

THE KING'S FUND IN EUROPE:

A Survey of King's Fund Staff Interest

in European Health and Social Care

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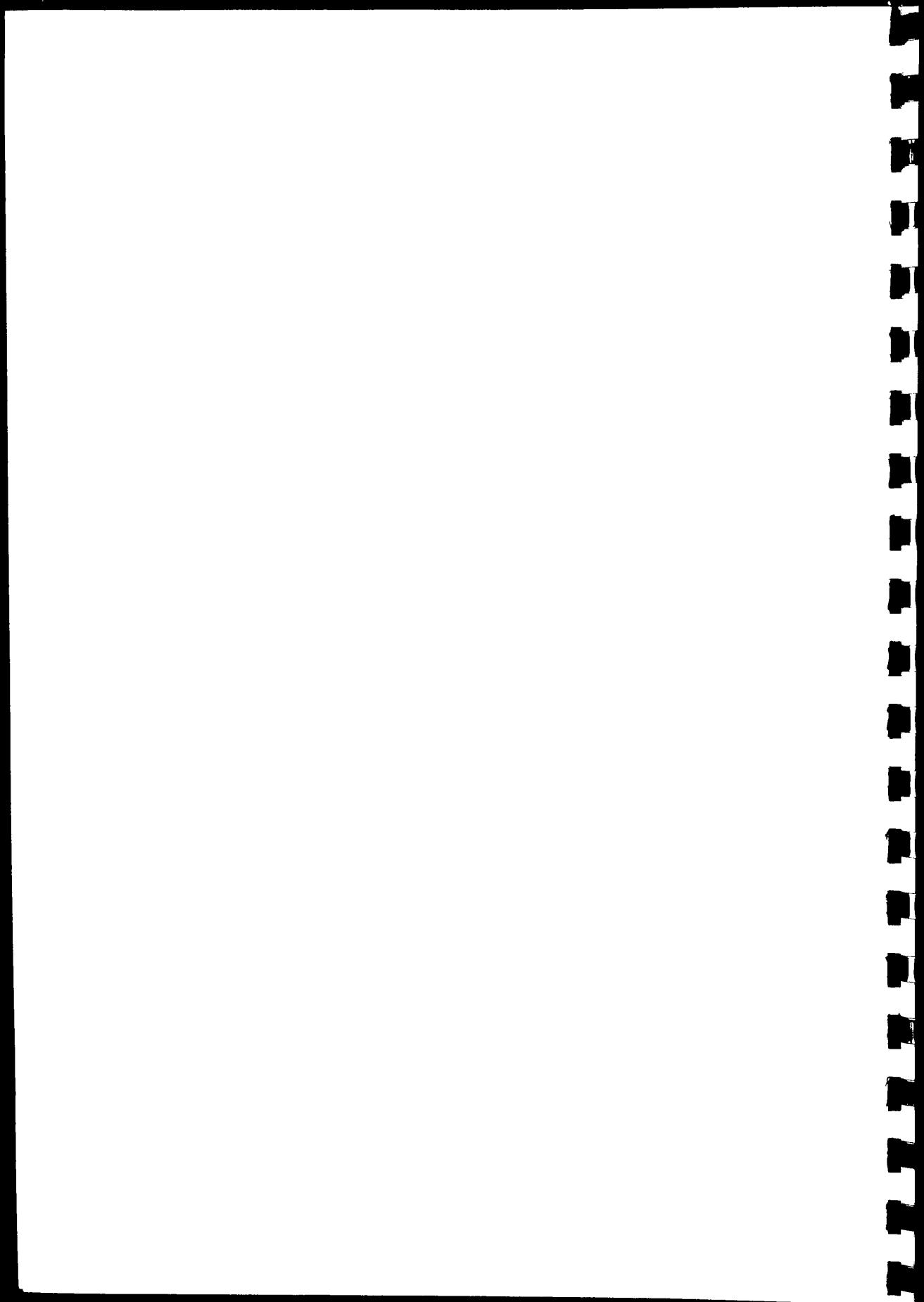
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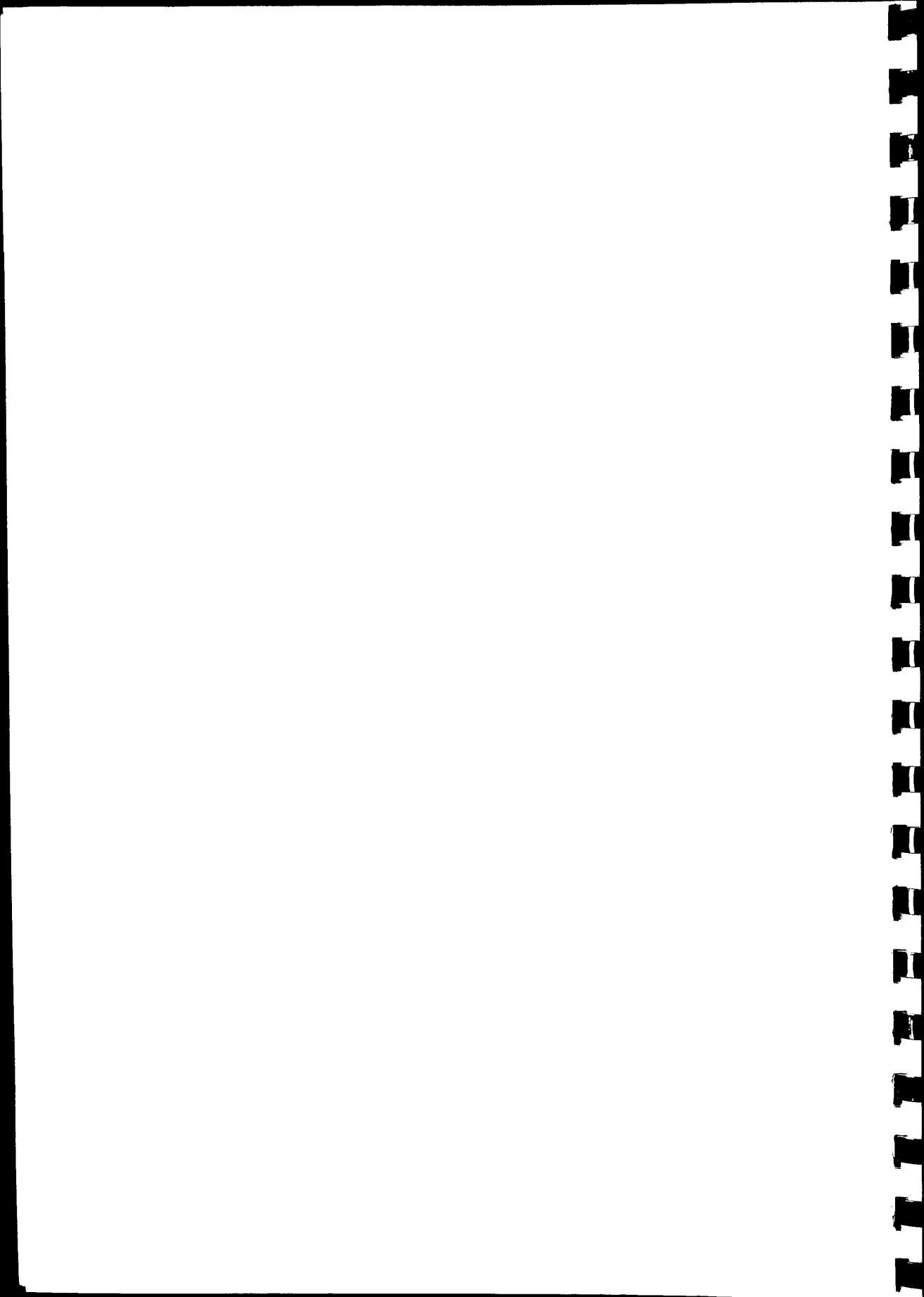
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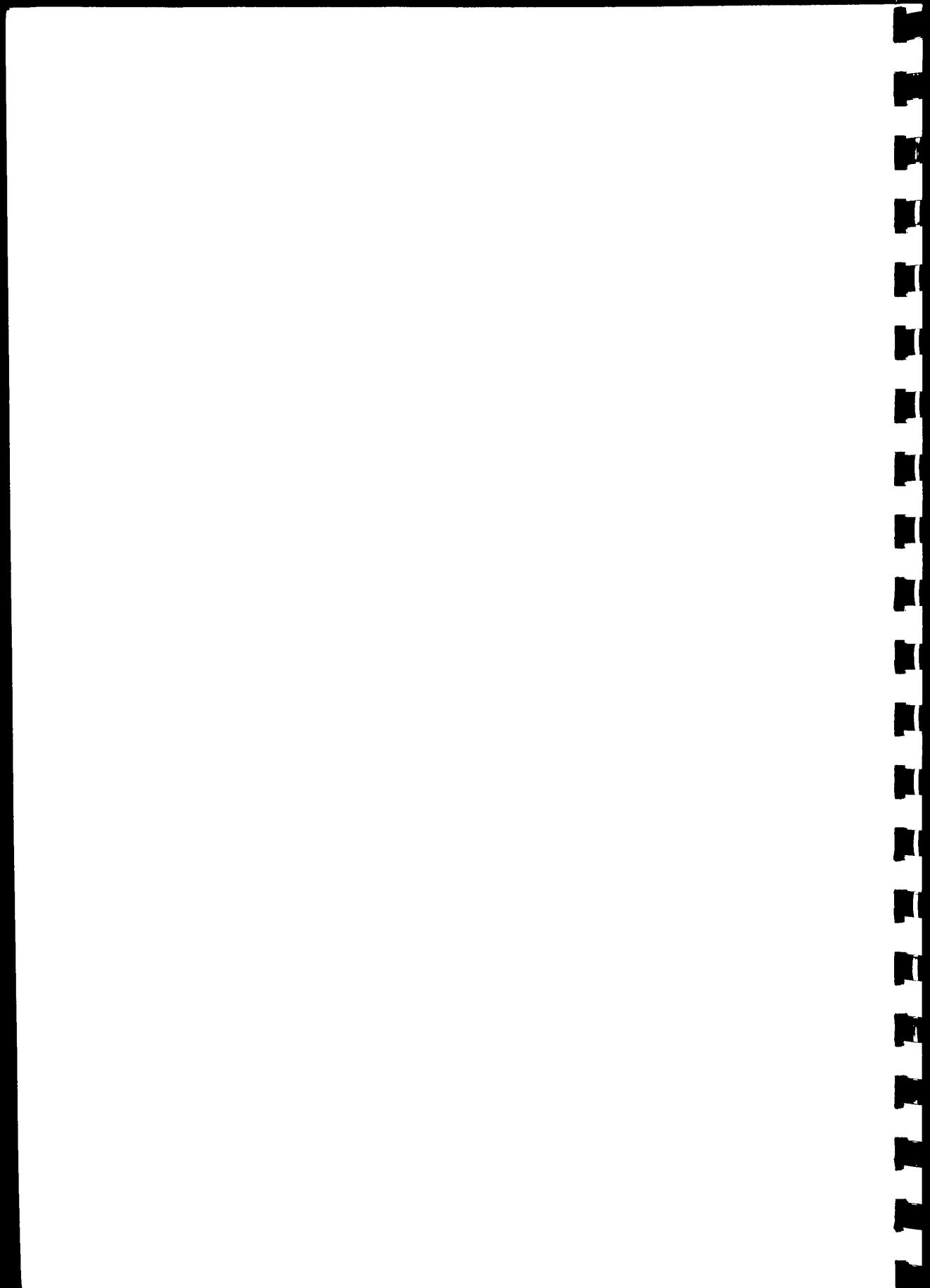
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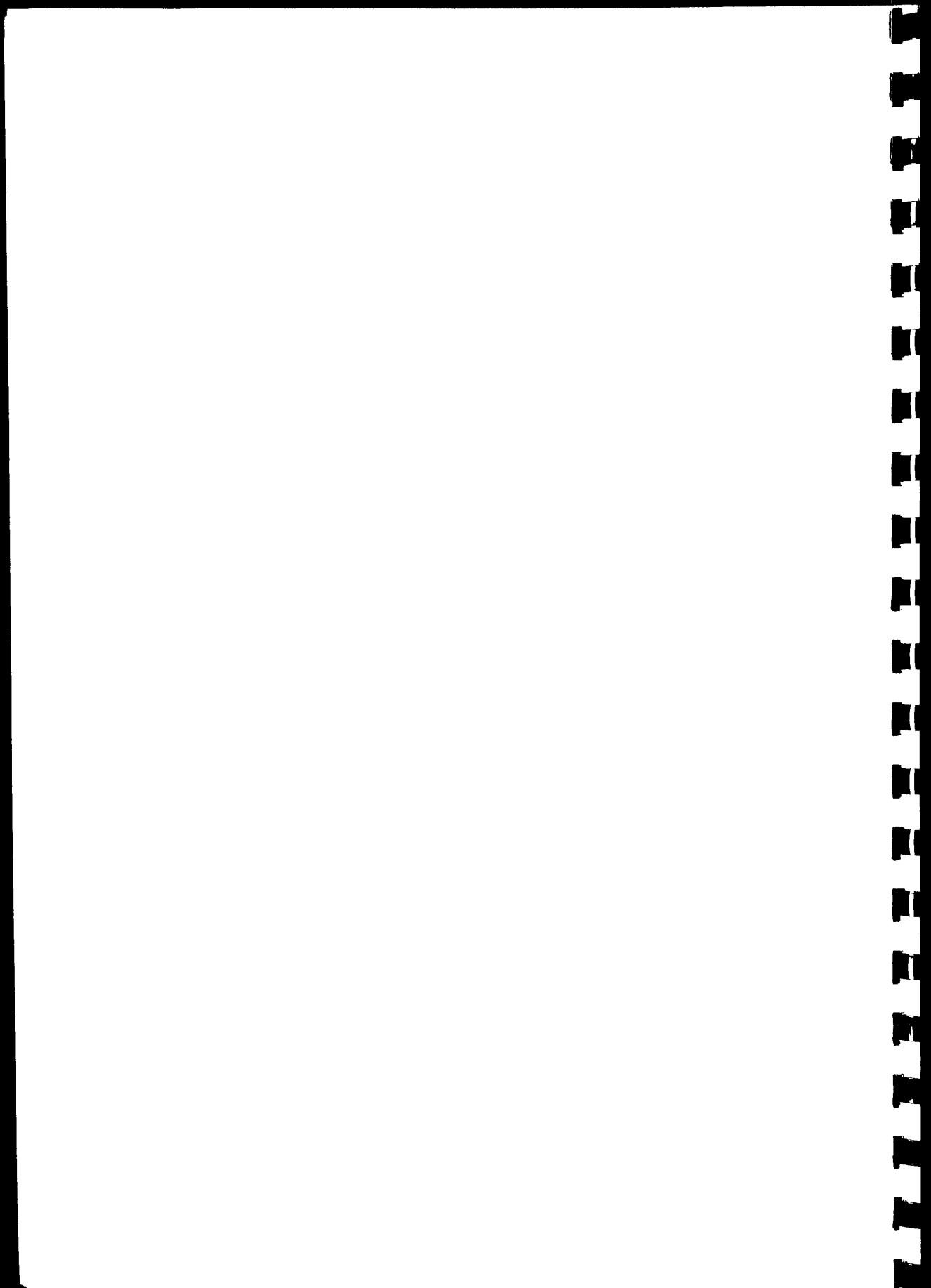
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Summary

The Information Resources department at the King's Fund Centre investigated the current level of interest in European health care amongst King's Fund staff. A high level of interest was shown across the Fund in health care in all regions of Europe. Particular interest was shown in the European Community. A limited amount of work was being conducted, primarily by Faculty and other research staff based at the Palace Court site. The work concentrated on aspects of health care in Central and Eastern Europe although some work was being done in other regions.

