



Annual Reports

ANNUAL REVIEW 2005/06

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King's Fund

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Key facts and figures

Main picture: Sir Cyril Chantler and Niall Dickson.
Below: The Prime Minister, the King's Fund,
Sir Derek Wanless, the Leader of the Opposition,
Bernard Ribeiro CBE, Rosie Winterton MP.

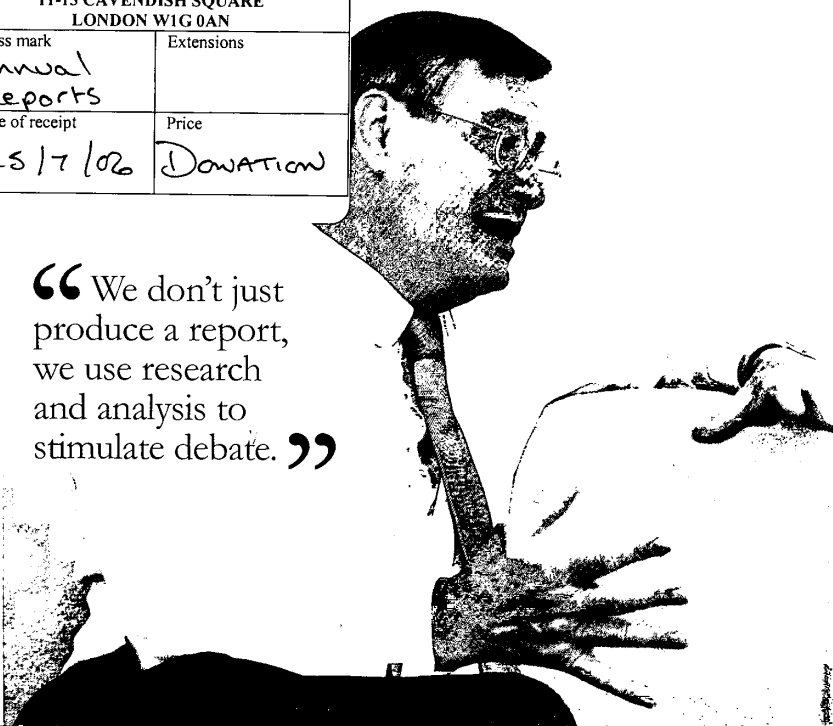


THE KING'S FUND IS AN INDEPENDENT CHARITABLE FOUNDATION WORKING FOR BETTER HEALTH, ESPECIALLY IN LONDON.

Our goals are to help develop informed policy by undertaking original research and providing objective analysis; effective services by fostering innovation and testing out ideas in practice; and skilled people and organisations by building understanding, capacity and leadership. There are five values underlying our work: independence, integrity, relevance, quality and social justice.

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“We don't just produce a report, we use research and analysis to stimulate debate.”



King's Fund Chairman Sir Cyril Chantler and Chief Executive Niall Dickson share their vision for the organisation and pick out highlights of the past year.

ACHIEVING CHANGE

'We are aiming to ensure that the King's Fund is the think-tank that does. What is different about us is that we don't just produce a report; we have a real commitment to use research and analysis to stimulate debate. And we follow through on our ideas and recommendations. That can mean initiating change on the ground or the development of policy, but what is important is that we do achieve change.'

'One of our most high-profile pieces of work in the past year has been a major inquiry into the future of social care funding for older people by Sir Derek Wanless. This was a ground-breaking, in-depth piece of work that has already made a difference. The government has changed its policy and accepts that the current level of resourcing for social care is not realistic.'

'We are genuinely proud that the Prime Minister came here during the General Election campaign and the Leader of the Opposition, David Cameron, came here to make his first speech on health. Mr Cameron confirmed his party's commitment to a tax-funded NHS, which is something that we welcome, and that will have resonance far beyond the next day's headlines.'

'The politicians see this as a place where ideas can be tested out because we are an independent organisation. We welcome political parties but don't always agree with them.'

'We are also very proud of our work developing software for primary care trusts (PCTs) and general practices. This is being used by nurses and doctors to improve the management of long-term

conditions by targeting services to keep people out of hospital wherever possible. It is a practical tool, which grew out of our academic work, and has been taken up widely across the NHS.'

