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REPORTS

KFC 81/205

DEVELOPMENT OF THE
LONDON PROGRAMME
1979 – 1981

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King Edward's Hospital Fund for London is an independent charity founded in 1897 and incorporated by Act of Parliament. It seeks to encourage good practice and innovation in health care through research, experiment, education and direct grants.

The King's Fund Centre was established in 1963 to provide an information service and a forum for discussion of hospital problems and for the advancement of inquiry, experiment and the formation of new ideas. The Centre now has a broader interest in problems of health and related social care and its permanent accommodation in Camden Town has excellent facilities for conferences and meetings.

Development of the London Programme 1979-81

The King's Fund London Programme was launched in 1979 to develop activities in relation to health care in London. The Programme is guided by the London Project Executive Committee (LPEC) and its broad aim is to identify, encourage and disseminate good practice in inner city areas through a coordinated programme of research projects, conferences, workshops, seminars, publications and other enterprises. The main focus of London Programme initiatives is primary health care services in the capital and their interrelationship with hospital services. A number of priorities have been identified by the LPEC to guide their work and these are reflected in the themes of conferences, projects and publications which have been supported to date:-

- Improving the relationship between primary and secondary care
- Accident and emergency services
- Community hospitals in the inner city
- Information about London's needs and services
- Rationalisation of specialist services in London

Within these priority areas, the LPEC has agreed to give special attention to projects which focus on groups within London's population that are particularly disadvantaged with respect to health care.

At the beginning of 1981, Professor Brian Abel-Smith became chairman of the LPEC, replacing Sir Francis Avery Jones, who had played a major role in establishing and guiding the Committee's early work. There were also changes in the membership of the committee during the year and a list of members is shown in Appendix 1. Two founder members of the Committee, Sir Francis Avery Jones and Ruth Levitt, resigned and three new members, Joan Clague, Christine Farrell and Brian Jarman joined the group. Pat Gordon, as part-time project officer, supported and developed London Programme initiatives until June 1981, when she left to have her second child. Jane Hughes was appointed as full-time project officer to take over from Pat and continue the work she had begun.

The activities undertaken as part of the London Programme from 1979 to 1981 are described here under five headings which have formed the main themes of this work. The projects referred to in the text are listed in Appendix 11.

Primary Health Care in Inner London

In 1980 and 1981 the LPEC worked closely with the Primary Health Care Study Group (chaired by Professor E D Acheson), established by the London Health Planning Consortium. Involvement with this major investigation into the organisation and delivery of primary health care in the capital has influenced London Programme activities. To assist the work of the Study Group, a one-day seminar was held at the Centre on 13th November 1980 to discuss the relationship between primary and secondary care. This seminar brought together members of the Study Group and people who had rethought traditional referral patterns and had experimented with innovative ways of providing services. The LPEC also funded a study of Accident and Emergency Department attendances in London, to provide comparative information for the Study Group and evidence on whether Accident and Emergency Departments were substituting for care by general practitioners (LPE80/22).

The Study Group's Report 'Primary Health Care in Inner London' was published in May 1981 ⁽¹⁾ and a conference was held at the Centre on 22nd September to consider the implications of the report and the way in which its recommendations might be implemented ⁽²⁾. This was the first public debate on the Acheson Report and its importance was clear from the large numbers of applications received. The participants included a wide range of professionals providing primary health care in inner London, as well as academics and social services and DHSS representatives. Further conferences and seminars are planned for 1982 to continue debate about the issues raised by the report and to discuss progress on implementing the Study Group's recommendations.

Two reports which were presented as evidence to the Study Group have been published by the Royal College of General Practitioners (RCGP) with support from the LPEC (LPE 80/17a and LPE 81/18) ^(3,4). Other projects supported as part of the London Programme which aim to improve the quality of primary health care in London include a series of educational workshops for GPs at King's (MAN. 9154); the development of primary health care teamwork in Thamesmead (LPE 81/7d); a study to evaluate computerised general practice records in an inner London practice (PRO 80/44a); and an initiative by the Medical Architecture Research Unit to demonstrate what can be achieved by upgrading, converting or renovating general practice

premises in the inner city. This project will also provide an advisory service for GPs wanting to improve their premises (LPE/81/46).

The initiatives described in this section represent growing interest in primary health care in London and increasing King's Fund involvement with those who are trying to improve primary care services in the capital. It is hoped to build on the work described here and extend it over the next few years. It will be particularly important to sustain attention to and continue debate on the Acheson Report, as well as facilitating and monitoring the implementation of its recommendations. With these objectives in mind, contact is being maintained with the DHSS and links established with those concerned with primary health care planning at Regional level, as well as with key personnel in FPCs and the new DHAs.