The type of literature which was required by staff to fulfill their work and interest in European health care issues was diverse, with all types of European documentation of interest. Contacts of people and organisations were the most requested items. People generally preferred English language material, although some interest was shown in foreign languages. The quality of the information provided was felt to be more important than its format.



1.0 Introduction:

In December 1991, the Information Resources department at the King's Fund Centre conducted a survey into the European health care interests of King's Fund staff.

The survey had two aims:

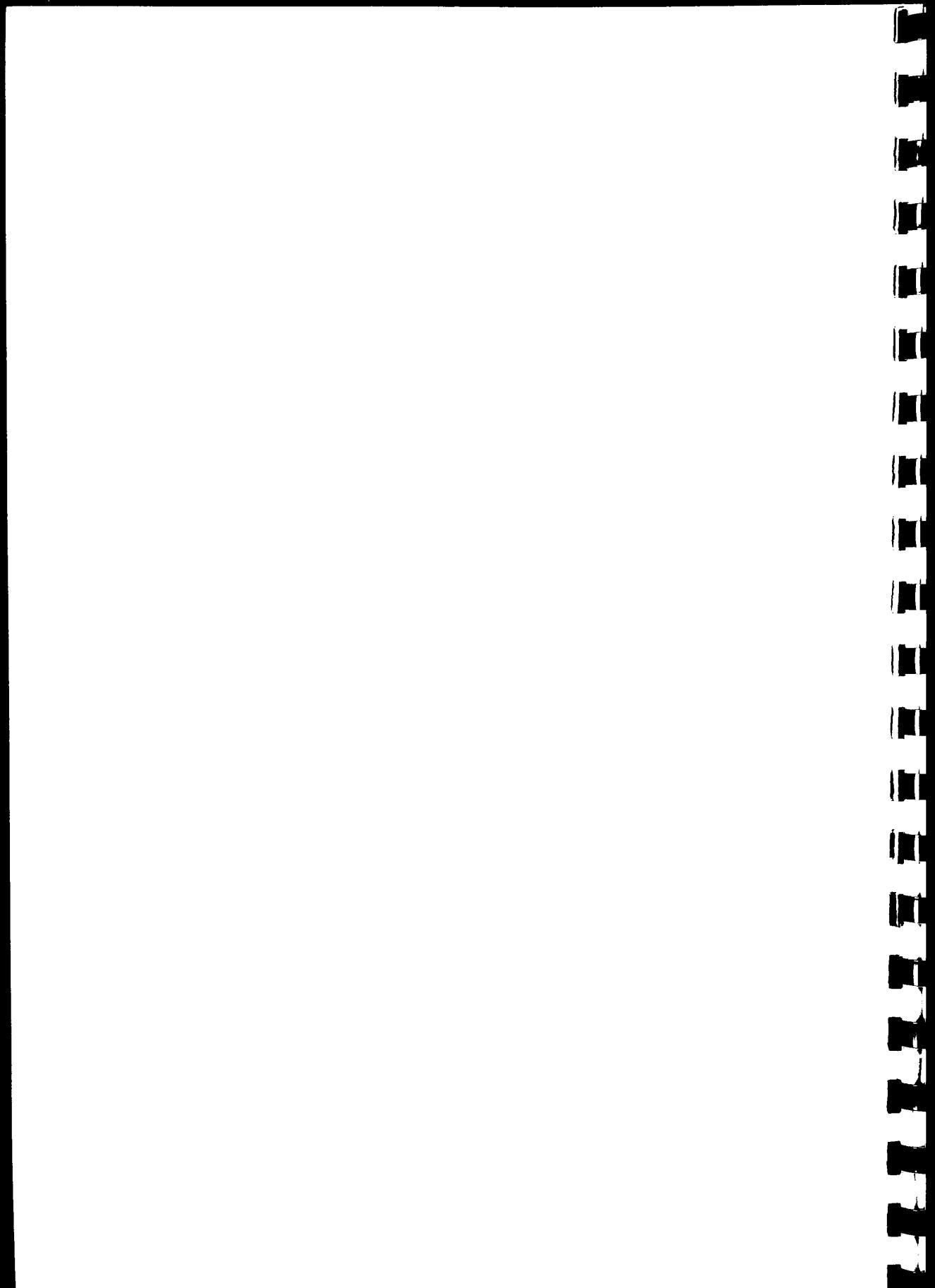
1. To determine current interests and work patterns at the King's Fund in relation to Europe.
2. To assess the need for more European material in the Centre library.

A considerable level of interest was shown in the survey by staff. The response rate was as follows:

	No. questionnaires sent	Response
Centre - Information Resources (IR)	17	15 (88%)
- Health Services Development (HSD) (excluding IR)	31	22 (71%)
Institute	14	10 (71%)
College - Faculty	26	15 (58%)
Other research staff (ORS)	38	26 (68%)

The figures exclude the response from secretaries, who produced virtually no replies. If a person is a member of two different sections of the Fund, his/her response has been included in the section in which the majority of his/her work is conducted.

Questionnaires were distributed to the Faculty at the College and to the other research staff based there. The other research staff (ORS) consist of people working in Organisational Audit, London Initiative, CASPE Research and CASPE CHKS Ltd. The replies from these groups were analysed together. CASPE Research designated one person to reply on their behalf, and this reply has been given the appropriate weighting. The composition of the replies from ORS is shown below.



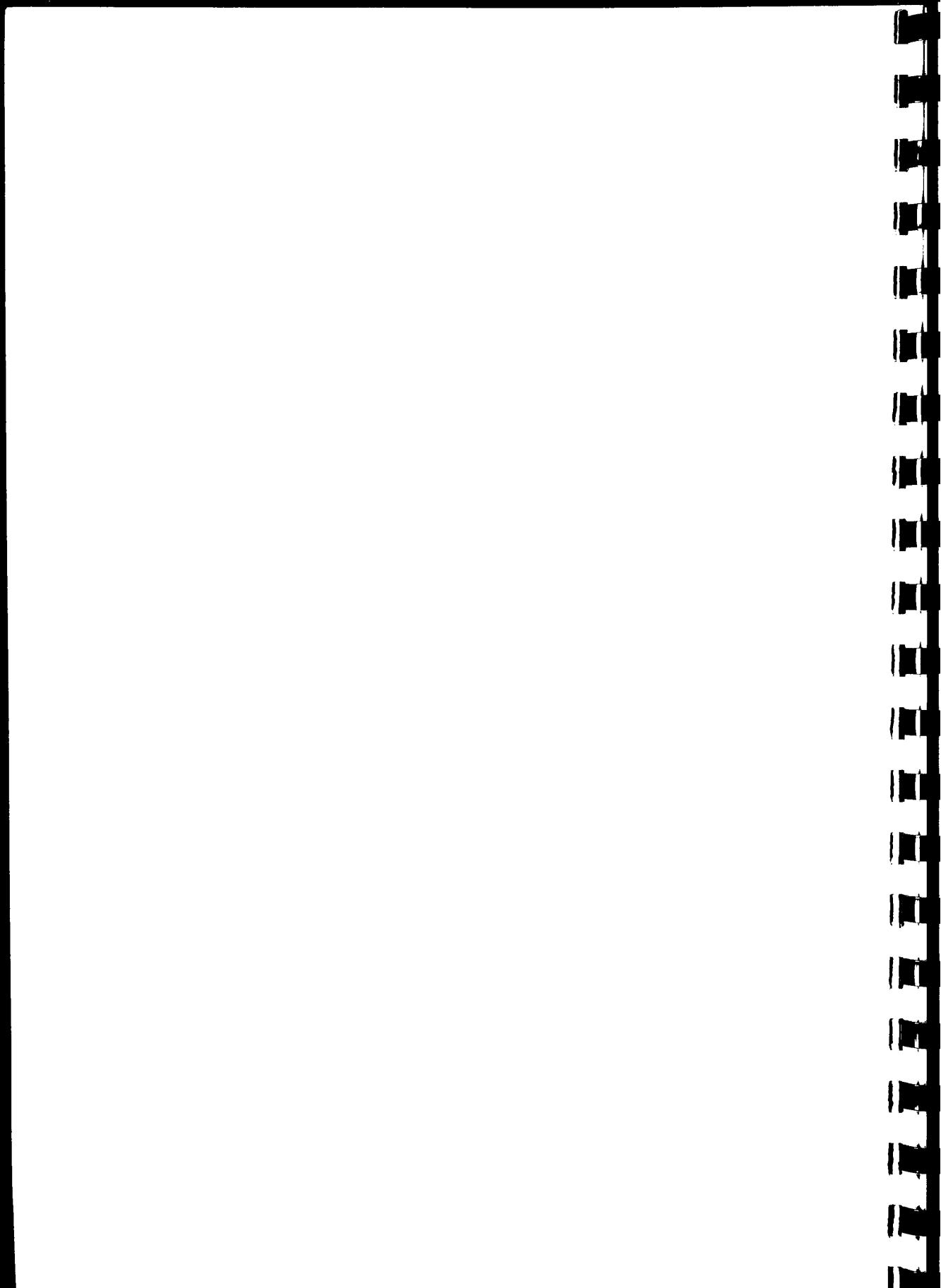
	No. Questionnaires Sent	Response
London Initiative	1	0
Organisational Audit	7	3
CASPE Research	21	21*
CASPE CHKS Ltd.	9	2

* One form was received, representing the 21 members of CASPE Research. One member of the group also replied independently of the designated respondent.

The response from CASPE CHKS Ltd and Organisational Audit includes the replies from the directors of the groups.

The response from the Centre Facilities staff has been analysed separately due to the low response rate; 20 staff received the questionnaire and 3 (15%) replied. The low response was not unexpected as the work of most of these staff does not usually involve contact with the European health care sector.

Similarly, Head Office has also been analysed independently from the rest of the replies received. The response from Head Office is important, but the replies did not produce enough data for comparison to be made with the other sections of the Fund. Two people responded, representing a reply of (15%).



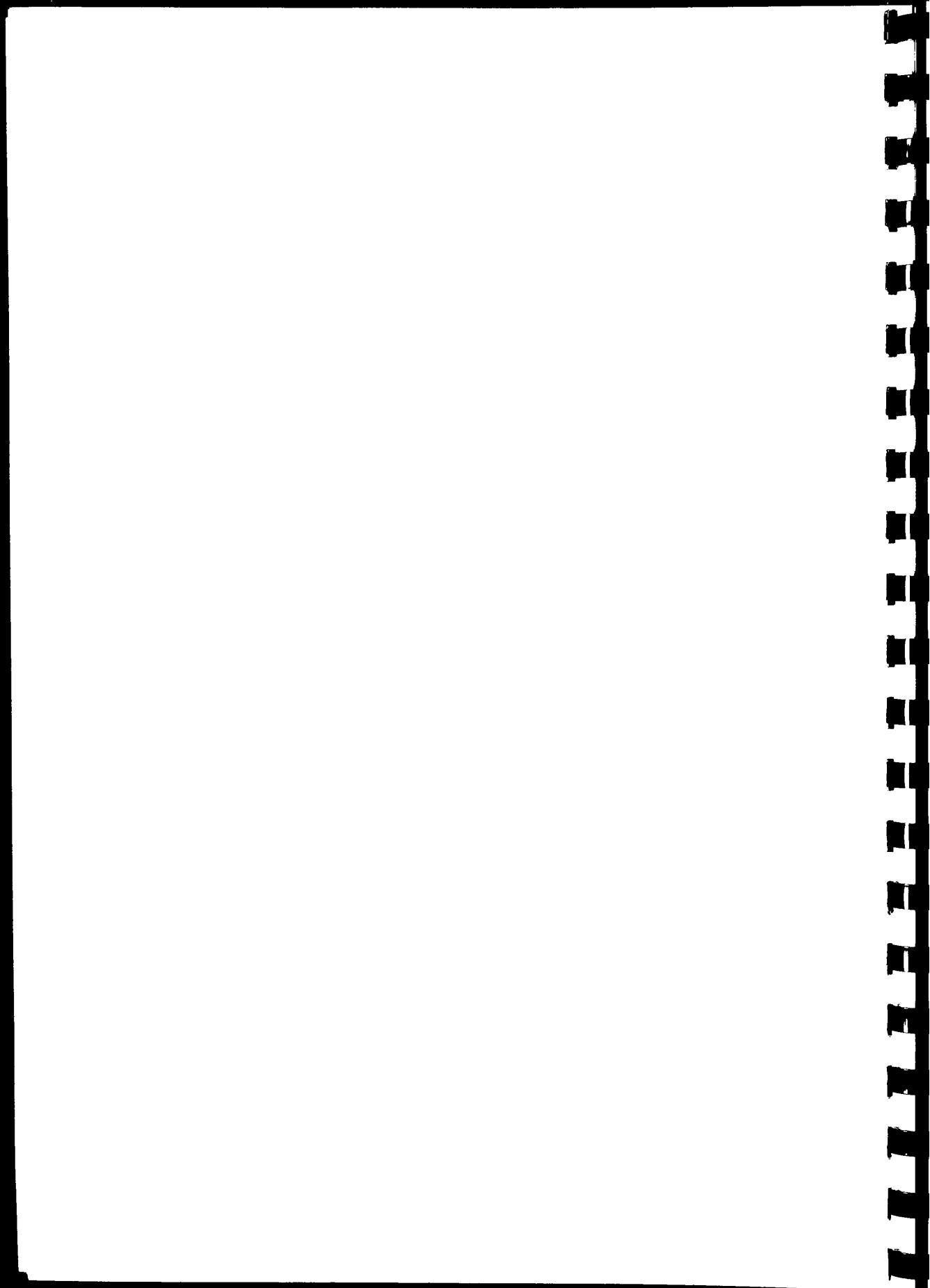
2.0 European Areas of interest:

2.1 European Community:

The majority of people who replied to the questionnaire were interested in issues of health care in the European Community (see appendix A figure 1a). All the people from ORS who replied to the questionnaire showed some interest in this area. 90% of the respondents from the Institute (9 people) also replied positively. The other sections of the Fund had a lower, but still strong response. Most people did not specify a country of particular interest, although this varied across the Fund. 33% of the Faculty (5 respondents) did specify a country, whereas no one from IR specified a country. When a particular country was mentioned the most popular was the Netherlands closely followed by Spain, Germany and France (see table 1).