'As the King's Fund for London we have a particular responsibility for the capital. Our Partners for Health in London programme has moved away from traditional grant-making to working in partnership with community organisations. We learn with them and transfer those lessons to the wider world. We are concentrating on areas that are under-resourced such as end-of-life care, mental health advocacy, sexual health and integrated health care.'

'Our work in the capital can also act as a catalyst for nationwide change. Our Enhancing the Healing Environment programme was pioneered in London but is now being extended throughout the country, engaging staff and patients at ward level. At the Princess Marina Hospital in Northampton, our initial funding of £30,000 has led to a million-pound performing arts project within their new Private Finance Initiative redevelopment.'

'We take seriously our responsibility to help the NHS to become better managed. If, through one of our leadership development programmes we help someone running a £300 million organisation change the way they operate, then we are affecting millions of people.'

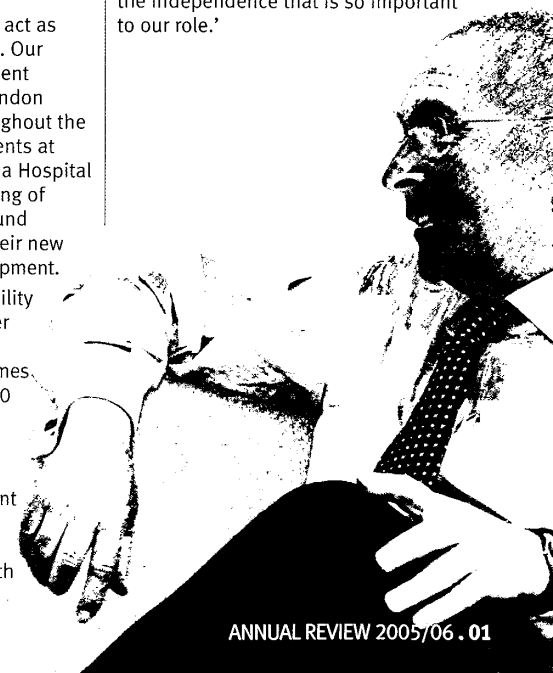
'Our role becomes more important in times of turbulence. We offer support through organisational development to those coping with

“We welcome political parties but we don't always agree with them.”

major change. We can be a haven where people feel secure in talking through their challenges and getting help.

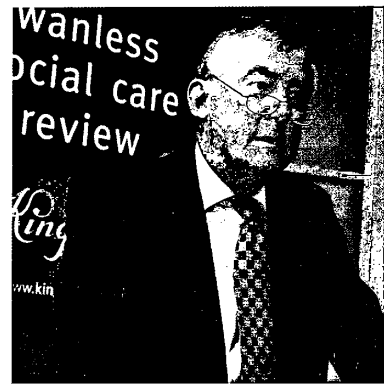
'The facilities here – the café, library and meeting rooms – are a resource for the health and social care world. We house the management section of the National Library for Health and this year we will launch the national patient and public involvement library. We have revamped our website, turning it into a virtual King's Fund.'

'The King's Fund itself has to be well managed. More and more, we will have to earn our living – rather than rely on our endowment – in order to guarantee the independence that is so important to our role.'



Combining original research with objective analysis puts us in a strong position to influence health and social care policy and generate informed debate.

DEVELOPING IDEAS AND POLICY



Sir Derek Wanless

We produced 27 publications in 2005, generating debate on policy and practice

Our most downloaded paper was about helping patients to manage their own long-term conditions

2005 saw the conclusion of a major inquiry into London's care services for older people, and the commissioning of a review, led by Sir Derek Wanless, to consider the future funding of long-term care for older people. Sir Derek's findings, published in March 2006, are already having a significant impact. We also ran the largest ever survey of NHS nurses from overseas to feed into recommendations for ensuring a sustainable, high-quality NHS workforce.

