,500
Division of Hospital Facilities:	
Experiments with:—	
Plastic Foam mattresses	440
Background music	393
Laundry packaging	500
Control of cross infection	1,303
Overhead outdoor heating	1,500
Wireless calls system	450

The following have received token grants of 50 guineas as an expression of the Fund's appreciation of their work:—

Catholic Nursing Institute
Florence Nightingale Hospital
French Hospital
Hospital of St. John and St. Elizabeth
Italian Hospital
King Edward VII's Hospital for Officers
Manor House Hospital
New Victoria Hospital, Kingston
Royal Masonic Hospital
St. Andrew's Hospital, Dollis Hill
St. Anthony's Hospital, Cheam
St. Luke's Nursing Home for the Clergy
St. Saviour's Hospital
St. Teresa's Maternity Hospital
St. Vincent's Orthopaedic Hospital

788

£305,887

CONSTITUTION, COUNCIL AND COMMITTEES

The Governing Body under the Act (7 Edw. 7, Ch. lxx) consists of the President and General Council. The work of the Fund is carried on under the General Council and by the standing Committees and Staff as set out in the following pages.

The Fund is empowered to obtain from public benevolence by means of subscription, donation, bequest or otherwise "a continuance of the Fund," and to apply the capital and income of the funds and property of the Corporation or any part thereof "in or towards the support, benefit or extension of the hospitals of London or some or any of them (whether for the general or any special purposes of such hospitals) and to do all such things as may be incidental or conducive to the attainment of the foregoing objects."

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TREASURER:
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THE SPEAKER OF THE HOUSE OF COMMONS

THE BISHOP OF LONDON

CARDINAL GODFREY

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THE CHIEF RABBI

THE RT. HON. THE LORD MAYOR

THE RT. HON. THE CHAIRMAN OF THE LONDON COUNTY COUNCIL

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PUBLICATIONS

HOSPITAL ADMINISTRATION

Report on Costing Investigation for the Ministry of Health, 1952. This Report contains a Statement of Principles, together with worked examples, of a Departmental System of Accounting for Hospitals. 7*s. post free.*

Hospital Administrative Staff College. Pamphlet entitled *The Career of Hospital Administration*, intended to provide information about the hospital service for those who may be desirous of taking up hospital administration as a career.

Hospital Bed Occupancy, 1954. Report of a study group at the Hospital Administrative Staff College on the problems relating to hospital bed occupancy. Obtainable from the Hospital Administrative Staff College, 2*s. post free.*

An Interim Report on the Cleansing and Sterilization of Hospital Blankets, 1959. This Report presents available information together with an assessment of the subject of the cleansing and sterilization of hospital blankets of various materials. 59 pp. and tables. 2*s. post free.*

Noise Control in Hospitals, 1958. A report of an enquiry into noise in hospital wards together with suggestions for its control. 1*s. post free.*

Noise Control in Hospitals, 1960. A report of a follow-up enquiry. 1*s. post free.*

Films for Hospitals. A report of an enquiry into the provision of filmshows for the entertainment of patients and for the instruction of staff. 45 pp. 1*s. post free.*

Floor Seals in Hospital Wards. A report of a study on the use of floor seals on wood block floors in hospital wards. Reprint of an article published in "The Hospital" in February, 1961. *Free.*

Hospital Corridor Flooring. A report of trials of different flooring materials for use in hospital corridors. Reprint of an article published in "The Hospital" in November, 1961. *Free.*

NURSING

Memorandum on the Supervision of Nurses' Health, Second Edition, 1950. Recommendations for the establishment of a minimum standard of health care for nursing staff, including such matters as regular medical examination, health records, living conditions, care of sick nurses, and the prevention of tuberculosis and other infections. 3*d. post free.* (*Third Edition printing*)

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Hospital Library Services. A pilot survey carried out by an independent Committee sponsored by the King's Fund, 1959. 2*s.* 6*d. post free.*

HOSPITAL CATERING

Third Memorandum on Hospital Diet, 1959. *2s. post free.*

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Memorandum on Special Diets (revised edition 1960): with an introduction on the nutritional value of hospital dietary. *2s. post free.*

General Hospital Diets: a guide to the cost of feeding patients, with menus and recipes (third edition December, 1959). *2s. post free.*

Catering Circulars. From time to time circulars on hospital catering and diet are published by the Fund's Hospital Catering Advisory Service. At present the following circulars are available:

Care of Equipment	*2s post free*
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School of Hospital Catering at St Pancras Hospital. Prospectus—Outline of the different courses offered by the School, conditions of entry, etc. *Free.*

Shortage of Dietitians. A report by a Sub-committee set up in 1957, together with a joint report by the Ministry of Health and the King's Fund on the work of therapeutic dietitions, 1960. *2s. post free.*

CONVALESCENT HOMES

Directory of Convalescent Homes, 1962. A directory containing details of nearly 200 convalescent homes, both National Health Service and Independent, accepting patients from the four metropolitan hospital regions is published annually. The information is all that is normally required and includes types of patient accepted, treatments, diets, charges and daily routine. There is an easy-reference index. 7*s.* 6*d. post free.*

Recovery Homes, 1954. A report of an enquiry into the working of recovery homes and their value to the hospital service. 1*s. post free.*

Notes on Diets for Old People, 1956. 1*s. post free.*

MISCELLANEOUS

Manual for Hospital Visitors, 1960. 2*s. post free.*

Time-table of Out-patient Clinics at Hospitals in the Greater London Area, January, 1962. 1*s. post free.* (*Free to general practitioners*).

Map of Hospitals and Convalescent Homes in the Metropolitan Police District, revised edition 1954, with booklet giving details of each hospital. 12*s.* 6*d. post free.*

Map of Hospitals and Convalescent Homes in N.E. and N.W. Metropolitan Hospital Regions—showing Teaching and Regional Board hospitals, sanatoria, convalescent homes, etc.; also disclaimed hospitals and voluntary convalescent homes, but excluding those shown on the Metropolitan Police District Map. With descriptive booklet. 15*s. post free.*

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