Country	Total replies		HSD replies		Inst. replies		Faculty replies		ORS replies	
	NO.	%	NO.	%	NO.	%	NO.	%	NO.	%
Netherlands	7	8	1	5	3	30	3	20	0	0
Spain	5	6	1	5	1	10	3	20	0	0
Germany	5	6	1	5	3	30	0	0	1	4
France	4	5	1	5	1	10	2	13	0	0
Italy	2	2	0	0	1	10	1	7	0	0
Eire	2	2	1	5	0	0	1	7	0	0
Belgium	1	1	0	0	1	10	0	0	0	0
Luxemburg	1	1	0	0	1	10	0	0	0	0
Denmark	1	1	0	0	0	0	1	7	0	0
Respondents specifying a particular country	3	14	3	30	5	33	1	4		

Table 1
Specific Countries of Interest in the European Community



2.1.1 Areas of interest by subject:

Data referred to in this section will be found in Appendix A figure 2a, and Appendix B table 1.

i) General areas in health care:

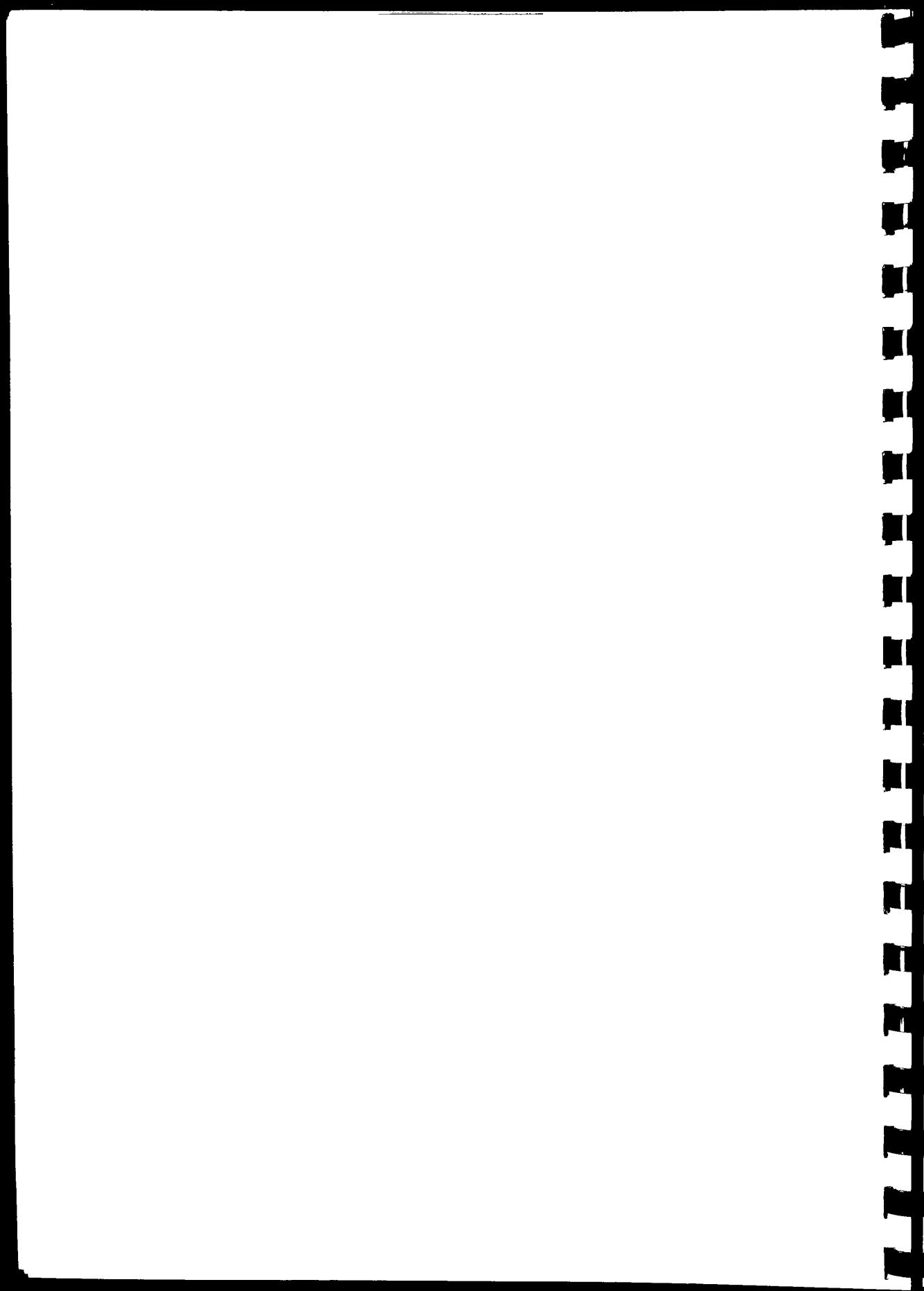
Within the context of European Community most people showed an interest in the general areas of health care. All respondents from ORS showed an interest in this. The response elsewhere was fairly evenly spread over HSD, IR, the Institute and Faculty. Faculty was mainly concerned with areas relating to the organisation and planning of health services including the financial aspects. ORS showed an interest in these areas, but showed most concern for the quality of service. HSD and IR also ranked quality of service highly. IR, not surprisingly, also showed a strong interest in information systems for users. The main area of interest for the Institute was finance. There was very little interest shown by any King's Fund staff for pharmaceuticals and the movement of health professionals.

ii) Acute care

There was a significant variation across the Fund in the level of interest shown in acute care in the European Community. ORS and the Institute were strongest in this area. HSD was the least interested. There was also a variation in interest in specific acute topics. ORS averaged 80% (23 replies) in all topics, whereas the Institute favoured futures and outcome measurement, and IR favoured clinical audit.

iii) Community and social care

There was some consensus amongst four groups on this subject (HSD, IR, Institute and Faculty) who produced an average reply of 50%. There was still a variation in the amount of interest shown in specific topics between these groups in the Fund. HSD was largely concerned with user involvement, whereas the Institute appeared to have no interest in this. The Faculty was more concerned with intersectoral collaboration and community practitioners. IR's interests were fairly evenly spread over all sectors. ORS had a low interest in most aspects of community and social care.



iv) Private health care:

There was very little interest shown in private health care in the European Community. The response ranged from 5% (1 reply) from HSD to 15% (4 replies) from ORS.

v) Voluntary Organisations:

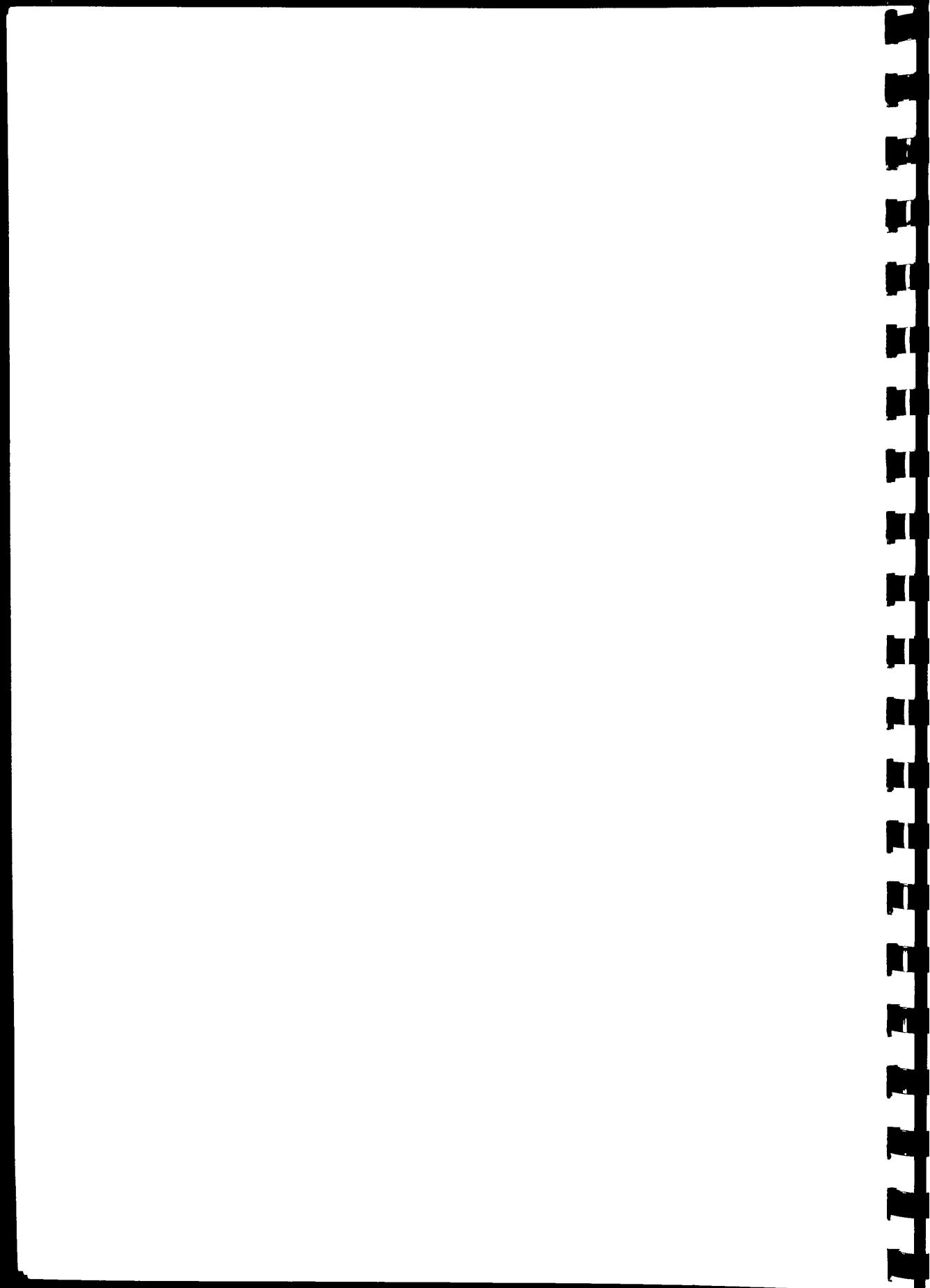
In this area HSD showed the greatest level of interest 36% (8 replies), while the Institute and ORS did not register a response.

vi) Special client groups:

All sections of the Fund were involved with at least one special client group. There was a difference in the spread of involvement with different clients. HSD had a more consistent response in this area, but of particular concern were people with learning difficulties, black populations and informal carers. The response of other sections of staff was more diverse. The Institute showed no interest in the issues concerning homeless people, people with physical disabilities, informal carers or pregnant women, but showed a 30% interest (3 replies) in the problems of black populations. The Faculty was concerned with the problems of elderly people, people with learning difficulties, people with physical disabilities and people with mental health problems. ORS showed a minor interest in the problems of patients with terminal illnesses, people with mental health problems and informal carers. IR did not produce a reply for patients with terminal illnesses.

vii) Other areas of interest not mentioned in the previous sections:

These general questions produced a small response from staff. They highlighted areas that staff were interested in which were not categorised elsewhere. The Faculty response included the topics of law harmonisation and consumerism. Other topics mentioned were health promotion and nurses as managers. The Institute was interested in consumer views, the political health sector and general practitioner systems. HSD was concerned with integration into community life in relation to people with disabilities, and health education. IR expressed some interest in immigration policies.



2.2 Central and Eastern Europe

There was generally less interest shown in this area compared with other parts of Europe. However the level of interest varied significantly between the different parts of the Fund. ORS placed more importance on health care in Central and Eastern Europe than other sections of the Fund, with 92% (24 replies) (see Appendix A figure 1a). Faculty also showed a strong interest with 47% (7 replies). Faculty was the only group to specify particular countries of interest. The most popular ones were Romania and Czechoslovakia (see table 2).

Country	Total replies		Faculty replies	
	No.	%	NO.	%
Romania	4	5	4	27
Czechoslovakia	4	5	4	27
Poland	3	3	3	20
Hungary	2	2	2	13
Russia	1	1	1	7
Respondents specifying a particular country			5	33

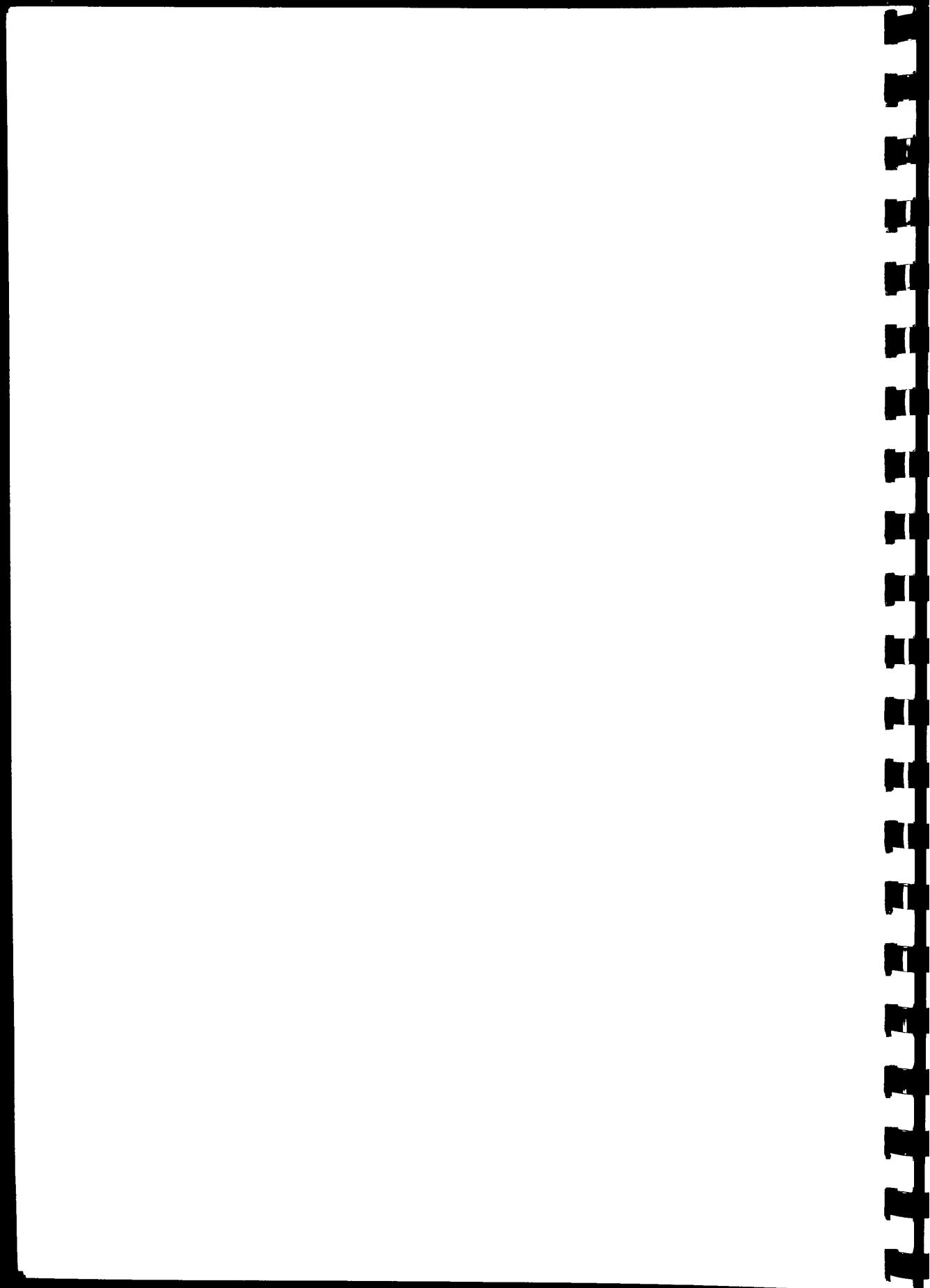
Table 2
Specific Countries of Interest in
Central & Eastern Europe