We played a key role in raising health and social care issues during the spring General Election campaign, producing a major audit of the NHS in partnership with *The Sunday Times* and welcoming health spokespeople from the main parties, as well as the Prime Minister, to events in our building. During the Autumn, we opened up the debate on the opportunities and challenges of the emerging NHS market with publications and events considering the future of regulation, commissioning and primary care, and the role of incentives.

We continued to help shape the agenda on improving care for people with long-term conditions, as well as producing significant reports on the evidence around community-based treatment orders in mental health, the role of the state in promoting healthy behaviour, and an evaluation of the London patient choice project.

“This inquiry shows that... support services for older people in London... are in a sorry state.”

Improving care for older people

The Business of Caring – the report of the King's Fund's inquiry into care services in London published in June 2005 – painted a worrying picture of the shortfalls in services for older people in the capital.

Inquiry chair Julia Unwin commented: ‘This inquiry shows that care and support services for older people in London are in a sorry state. Many older people simply aren't getting what they need and steps to improve this situation are being hampered on several fronts.’ The report's analysis of shortfalls in funding fed into our major review of social care funding by Sir Derek Wanless, published in March 2006.

The Business of Caring was welcomed by key players in social care. David Behan, Chief Inspector of the Commission for Social Care Inspection, said it would inform the work of the CSCI in assessing the performance of councils in commissioning the right quality of services.

The inquiry had made a ‘significant contribution’ to the debate on the future of social care, Mr Behan added. ‘I am delighted that the King's Fund now has a focus on the contribution that social care makes to improving outcomes. Market development is one of the big strategic issues that we will take forward.’

London Mayor Ken Livingstone promised to take action on several of the inquiry's recommendations, particularly on planning permission for care homes, investing in the social care workforce and addressing older people's mental health needs in his strategic framework for mental health.

Martin Green, Chief Executive of the English Community Care Association, said the analysis was a ‘wake-up call’ for the social care sector as well as central



government. ‘The report focused on the fact that we have a mixed economy of care. But no one had been looking at how we develop that market to focus on all the quality issues that are coming out of government.’

Mr Green added: ‘The report demands that we change our understanding of the role of the state in improving social care delivered in the independent sector. Commissioners haven't come to terms with that and if we don't attend to that the services we need will not be there.’

Mr Behan particularly welcomed the inquiry's findings on mental health and old age. ‘There is under-provision of services for people with mental illness but we know demographically that there will be increasing numbers of people who will develop age-related mental illness.’ He added that the report had made it clear that the market was not meeting those needs and challenged councils to plan for tomorrow.

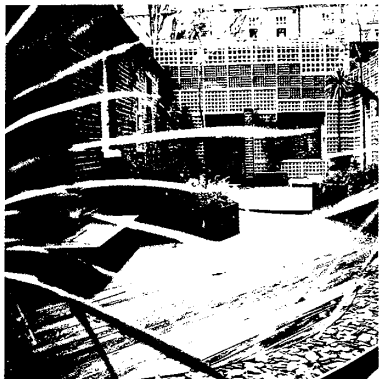
Mr Green pointed out that the inquiry's findings resonate beyond the social care sector. ‘Many of these lessons need to be heard by government in relation to the market in health care which is being brought in. No-one seems to be looking at how we need to develop that market.’

He paid tribute to the King's Fund for going beyond expert analysis, bringing key players together to work on solutions. ‘The King's Fund maintains the momentum of their reports, thinking strategically about how they move things on. That is one of the things that defines it now.’

“The King's Fund maintains the momentum of their reports, thinking strategically about how they move things on. That is one of the things that defines it now.”

Uniquely, we are able to build on and inform our policy work by testing ideas out in practice and supporting innovation to generate learning.

DEVELOPING SERVICES



EHE project, Royal Brompton Hospital

By the end of 2005, 63 hospital settings had been improved through our Enhancing the Healing Environment programme

During 2005, we invested £2.36 million to provide better services

In 2005, we moved from traditional grant-giving to the Partners for Health in London programme, providing funding and support to specific services or projects to help answer particular questions. We are focusing initially on four areas – end-of-life care, sexual health, mental health advocacy and integrated health care. In addition, in partnership with NHS Direct, we piloted a confidential helpline to support both people who are dying or living with an illness that may shorten their life and the people caring for them. Early feedback shows the service is filling a genuine gap. We partnered up with the London Development Centre for Mental Health to run an acute care collaborative for mental health trusts in the capital.