Community Development and Health

This area of interest developed from a joint initiative by the Fund's Planning and Long Term Care Teams on 'Collaboration in Community Care'. A workshop held at the Centre in May 1980 ⁽⁵⁾, based on Helen Rosenthal's study of community health projects, brought together professionals and those involved in local projects to share the experiences gained from neighbourhood health initiatives in London. Two local projects adopting a 'community development' approach to health issues have subsequently been supported as part of the London Programme. The Health Audit Project (PRO 80/50) was based on work with local community groups in the Paddington area. Its aim was to generate discussion and increase awareness about the environment in which we live and its effects on our health. The project included production of a tape-slide programme for use by community and other groups to stimulate and focus discussion on health issues. The Stockwell Health Project (LPE 80/6b), based at the Lady Margaret Hall Settlement, is an initiative with a similar philosophy of increasing awareness about health and health services by working through already established links with the local community. An initial focus and impetus for this project was community participation in planning a health centre.

In recent years an increasing number of community and voluntary groups have become interested and involved in local health and health care issues. It was clear from the workshop held at the Centre that some kind of infrastructure was needed to support these local initiatives

if they were to survive and flourish. To this end, the LPEC funded the community work service of the London Voluntary Service Council to establish the 'London Community Health Resource' to develop a network to provide information for community health workers and to organise meetings and courses (LPE 80/20).

In the near future, it may be appropriate to take stock of what has been achieved by these projects and reassess the Fund's role in relation to them. Through links with the Resource and directly with neighbourhood projects, the question of evaluation of community development initiatives is actively being explored, with a view to holding a seminar on this topic.

Long Term and Community Care

The improvement of community-based services for particular care groups in London is an area of growing interest and importance for the LPEC, especially in relation to care of the elderly and the mentally ill. A number of projects in these fields have been supported and, as the London Programme develops, it will be essential to integrate these aspects of its work with the broader concerns of the Long Term and Community Care Team. Officers from both teams are currently jointly organising a conference on planning health services for the elderly in London, to be held at the Centre in May 1982.

Mental health projects supported by the LPEC which are currently in progress include the evaluation of a voluntary-based community mental health project in Camden and Islington, involving MIND and the Tavistock Institute (LPE 80/23); and part-funding of an information officer post at COPE to support and coordinate the preventive mental health work of the organisation's 'family groups' (LPE 81/33).

Projects concerned with the elderly include a joint venture by a number of organisations to support the local development of more effective approaches to meeting the needs of the frail elderly in London (LPE 81/15) and supplementary support for a study to evaluate elderly client assessment procedures prior to placement in NHS or local authority residential care (LPE 81/50).

Community Hospitals and the Inner City

The large number of small hospitals in London scheduled for closure or change of use has led to greater consideration being given to their potential roles as GP, community or supporting hospitals. A small meeting was held at the Centre in April 1981 to bring together those known to the Fund who were involved with such developments in London in order to exchange experiences and ideas. As a result of this meeting the LPEC has maintained close links with the St Mary's GP community hospital trial scheme and has contributed towards the evaluation of this project (LPE 81/45). The development of GP and community hospitals could have an important impact on both hospital and primary health care services in London. Further workshops are planned to explore in more detail the urban community hospital concept.

Information about London's Needs and Services

In their earliest discussions, members of the LPEC recognised the need to bring together information about London's health services to overcome the segmentation of the capital by the administrative boundaries of the four Thames RHAs. This division both restricts the flow of information between districts which may be facing similar problems of service provision and makes it difficult to determine patterns of need for health care and availability of services in London as a whole.

One of the aims of the London Programme is to establish networks between districts to facilitate the flow of ideas and information about new initiatives to overcome the complex problems unique to London. The LPEC has discussed the need for a 'London Profile', a document which would bring together information already available from disparate sources about London's population and its health and the characteristics of the health services provided in the capital. The possibilities and potential of compiling this information in visually attractive and readily understandable form is being explored.

Two London Programme projects which began in 1981 address important and fundamental questions about the need for health care in London and current methods of resource allocation. One study (LPE 80/21) will compare the need for health care in inner London and Essex by collecting information about use of health services. It is hoped that this study will eventually lead to more sensitive methods of allocating NHS funds, according to the needs of the population. The other study (LPE 81/16),

is based in the South West Thames Region and will investigate the problems, criteria, information needs and decision-making processes affecting sub-regional resource allocation. The aim is to help authorities make better decisions concerning the allocation of scarce resources to services which benefit patients.