2.2.1 Areas of Interest by Subject:

The data referred to in this section will be found in Appendix A figure 3a and Appendix B table 2.

i) General areas of health care:

It was found that ORS and, to a lesser extent, Faculty, were the main sections of the Fund which showed an interest in general issues in this region. The Institute had very little interest in this area. The topics mentioned by Institute staff were health needs assessment, economics and



service organisation.

ii) Acute care:

ORS and Faculty showed a strong concern with acute care in Central and Eastern Europe. There was less response from the other sections of the Fund. The range of topics covered by different sections of the Fund was very similar to those for acute care in the European Community, the main differences being the lack of interest shown by the Institute in all areas except outcome measurement and the lower response rate for IR for clinical audit.

iii) Community and Social care:

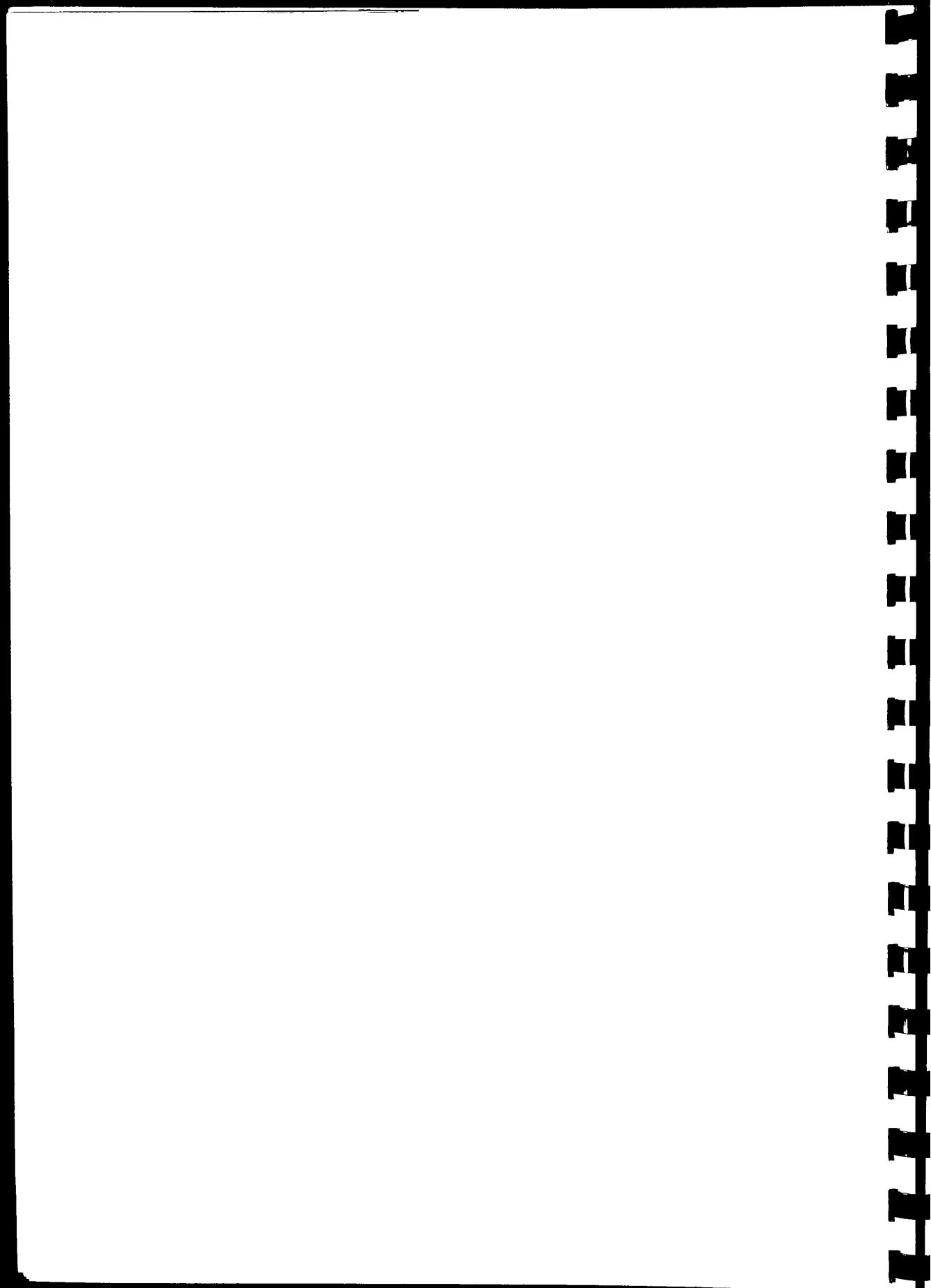
HSD and the Faculty were the only sections of the Fund to register more than a 20% response in this area in Central and Eastern Europe. The section of the Fund primarily interested in this was the Faculty, registering an interest of 47% (7 replies). The Institute and ORS showed only a slight interest in this area. The Institute showed minor interest in community practitioners. ORS averaged a response of 8% (2 people) for most categories. The interest of HSD staff was fairly evenly spread across all sectors of community and social care with no particular topic registering more than a 36% response (8 replies). IR showed a minimal interest in community and social care in this geographical area.

iv) Private health care:

The response to this question was similar to the response received for the European Community in the same subject. There was very little interest in this area among King's Fund staff. IR and ORS were the dominant players, but registered less than a 20% interest in this area.

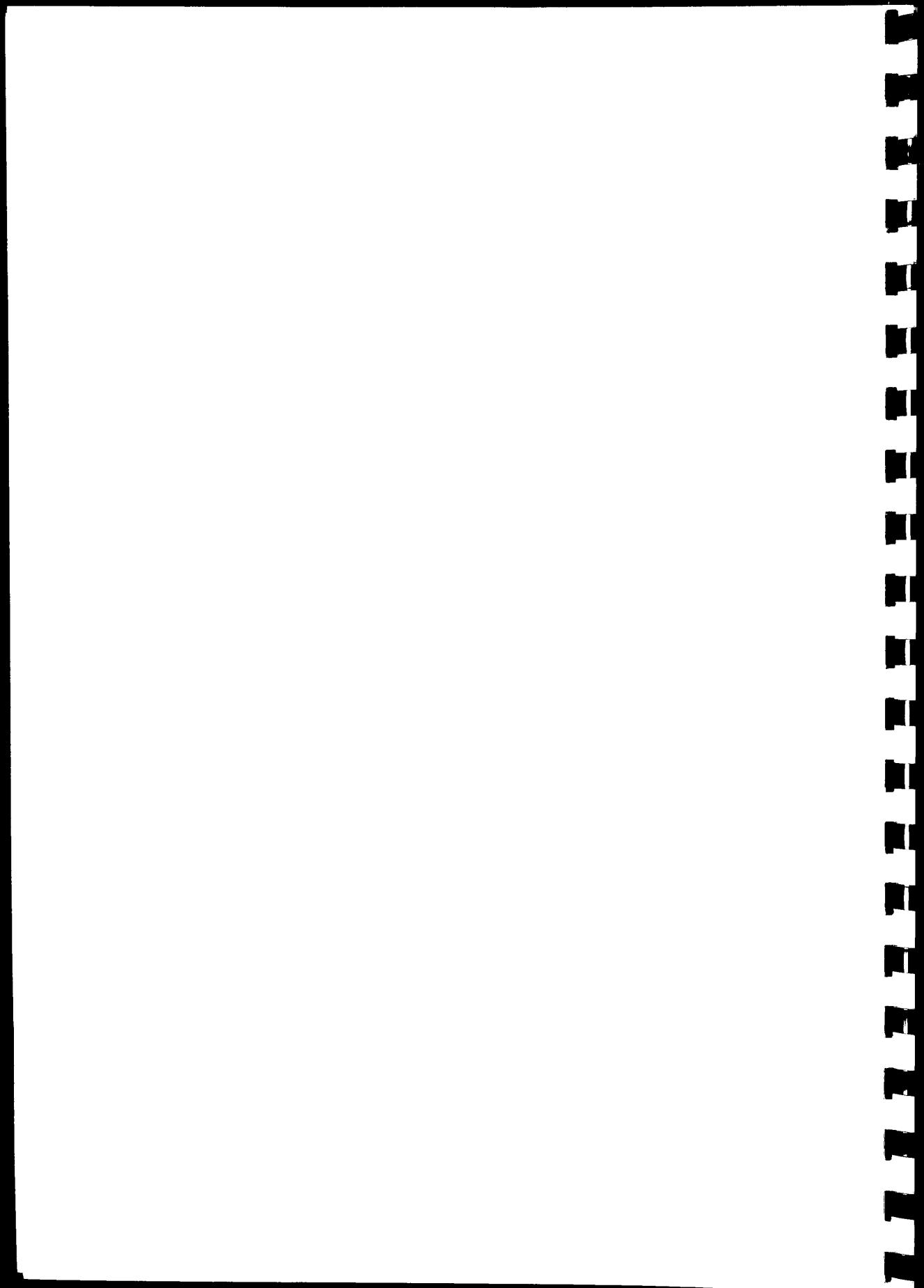
v) Voluntary Organisations:

King's Fund staff showed very little interest in this area. HSD, IR and Faculty produced an average response of 13% to this question. ORS only produced a 4% response (1 reply). The Institute did not indicate any interest in this area.



vi) Special client groups:

Fewer staff were specifically concerned with issues relating to particular client groups in Central and Eastern Europe than was shown in the European Community. The lowest interest was ORS with only one person (4%) replying to this question. The other sections of the Fund were fairly evenly spread averaging 25%. The Institute was concerned with five groups: people with learning difficulties, people with mental health problems, black populations, patients with terminal illnesses and people with AIDS. The interest among IR and HSD was spread across the client sector. Faculty concentrated on elderly people, people with learning difficulties, people with physical disabilities and people with mental health problems.

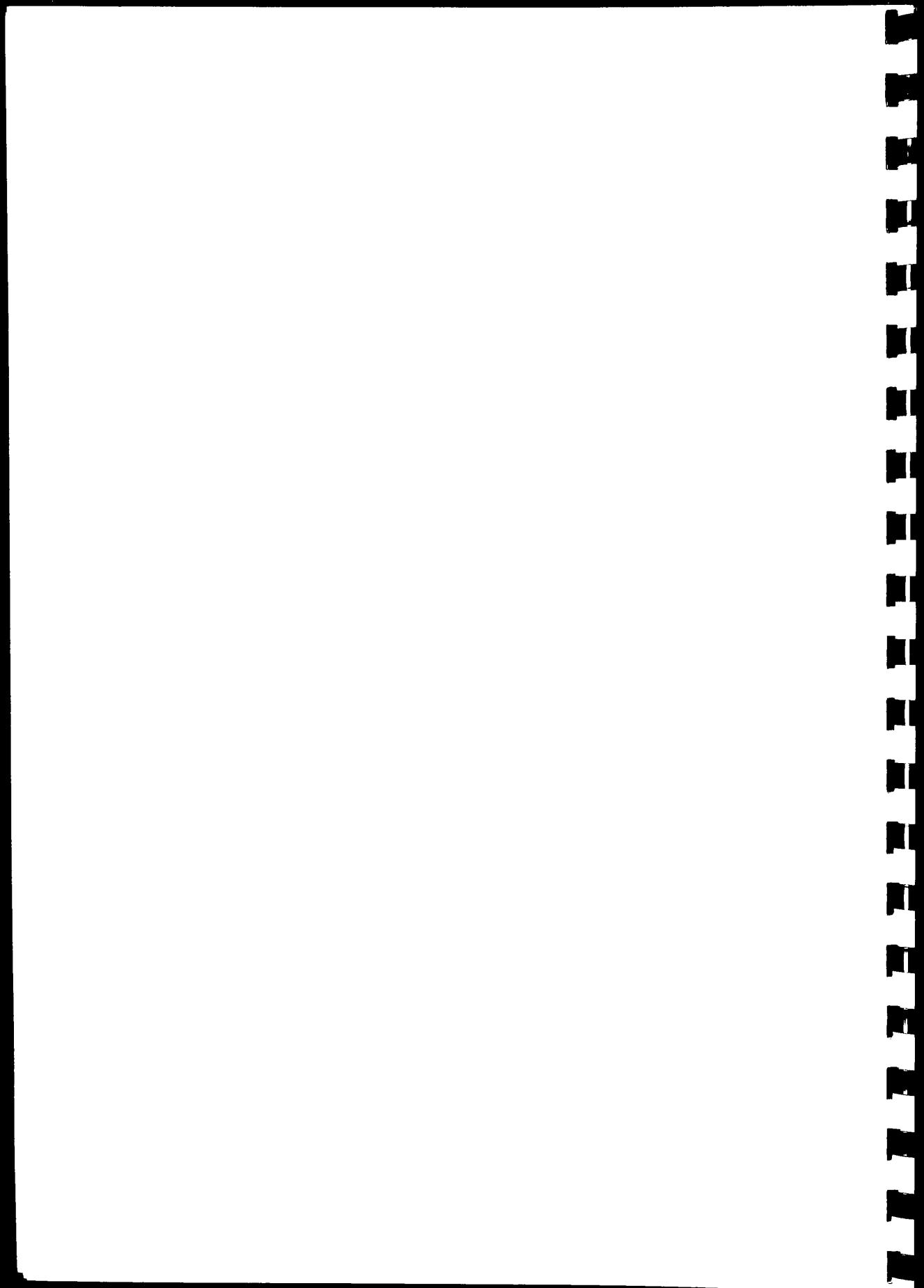


2.3 Other European Countries:

A significant proportion of staff across the Fund were interested in countries outside the European Community and Central & Eastern Europe (see Appendix A, figure 1a). ORS was strongest in this section, with 24 replies (92%). The response rate was less varied between HSD, IR and the institute than responses to the other two European areas mentioned, averaging 55%. It was found that when particular countries were mentioned, the Scandinavian countries were the most popular. However as seen in other regions examined few of the respondents favoured a particular country (see table 3).