Our Enhancing the Healing Environment programme – which provides financial and development support to teams of frontline staff and patients to improve the environments in which care is given – continued to flourish. With funding from the Department of Health, we have been able to roll the programme out to mental health and learning disability trusts across England. Another highlight, featured opposite, was working with PCTs and GPs and developing a tool to help the NHS identify patients most at risk of being admitted to hospital.

Reducing hospital admissions

PCTs around the country are now using a software tool developed by the King's Fund, New York University and Health Dialog to predict patients at high risk of hospital admission. The Patients at Risk of Re-hospitalisation (PARR) case-finding software underpins the role of community matrons and case managers, helping them to support the right patients, in particular, by managing the complex needs of people with long-term conditions. Commissioned by Essex Strategic Health Authority on behalf of the 28 strategic health authorities, the Department of Health and the NHS Modernisation Agency, it is available free to PCTs. More than 500 users had downloaded it by the end of March, just two months after its release.

Southwark PCT was a pilot site for the PARR system. Mabli Jones, Associate Director of Modernisation Services, said: 'We were data-hungry and we felt the King's Fund had a good strategic fit for long-term conditions.' The King's Fund ran the tool, analysed the data, and held six sessions taking PCT staff through the key findings, showing them how to broaden the database and supporting them in learning to use the tool.

Predicting patients at risk is complex and requires a high degree of accuracy to target resources effectively. The tool is triggered by an emergency admission and uses data from previous hospital admissions day case care, clinical specialities, and electoral wards to provide a score showing how likely it is that an individual patient will be admitted as an emergency in the next year.

The PCT's three community matrons are using the PARR data to find the patients who need intensive support. Marianna Saville, Southwark's Service Facilitator for Long-Term Conditions, said that it has 'kick started' case management. Previously there was insufficient information for the community matrons to work effectively but the PARR tool has built their initial caseloads. 'It is clinical intelligence. It has helped the community matrons to get out there and live their new roles.' The PARR tool has been 'brilliant in getting them up and running and giving them some confidence in starting discussions with GPs'.

Deanna Tennancourt, Clinical Lead for District Nursing, said that without the tool, case managers would have to spend a lot of time identifying patients – time taken away from their clinical roles. 'It is a sign of light in a big maze of confusion. Without it you would have to communicate with many different individuals in many different places to get this data. This just makes something very easy in the midst of a system that is very complex.'

'We now have a way of communicating with the GPs and the wider team about the people who are at risk so we can be more proactive in providing care.' A key advantage is that it is simple to use, categorising patients in ways that are logical and useful, by surgery, locality and by diagnosis. It also enables the PCT to take a strategic view of their population, comparing localities and informing service redesign and resource allocation.

A further version of the PARR is being developed that will help to pre-empt emergency admissions by using GP and social care data to identify high-risk patients in the community, even if they have never had an admission to hospital before.

Annabella Franco, Community Matron, Southwark PCT, with Audrey Williams, patient.

“We now have a way of communicating with the GPs and the wider team... so we can be more proactive about providing care.”



Through our leadership programmes and our range of resources and services, we aim to build the understanding, capacity and skills of people working in health.

DEVELOPING PEOPLE AND ORGANISATIONS



Participants, Senior Manager Programme

Nearly 2,000 nurses, doctors and managers took part in our leadership development programmes in 2005

We dealt with more than 5,000 information enquiries

We continue to be a major provider of leadership development programmes for senior managers and clinicians in the NHS. We work on a number of programmes that are contracted to the King's Fund by the NHS Institute for Improvement and Innovation, reflecting our strong reputation.

The Board Leadership Programme, provided on behalf of London's NHS, had its most successful year in 2005. Some 64 per cent of non-executive directors in London attended one of its events. King's Fund staff also worked with a range of health organisations to help them provide services more effectively and cope with specific challenges created by NHS reforms.