The Fund also supported other initiatives which took a rather different approach to disseminating information about London's needs and improving its health services. A series of 2-day seminars for members of health authorities in the four Thames Regions was held at the Centre and run in conjunction with the School for Advanced Urban Studies (SAUS) at the University of Bristol (PRO 80/9). The King's Fund College is continuing collaboration with SAUS in similar ventures for DHA members and chairmen. Anthropological perspectives on London's health care problems were explored at a workshop held at the Centre in November 1981 ⁽⁶⁾. This event was organised to bring together health service personnel from inner London and a group of social anthropologists currently investigating aspects of city-centre problems in London and other European cities. The workshop was a valuable educational experience for both groups of participants and resulted in a better understanding of the ways in which ideas and information from anthropological research might be incorporated into health service planning, as well as identification of some issues around which future collaboration might take place.

Prospects for the future

The activities undertaken as part of the London Programme to date show that by opening up debate about specific issues and by funding innovative projects, a significant contribution can be made to tackling some of the major problems of providing health care in London. Some indications have already been given about how particular aspects of this work will be developed in the future and of the directions in which the London Programme may expand. Sustained attention will continue to be given to improving primary health care in inner London, which has been a central concern of the programme so far and one to which many other activities have been linked.

As the Fund's special interest in London becomes more widely known a growing number of approaches are being made by individuals and groups

seeking support for projects. It is planned to continue to develop new contacts and stimulate the flow of applications, provided these are in line with the priorities of the London programme described in this paper. On behalf of the LPEC, the project officer is also actively exploring new areas of interest, such as the health of ethnic minority groups in London and the provision of child health services, in order to inform the committee about key issues and allow it to make informed decisions about new directions for the London Programme.

JANE HUGHES

Project Officer - London

December 1981

Requests for further information about the King's Fund London Programme or ideas for future projects should be directed to Jane Hughes at the King's Fund Centre.

References

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6. KING EDWARD'S HOSPITAL FUND FOR LONDON, KING'S FUND CENTRE. Tackling Health Care Problems in London: The Contribution of Social Anthropology. A report of a workshop held at the King's Fund Centre on 26th November 1981. (KFC 81/257).

LONDON PROJECT EXECUTIVE COMMITTEE

Professor Brian Abel-Smith MA PHD (Chairman)

** Sir Francis Avery Jones CBE MD FRCP

* Miss Joan Clague SRN SCM

John Dennis Esq BA DSA AHA

* Ms Christine Farrell BA

* Brian Jarman Esq MRCP MRCP

David L Kenny Esq LLB AHA

** Ms Ruth Levitt

Professor Ian McColl MS FRCS

Professor David Morrell FRCP FRCGP

Peter Westland Esq

* Joined in 1981

** Resigned in 1981

Schedule of Projects Funded

LPE80/22	Study of A & E Attendances	Department of Community Medicine, Westminster Medical School	9,000
LPE80/6(b)	Stockwell Community Health Project	Lady Margaret Hall Settlement	10,500
PRO 80/9	Seminars for Health Authority Members	School for Advanced Urban Studies, University of Bristol and King's Fund Centre	4,400
LPE80/17(a)	Survey of Primary Health Care in London	RCGP publication	2,500
LPE80/21	Comparative Study of the Need for Health Care	Department of Geography Queen Mary College/ North East Thames RHA	16,081
LPE80/23	Brecknock Community and Mental Health Project	Tavistock Institute/MIND	10,000
LPE80/20	London Community Health Resource Development	London Voluntary Service Council	31,000
PRO/44a	Computerised General Practice Records	Dr M Salkind, Hackney	8,717
PRO80/50	Health Audit Project	Public Health Advisory Service, Paddington	6,400
MAN 9154	GP Educational Workshops	King's College Hospital	400
LPE81/7(d)	Development of Primary Health Care Teams	Dr D Craig, Thamesmead	5,041
LPE81/15	Frail Elderly - Collaboration in Community Care	Voluntary and statutory agencies in Tower Hamlets	20,000
LPE81/16	Subregional Resource Allocation in the NHS	University of Warwick, South West Thames RHA	20,000
LPE81/18	General Practice in Inner Cities	RCGP publication	1,250
LPE 81/33	Part-funding of information officer	COPE	7,800
LPE81/45	Evaluation of a two year trial of a GP Community Hospital in an inner city district	Kensington, Chelsea and Westminster AHA(T), North West District	30,000
LPE81/46	General practice premises	Medical Architecture Research Unit, North London Polytechnic	34,000
LPE81/50	An evaluation of elderly client assessment procedures	Department of Applied Social Studies, North London Polytechnic	6,810

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