Country	Total replies		HSD replies		Inst. replies		Faculty replies		ORS replies	
	No.	%	No.	%	No.	%	No.	%	No.	%
Scandinavia (total)	10	11	3	14	2	20	3	20	0	0
Scandinavia (no specific country)	5	6	2	9	2	10	0	0	0	0
Sweden	4	5	1	5	2	10	2	13	0	0
Iceland	1	1	0	0	0	0	1	7	0	0
Finland	1	1	0	0	0	0	1	7	0	0
Norway	1	1	0	0	0	0	1	7	0	0
Switzerland	1	1	0	0	2	10	0	0	0	0
Austria									1	4
Respondents specifying a particular country			13	14	2	20	2	13	1	4

Table 3
Specific Countries of Interest in Other Areas of Europe



2.3.1 Areas of Interest by Subject:

Data referred to in this section will be found in Appendix A figure 4a, and Appendix B table 3.

i) General areas of health care:

ORS produced the greatest response in this section. Apart from this there was a significant difference between the level of interest shown in the general areas of health care in other European countries, by HSD and Institute staff on the one hand (with an average reply of 47%), and IR and Faculty on the other (20%). The general pattern of interest in particular topics reflected the interests shown in the same section of European Community health.

ii) Acute care:

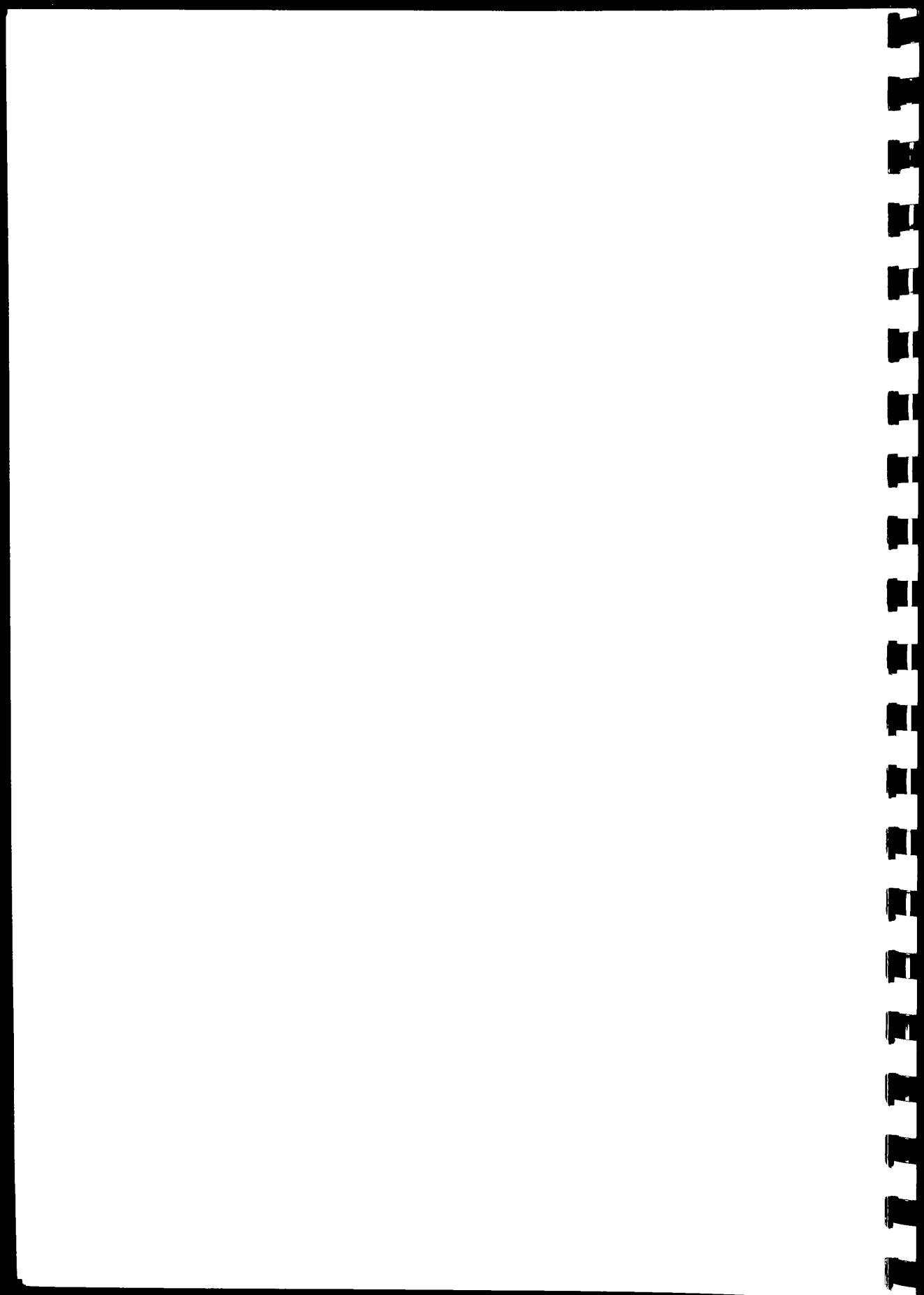
All sections of the Fund were interested in acute care in this area. The greatest level of interest was shown by ORS with 88% (23 replies). 50% (5 respondents) from the Institute showed an interest in acute care, 28% (6) from HSD and 20% (3) from Faculty and IR. The general spread of interest over the different sections of acute care again reflected what appeared in the same section of European Community health care.

iii) Community care:

All sections of the Fund were interested in this area, although not to a large extent. HSD and the Institute produced a reply of around 30% to this question (replies of 7 and 3 respectively), Faculty 20% (3 replies), IR 13% (2 replies) and ORS 12% (3 replies). The main topics of interest in this area were user involvement, with 45% response from HSD (10 replies), 20% from IR (3 replies), 12% from ORS (3 replies), 13% from Faculty (2 replies), and intersectoral collaboration with a response 36% (8 replies), 20% (3 replies), 8% (2 replies) and 20% (3 replies) respectively. The areas of any interest to the Institute seemed to be community practitioners and intersectoral collaboration.

iv) Private health care:

This followed the same pattern which occurred in the



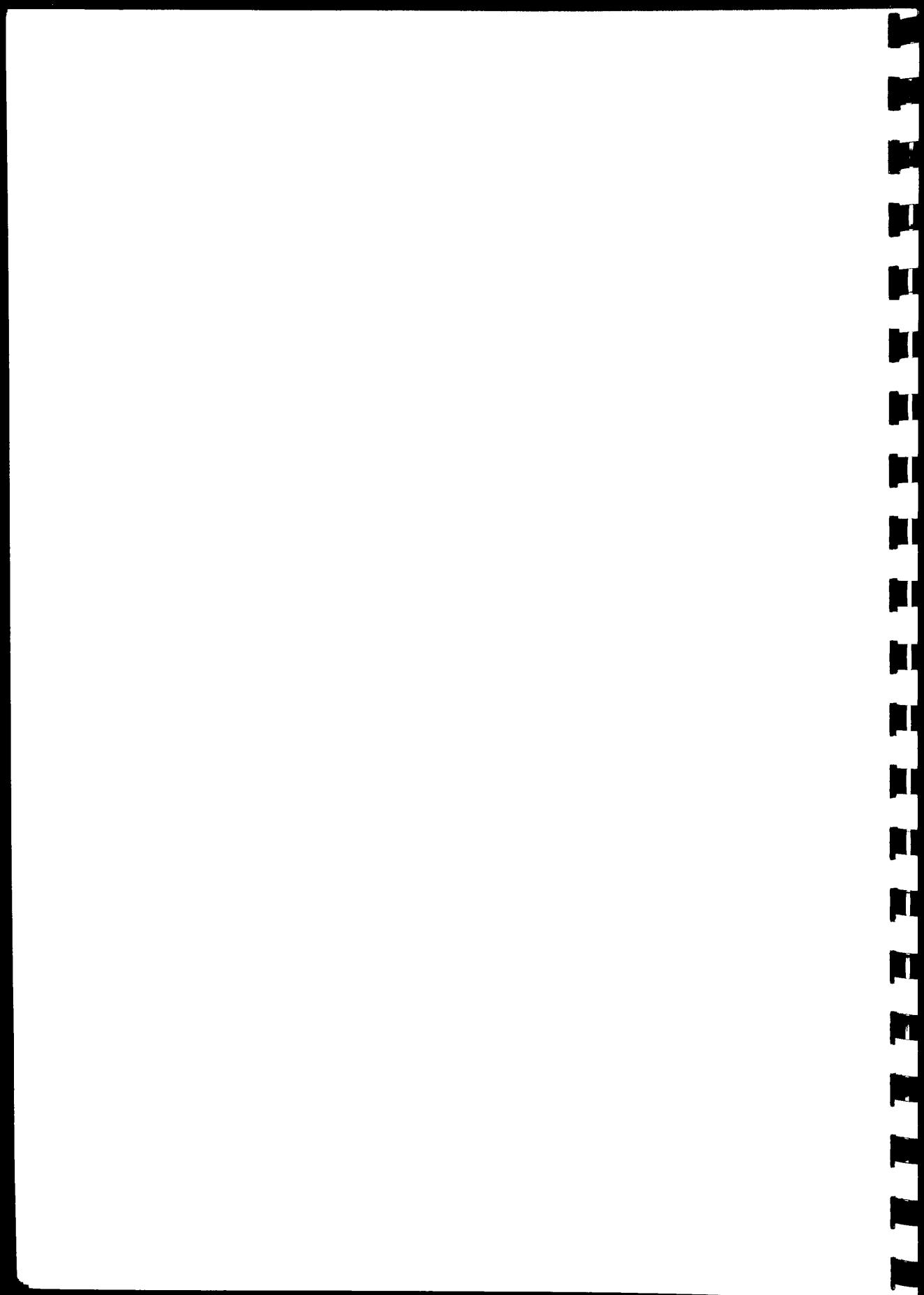
rest of Europe; there was little interest among staff. The highest responses were from IR with 13% (2 replies) and ORS with 12% (3 replies). The Institute showed no interest at all in this area.

v) Voluntary organisations:

The sector of the Fund which was mainly interested in this area was HSD with a 27% response (6 replies). The Institute did not produce a response to this question. The other sections of the Fund registered below 15%.

vi) Special client groups:

There was mixed response to this question from King's Fund staff. HSD was the main section concerned with the problems of special clients (except in relation to homeless people). The Institute showed less interest with the 20% (2 respondents) concerned with black populations and 10% (1 respondent) concerned with patients with terminal illnesses, being the only replies in this section. The Faculty was concerned with elderly people, people with learning difficulties, and people with physical disabilities. ORS only showed an interest in people with mental health problems, patients with terminal illnesses and informal carers.

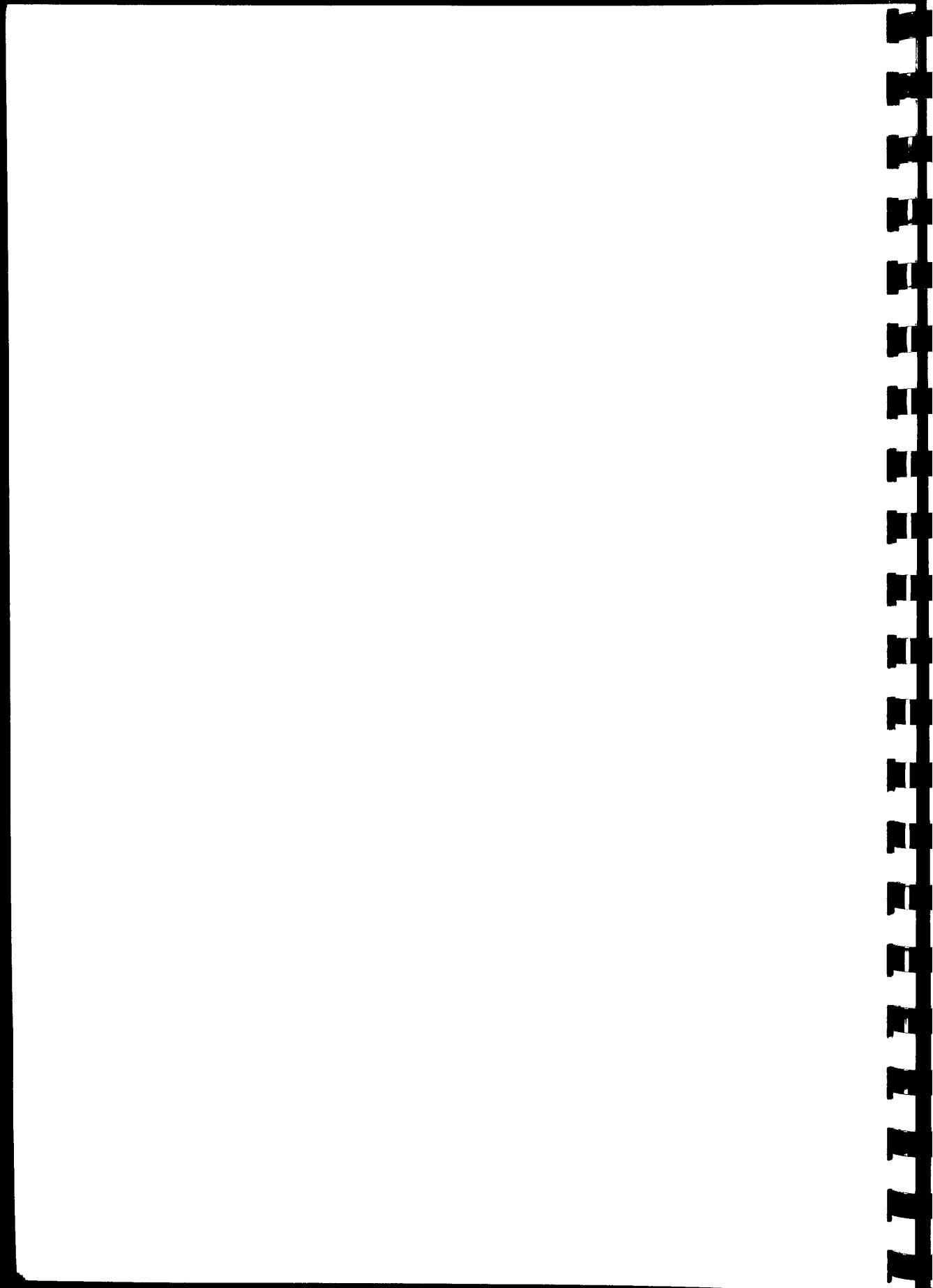


2.4 An assessment of the response from Head Office

The respondents from Head Office showed an interest in health care in all regions of Europe. The particular countries of interest were France, Germany, Netherlands, Sweden, Romania, Czechoslovakia, Hungary, Poland and USSR. There was an equal interest in all the subject areas listed on the questionnaire, except for pharmaceuticals which did not produce a response. Other subjects were listed in addition to the ones printed on the form, namely city health strategy, rationing and balance of services, children (as a client group) and the work of grant making organisations. There was an indication that Head Office was very involved (as opposed to just interested) in Central and Eastern European Health care, especially in the general health care subjects. There was also work being done in futures of acute hospitals, intersectoral collaboration, working with people with AIDS, black populations and homeless people.