We launched our new website in July, giving free access to thousands of resources, including publications and links. Up to 15,000 people use it each month. Our information and library service provides access to a comprehensive catalogue of health and social care management publications and a growing range of online resources. We also provide conference and meeting space, run events and facilitate networking.



Supporting leaders

The King's Fund has more than 30 years' experience of providing distinctive leadership programmes for people working in health and social care. And we help organisations to identify and understand the complex challenges they are facing and to develop creative ways to address them. Often, this will involve working directly with individuals and teams to enhance their managerial and leadership capacity for the benefit of the organisation.

Great Ormond Street Hospital has been working with the King's Fund for a number of years to build the leadership capacity of

its senior managers and clinicians. Chief Executive Jane Collins said: 'King's Fund programmes have helped create our leaders of today. All the current heads of department have taken part and developed enormously as a result.'

'They learned a lot about their own style, gained an understanding of the dynamics of teams, and returned with improved leadership qualities as well as better day-to-day management skills.'

Neil Shah, a paediatric gastroenterologist, took part in the Management for Consultants programme in 2005. He said: 'I have the same frustrations as any other

consultant facing major government-directed organisational change. It is a very unsettled time in the NHS and I was looking for an understanding of the bigger picture rather than merely what goes on in my trust or my unit.'

The course included participants from a wide range of backgrounds, from A&E to obstetrics, general medicine and psychology. 'It was fascinating to see what people from other specialties and hospitals are doing and how they are responding to the demands being made on them. And just to discover that we are all in the same boat was useful.'

The programme directors didn't just talk about leadership – they demonstrated it, he added. 'There was a wisdom about the course leaders that was very helpful. They brought out the best in every individual and the group. People were encouraged to talk about issues 'that are blindingly obvious when you have time to think about them but which you don't see when you are busy with the day-to-day demands of your job. It made participants think about the challenges they face in a fresh way.'

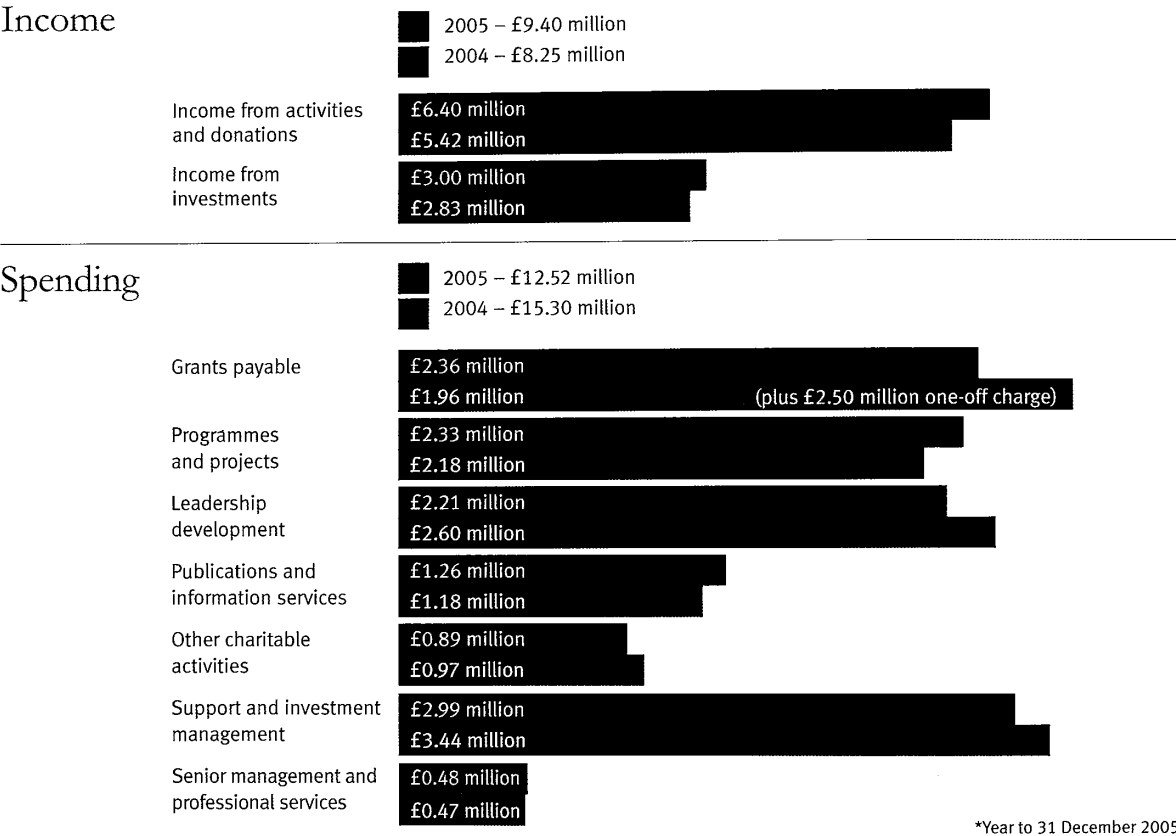
One particularly valuable element was transferability – that people were encouraged to take ideas and put them into practice immediately. 'It's not just an abstract exercise; you actually do it in the real world,' Dr Shah commented.

The course included occupational psychology. 'It helps you think through how you and your colleagues analyse and respond to problems,' he said. And it was of practical use. 'Because we were encouraged to do things immediately, you take the ideas and put them into action so it becomes real.'

Dr Shah is still in touch with fellow members of the programme – who have turned into a support network. 'The group was fantastic. I would recommend the programme to anyone who has done the job for a few years so you have some knowledge of the obstacles that consultants face.'

Dr Jane Collins, Chief Executive, and colleagues, Great Ormond Street Hospital.

KEY FACTS AND FIGURES*



In 2005, we improved our financial position by increasing income from investments and activities and reducing management and support costs. Net expenditure (spending in excess of our income) was less than half the equivalent figure for 2004. Net expenditure is funded from growth in the value of our investments which increased by 13 per cent over 2004. We had a planned increase in spending on programmes and projects, mainly in policy, reflecting an expanded work programme. The apparent reduction in grants expenditure is largely a result of a one-off accounting change in 2004. Excluding this change, there was actually a small increase, principally

related to the Enhancing the Healing Environment programme. Looking to the future, we have put in place a financial strategy that aims to ensure we match net expenditure to available resources over the short-to-medium term, helping us avoid major fluctuations in spending, and to protect the underlying value of our endowment for the longer term. The full audited accounts are included in the Trustees' Report and Financial Statements for the year ended 31 December 2005, available at www.kingsfund.org.uk/about_us/annual_review.html or from Publications on 0207 307 2591.

The King's Fund is ultimately governed by its General Council, which is made up of key figures from the health community and public life. Its President is HRH The Prince of Wales. Hands-on governance has been devolved to a Management Committee of Trustees chaired by Professor Sir Cyril Chantler, and day-to-day management to a Board of Directors headed by Chief Executive Niall Dickson. For full details of our governance and management, visit www.kingsfund.org.uk/about_us/governance.html

Entrance to the King's Fund building, Cavendish Square, London



OUR IMPACT IN 2005

OUR NEW WEBSITE ATTRACTED **13,000** VISITORS PER MONTH

OUR COMPUTER SYSTEM TO IMPROVE CARE FOR THE MOST VULNERABLE PATIENTS WITH LONG-TERM CONDITIONS IS BEING USED BY NEARLY **750** NURSES AND OTHER HEALTH PROFESSIONALS