2.5 An assessment of the response from Centre Facilities.

Very few staff replied to the questionnaire from Centre Facilities. Two of the three people who did reply were interested in Europe. General areas of health care were of most interest. There was no interest shown in acute or community care. Specific areas of interest included management issues, quality of care, pharmaceuticals, and health and safety. The main geographical area was the European Community, although there was some interest in the rest of Europe. The only specific country that was mentioned was Italy.



2.6 Current Work in Process at The King's Fund:

The amount of work being conducted at the Fund on European health care aspects, was generally far lower than the perceived interest in this area (see Appendix A, figures 6a-8a). Most of the European work that was being carried out in the Fund appeared to be conducted by the Faculty and ORS.

i) Work in the European Community:

88% (23) of ORS were working in the European Community.

53% (8) of Faculty staff were involved in this area. The work covered many aspects of health care.

27% (4) of IR staff stated they were working in this area, again covering a wide area of health care, but predominantly concerning general issues and the acute sector.

14% (3) of HSD staff were working in this area with interests spread across most sections.

10% (1) of Institute staff were involved in general areas of health care.

ii) Work in Central and Eastern Europe:

Three sections of the Fund were working in this area:

47% (7) of the Faculty staff were working in this area, in a variety of health care sectors.

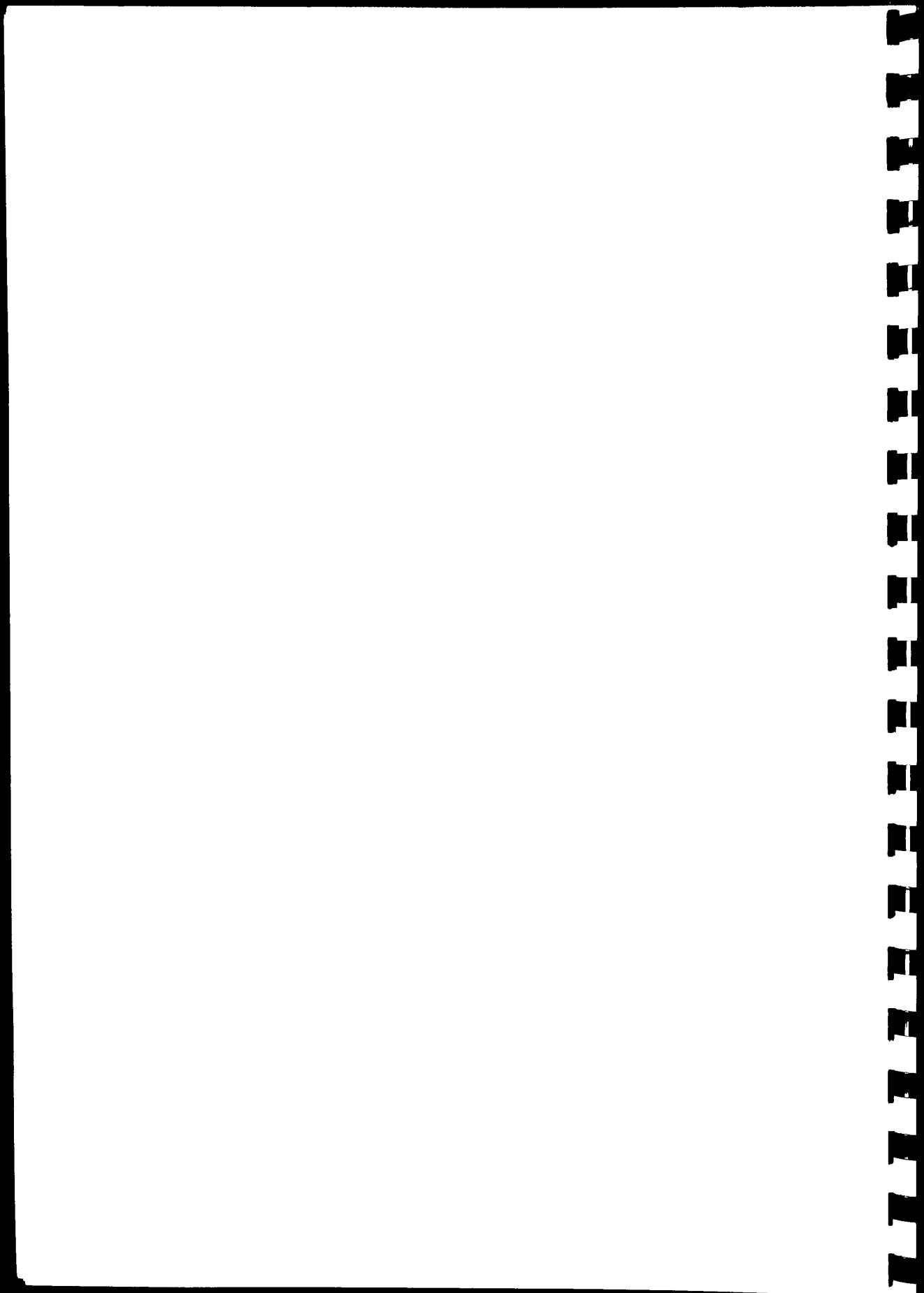
13% (2) of IR were similarly engaged.

4% (1) of ORS were working in this area.

iii) Work in other European areas:

85% (22) of ORS were working in this area in most health care sectors, although they were not working with specific client groups.

20% (3) of Faculty staff were working in areas outside of the European Community and Central and Eastern Europe. The work covered a variety of aspects of health care.



20% (3) of IR were involved in this area.

9% (2) HSD staff were working in other European countries, concentrating on the quality of care and the acute sector.

No Institute staff were working in this area.

2.6.1 Major Pieces of Work Being Conducted or Expected to be started in the near future:

i) Information Resources

- Providing information to the International Organisation for Migration based in Geneva who are doing a review of health care provision for black populations in some European Community countries. [TA]

- Representing the King's Fund on the HECLINET Consortium. [MH]

- Committee member of SatelLife UK, an international satellite communications network devoted to the exchange of health information. [MH]

- Directory of 'Who's Who' in health care management in Central and Eastern Europe (with EHMA and Nuffield Institute). [MH]

- World Health Organisation, Regional Office for Europe, documentation centre. [MH]

ii) Faculty

Members of the Faculty are currently involved in:

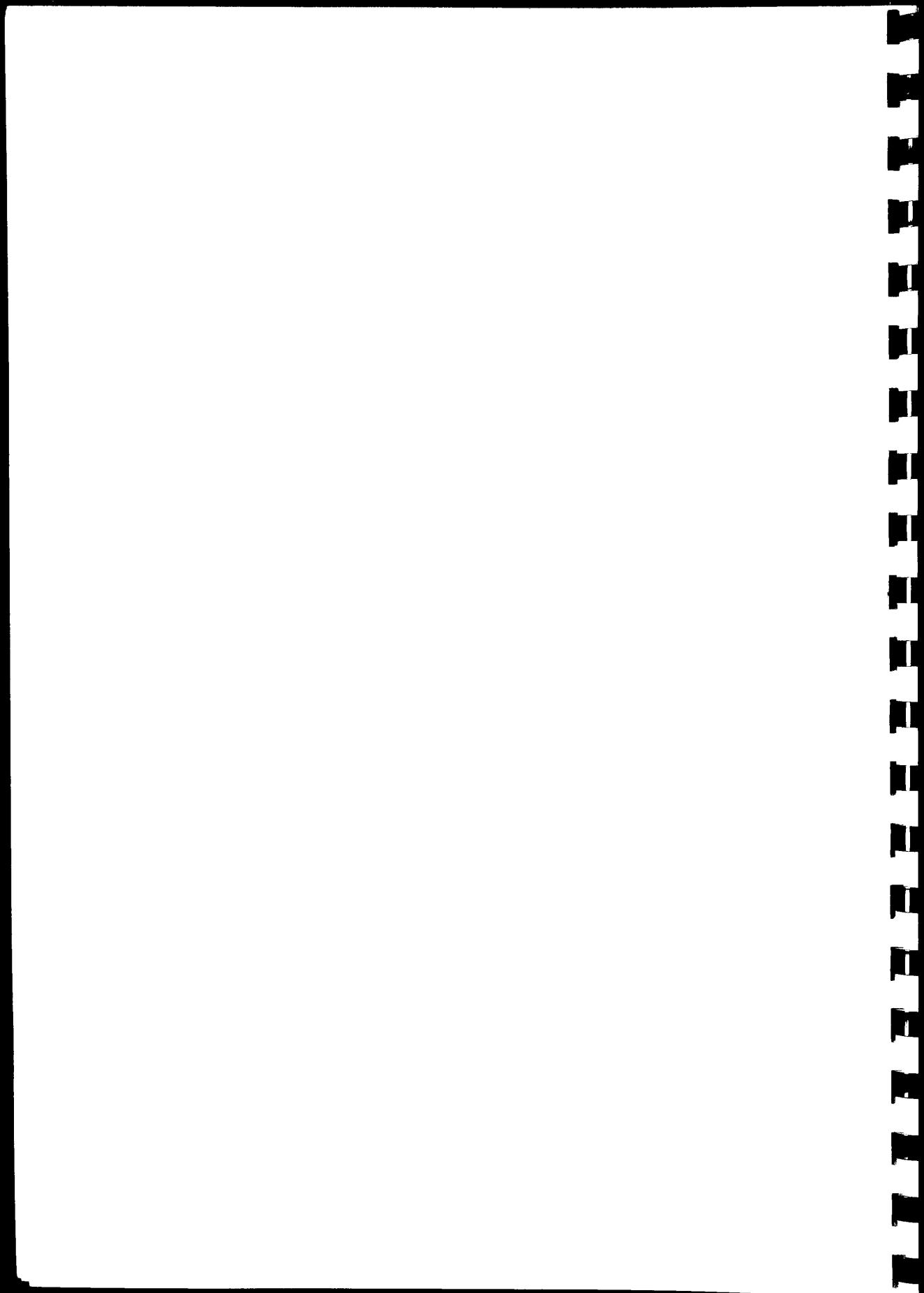
- An initiative on European doctors MD programs. [JM]

- King's Fund EEC development project. [CHam,JB]

- Romanian World Bank project for College/Fund, developing a new health system February-July 1992. [DT,RB,SG]

- Management development in Czechoslovakia. [DT,]

- Involved in strategies for improving services for people with learning difficulties in Czechoslovakia. [DT]



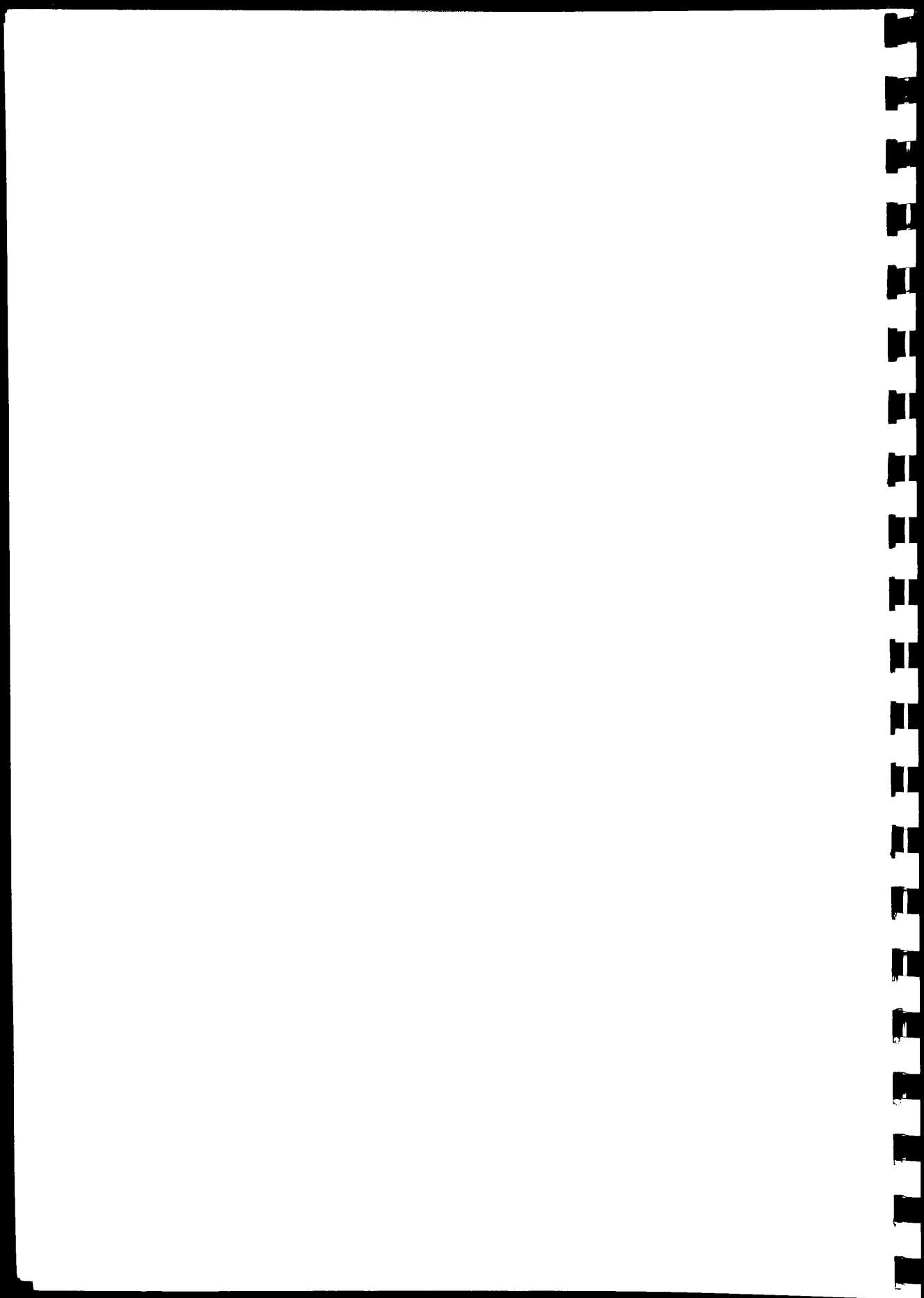
- Involved in Catalonian restructuring in Spain. [JB]
- European health leadership program 1992. [RB]
- International seminar in France. [SG]
- EHMA. [SG]
- Developing the joint centre for health care management in Poland. [CHeg]
- Work with NZI and Hogeschool van Amsterdam on TMPVS projects. [CHeg]
- An analysis for the Fund of the impact of 1992 on health services. [CHam]
- International Learning Networks of purchasers and providers jointly with the Nordic School of Public Health. [CHam]
- A seminar for top policy makers and managers held jointly with the European Health Care Management Association. [CHam]
- Development work in Europe. [JS]
- Work in Sweden on the development of purchasing. [CHam]