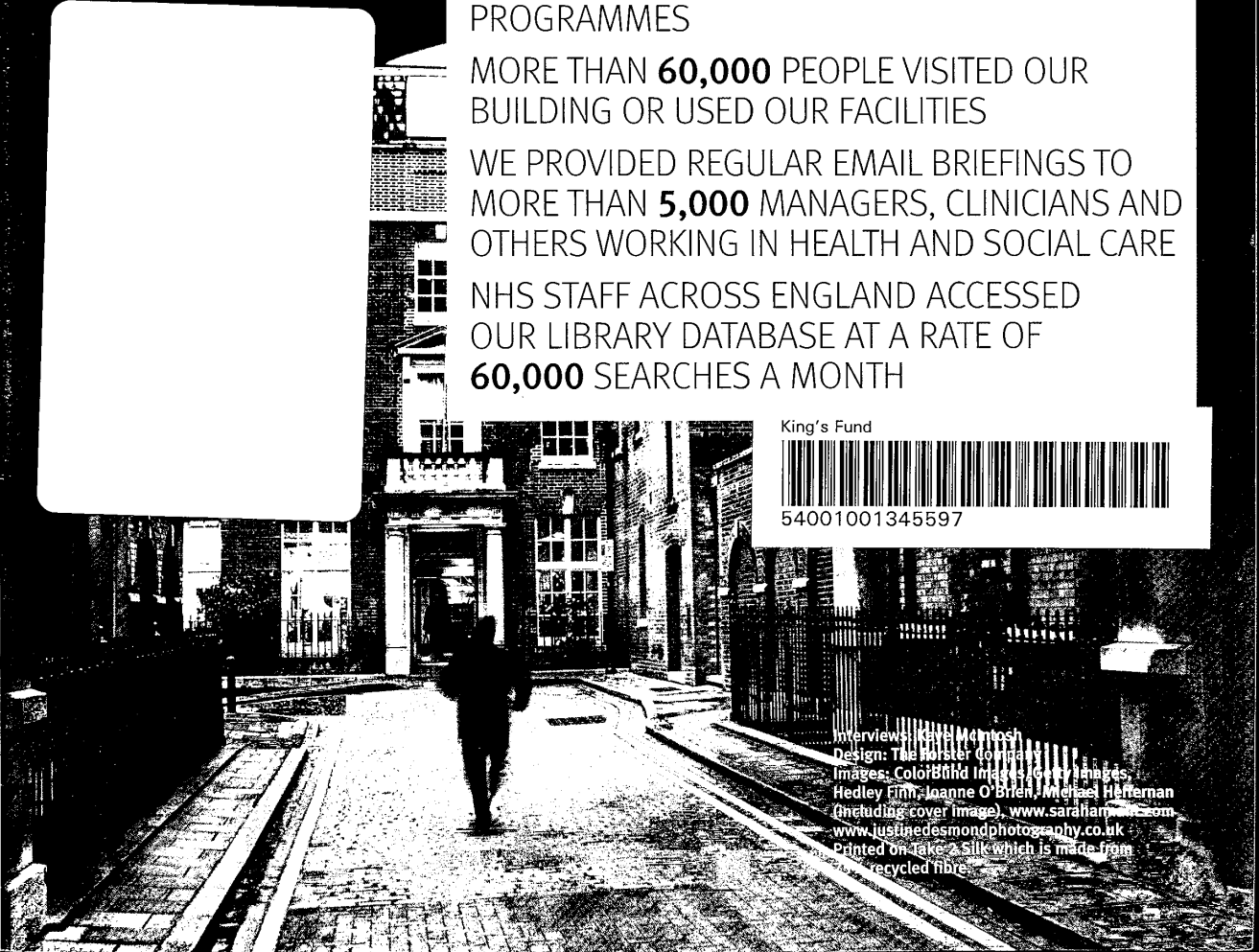
ALMOST **2,000** HEALTH AND SOCIAL CARE STAFF TOOK PART IN OUR DEVELOPMENT PROGRAMMES

MORE THAN **60,000** PEOPLE VISITED OUR BUILDING OR USED OUR FACILITIES

WE PROVIDED REGULAR EMAIL BRIEFINGS TO MORE THAN **5,000** MANAGERS, CLINICIANS AND OTHERS WORKING IN HEALTH AND SOCIAL CARE

NHS STAFF ACROSS ENGLAND ACCESSED OUR LIBRARY DATABASE AT A RATE OF **60,000** SEARCHES A MONTH

King's Fund



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The King's Fund is an independent charitable foundation working for better health, especially in London. We carry out research, policy analysis and development activities, working on our own, in partnerships, and through funding. We are a major resource to people working in health and social care, offering leadership development courses; conferences, seminars and workshops; publications; information and library services and conference and meeting facilities.



King's Fund

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