iii) ORS

- Looking into the possibility of moving patients across boarders and what impact this may have on the NHS. [CASPE-CG]
- Organisational audit/accreditation, developing standards. [CBT, CP]

iv) Head Office

- Management development in Czechoslovakia (in conjunction with the Faculty. [RM]
- Kings Fund development project in conjunction with the Faculty. [RM]



v) Institute

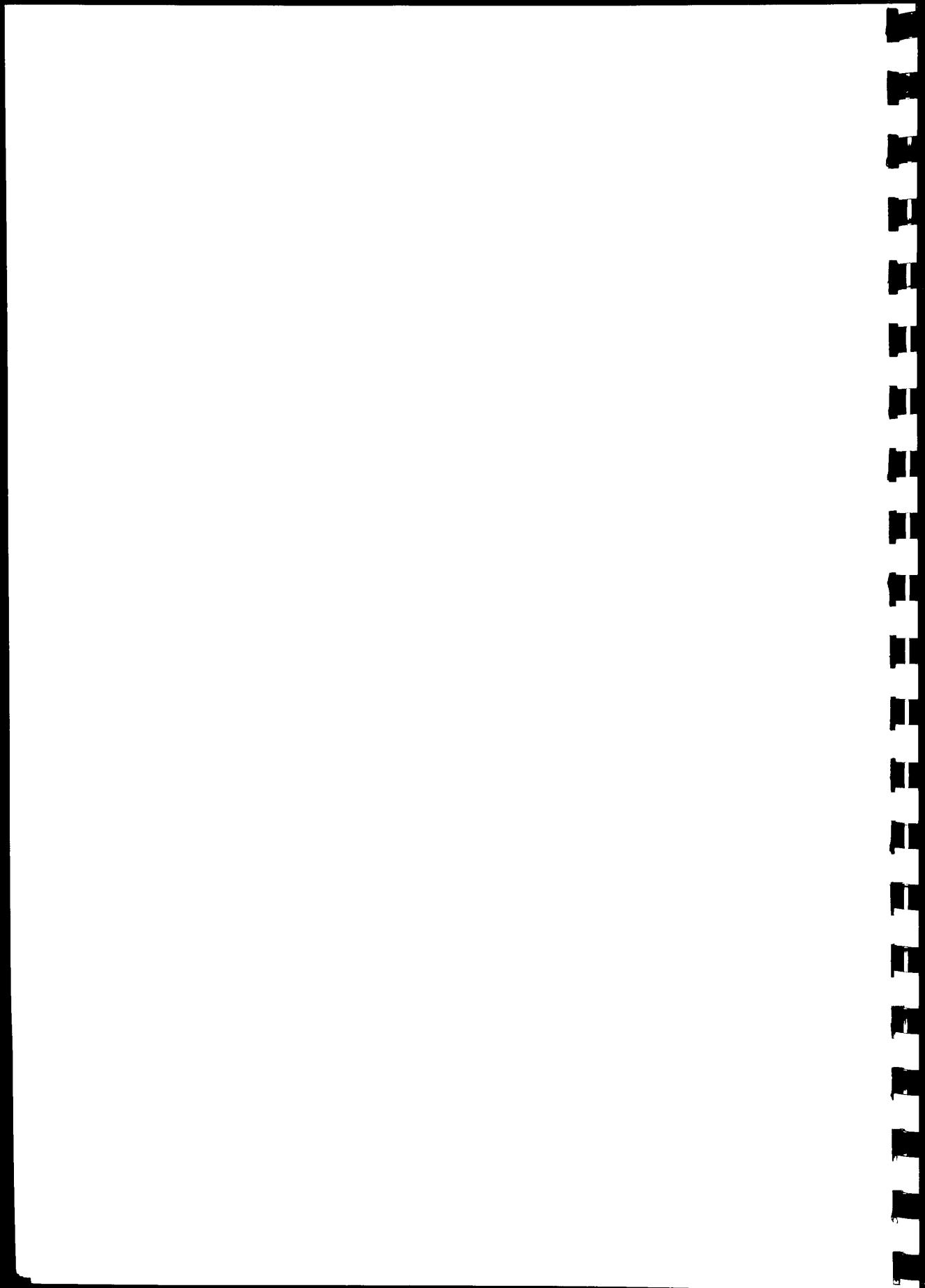
- Possible work on black populations. [CS]
- Pharmaceuticals in the European Community including conference paper in April 1992 on Europe without Frontiers and article in the BMJ in January. [DT]

vi) Health Services Development

- Possible future collaboration with nursing division of world health organisation. [BV]
- Future of acute hospitals in Five European countries. [BS]
- Possible five country Europe wide consensus conference. [BS]
- Consultancy to Navarre regional government regarding primary dental care. [DP]
- Consultancy to Catalonian department of health regarding contracting for health. [DP]
- Development relating to informal caring. [JB]
- A Member of staff publishes a news letter on medical education and would like to have links with European medical schools, to exchange information. [AT]
- Probable involvement with health care professionals after 1992. [LB]
- Future interest in analysing trends in the care of elderly people and how that affects the family. [JRob]
- Conference on the future of acute hospitals, Berlin, February 1992. [DC]

vii) Centre Facilities

- Health and safety/ ergonomics. [CS]



2.6.2 Non Kings Fund European Health Care Projects with which staff have been involved

i) Information Resources

- A member of IR has been involved in organising a conference on black women and the implications of Europe in 1992. [TA]

ii) Faculty

- A member of the Faculty has been involved in research on the harmonisation of health law in the European Community. [CHeg]

- World health organisation program on mental health legislation and services. [CHeg]

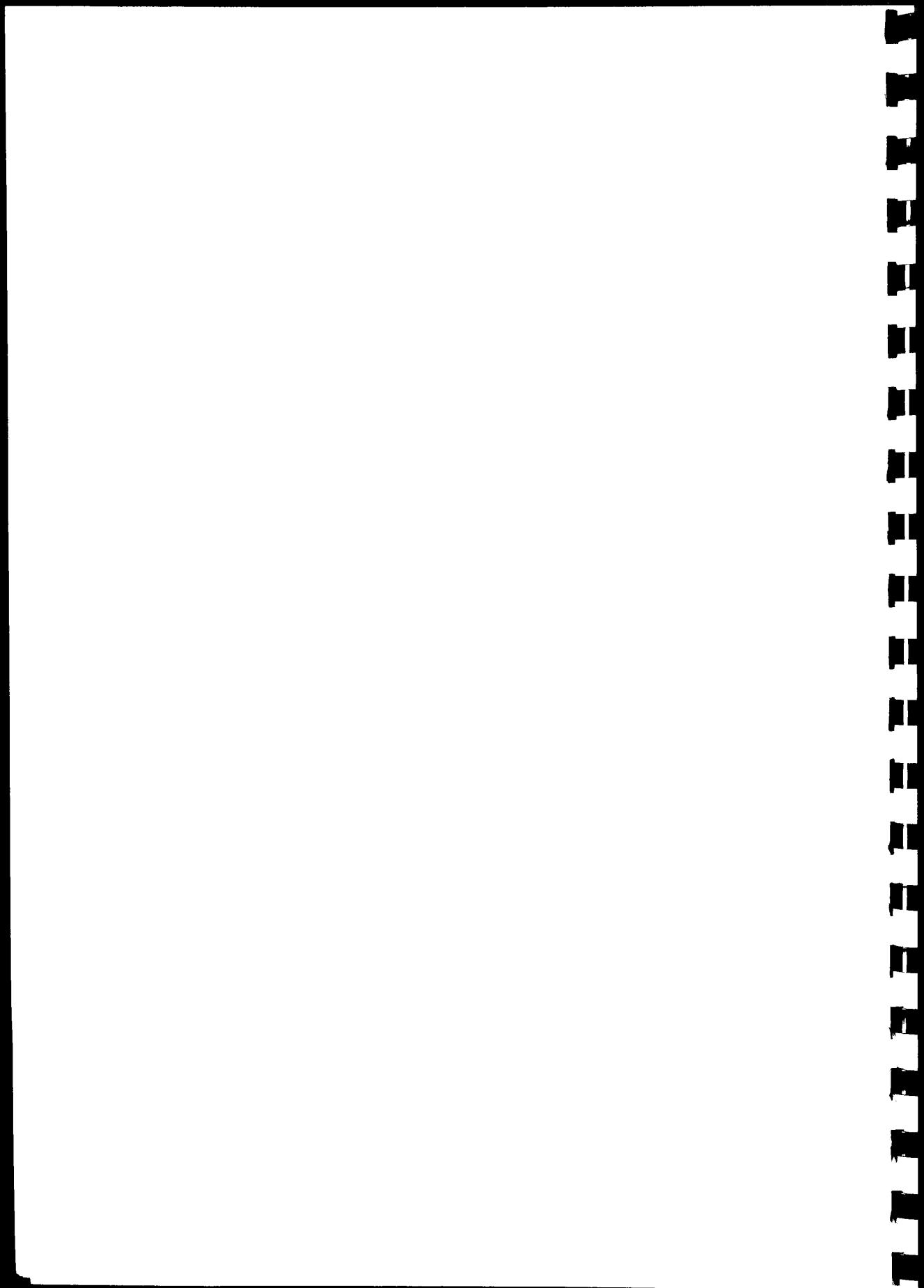
- A member of the Faculty publishes articles on Swedish health care (e.g. in Journal of Health Policy early 1992). [CHam]

iii) ORS

- Training information analysts. [CASPE RESEARCH]
- Common basic data sets. [CASPE RESEARCH]
- Comparison of hospitals case mix and case costs. [CASPE RESEARCH]
- Software products. [GH]
- Comparative Database Services [GH]

iv) Head Office

- A member of Head Office is a former president of EHMA and through that has been involved in a variety of European projects and also has published work on international comparisons in health care. [RM]

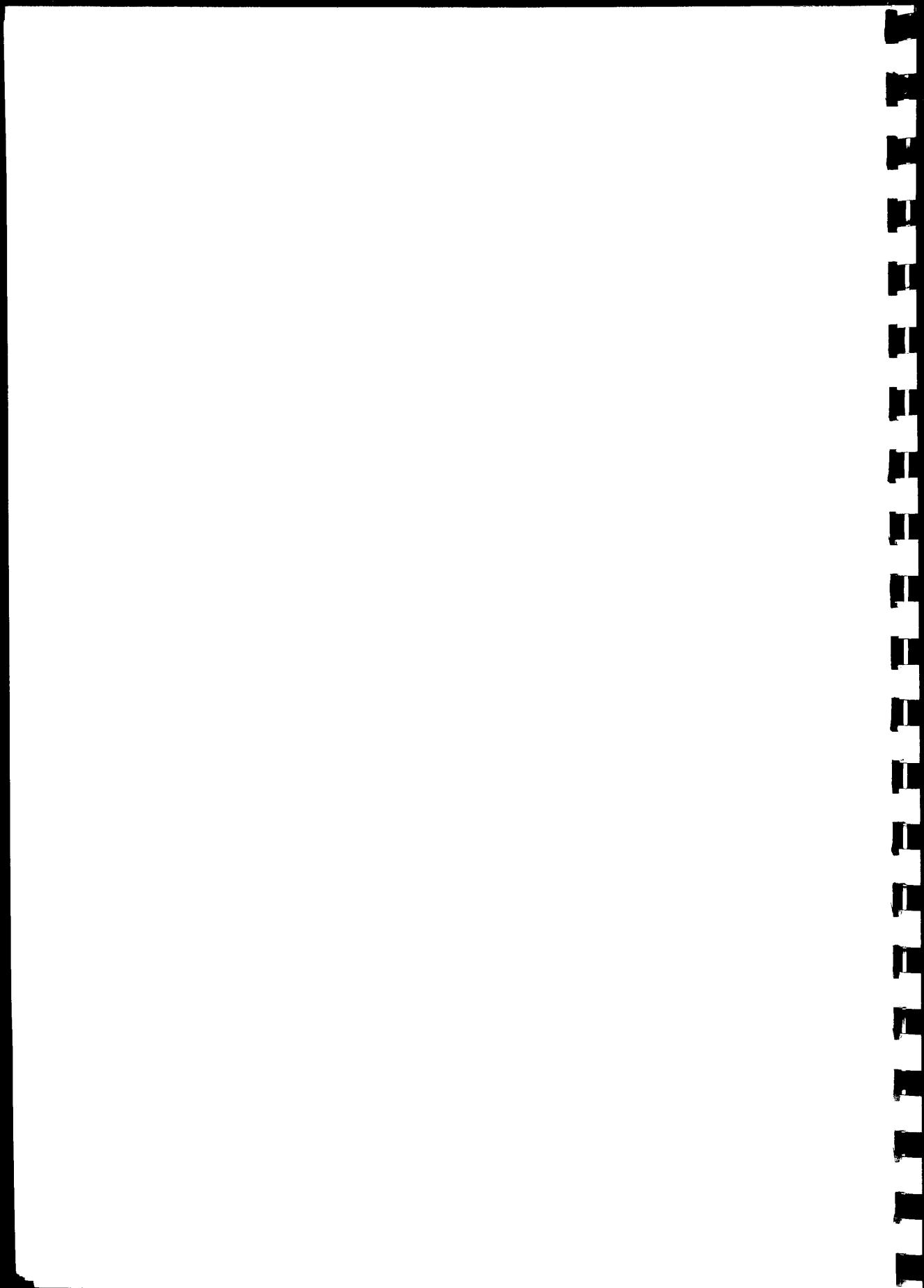


v) Institute

- Effect of long term unemployment on the family health on the Madrid council area. [MB]
- Research on post-traumatic stress conducted throughout Europe (in forth coming issue of the International Journal of Anxiety Research. [MS]
- Links with 'EUROQOL' group working on health status measurement. [BN]

vi) Health Services Development

- Previous consultancy work with World Health Organisation in relationship to generic nursing roles. [BV]
- Assessment of local health care need to determine nursing impact on the health of a defined community. [BV]
- An assessment of the diffusion of medical technology in 12 European countries and Sweden. [BS]
- COMAC, quality assurance in hospitals (HSR). [CS]
- World Health Organisation workshop on quality assurance. [CS]
- Seminar and committee work for the International Society for Quality Assurance. [CS]
- Involvement with the Dutch National Organisation for Quality Assurance in Hospitals. [CS]
- Involved in conducting a comparison of social work practice in child care/neonatal care between UK and France. [MD]
- Future involvement in European Year of the Elderly Person. [JRob]



2.7 Conclusion:

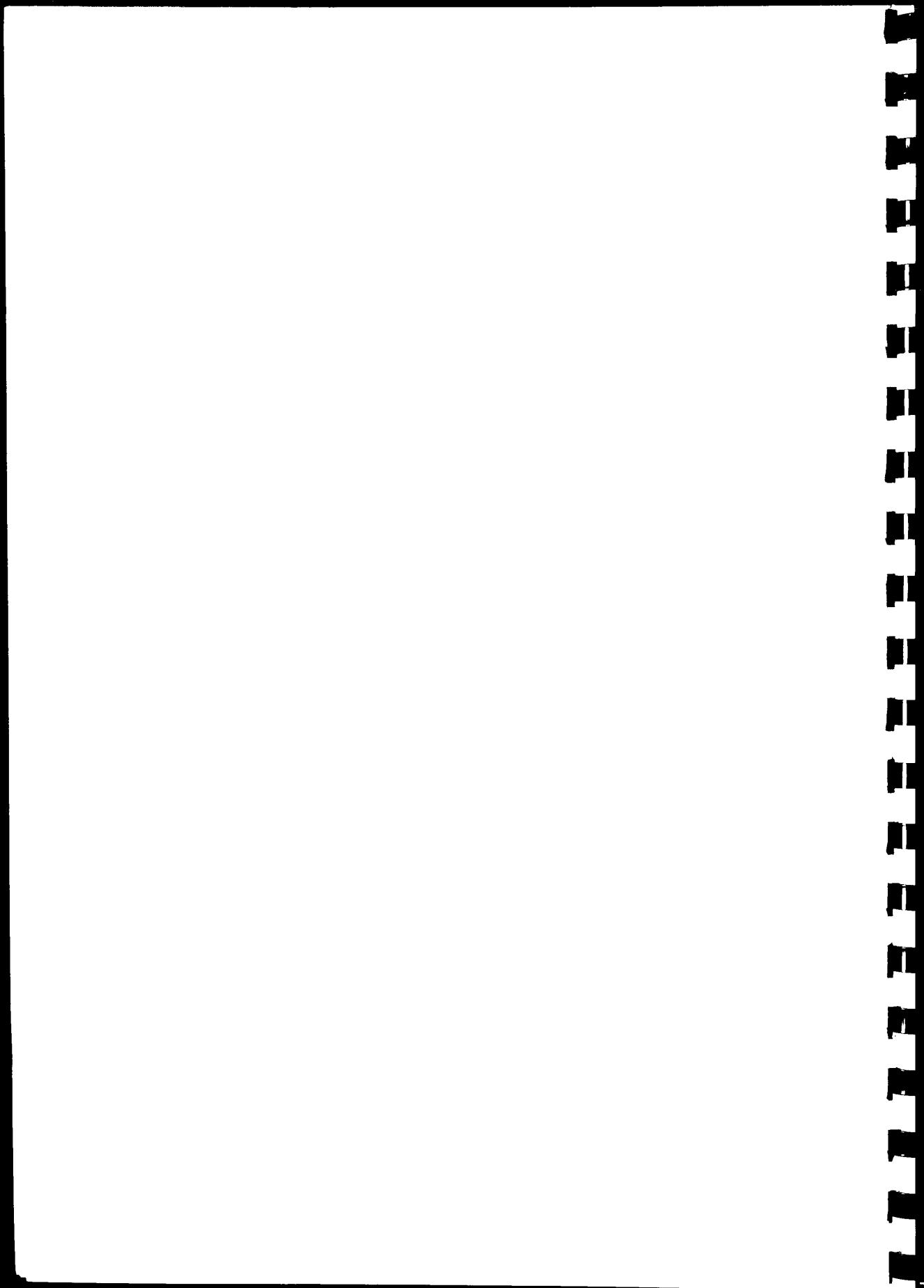
There was a great deal of interest shown amongst King's Fund staff in European health care issues. Overall the main geographical area of interest is the European Community, although a significant proportion of staff show an interest in other regions. Faculty and ORS staff have a strong concern for Central and Eastern Europe.

Very few members of staff are only interested in specific countries. When a preference is shown, the particular areas of interest in the European Community are the Netherlands and Spain; in Central and Eastern Europe, Romania and Czechoslovakia; in other European areas Scandinavia (especially Sweden). The Institute has the most interest in Scandinavia.

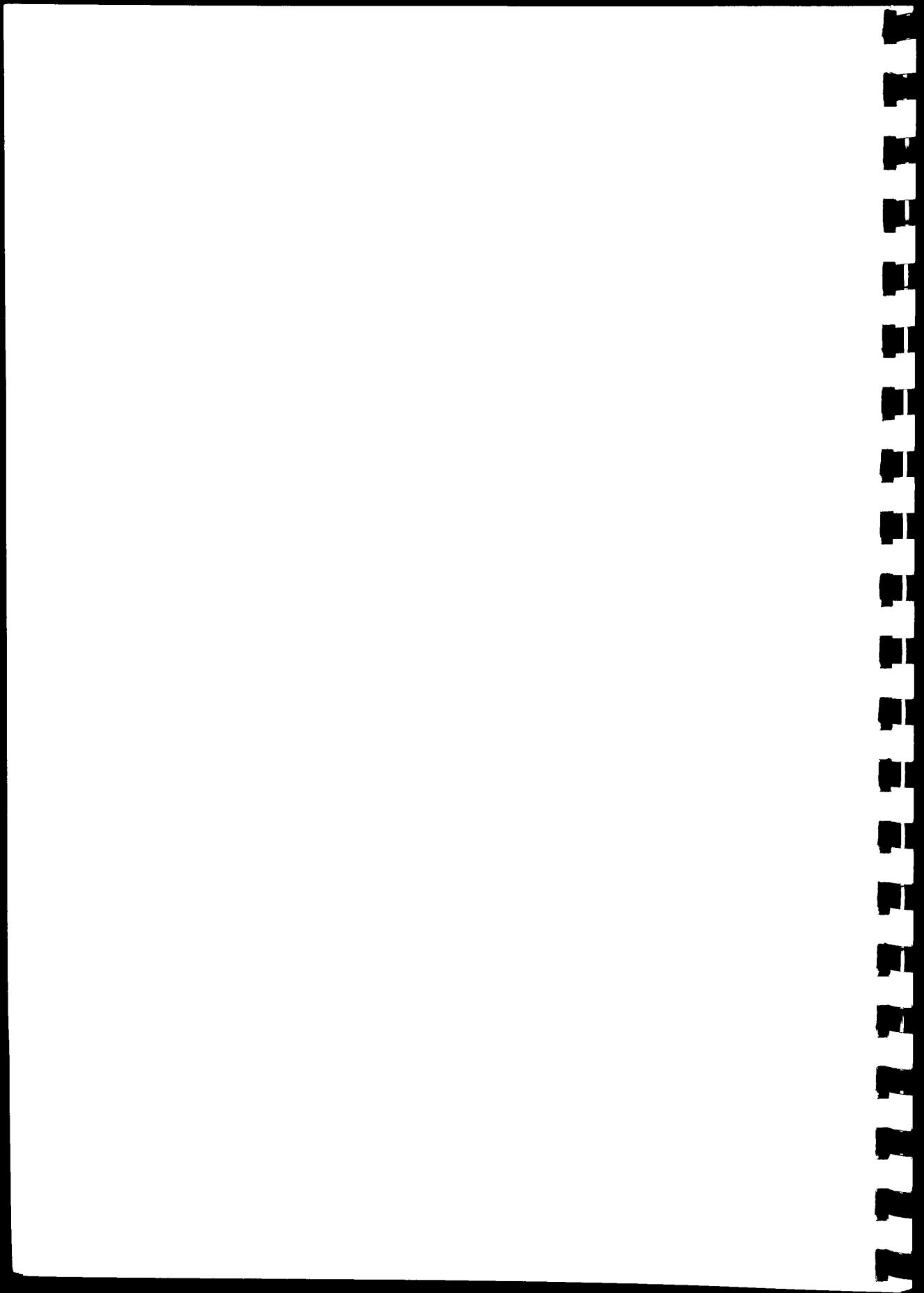
The number of staff interested in a particular subject varies considerably depending on the topic, geographical area and the King's Fund section concerned. General issues in management, organisational development and finance across Europe are the main concern of the Faculty. The Institute is mainly interested in financial aspects but also show a strong interest in acute care, although it has little interest generally in subjects in relation to Central and Eastern Europe. IR has a strong concern for community care, but this is not evenly spread across the region, being mainly in the European community. The particular topics of interest to IR are information systems for users and the quality of services. HSD and ORS are also concerned with the quality of services. The areas which are generally of least interest across the Fund are pharmaceuticals and the movement of health professionals.

The areas of interest are reflected in the work that is currently being done in European health care by King's Fund staff. There are some major projects being conducted by the Faculty in Central and Eastern Europe especially Romania and Czechoslovakia.

Primarily it is the Faculty and ORS who are actually working, as opposed to just interested in, the other European areas, although there is some important work going on elsewhere in the Fund, with staff publishing papers on different aspects of health care. Staff are also organising courses and conferences and doing consultancy work. The number of specific projects in the Fund and the amount of non King's Fund European work with which staff are involved, highlights the large amounts of expertise in Europe in the Fund which can be capitalised on.



It is noticeable that many more people are interested in European health care than are actually working on it, and the impression given is that there is a high hope amongst staff that more work will be done in this area, although the work has not yet 'been defined'. A Fund wide study day in February 1992 may help to define further European activities.



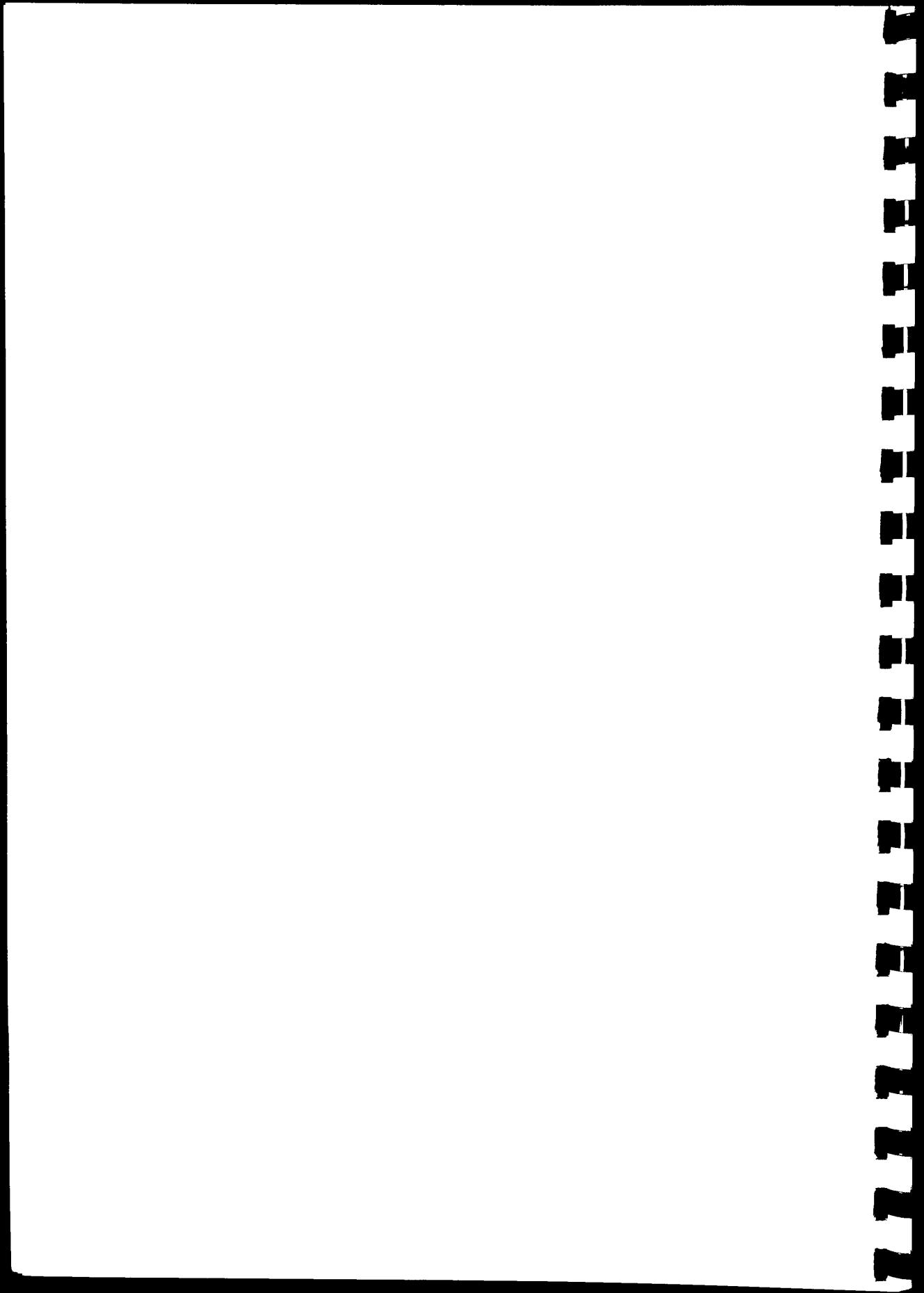
3.0 The European Literature Interests of King's Fund Staff

The Centre Library is investigating the possibility of including more European material in its collection. In order to do this the Information Resources department needs to know not only the geographical area and the subjects of interest, but also the specific type of literature which is required by staff. An analysis of the replies to the survey showed that the type of material required varied between different sections of the Fund.

From the point of view of the Centre Library, the interests of HSD and the Institute, who constitute this library's primary internal user group, are the most important. (Center Facilities have again been analysed separately in this section due to the low response rate, although it is recognised that they do constitute part of the library user group). The replies from Faculty, ORS and Head Office will be of interest to the College library and will also be considered by the Centre library when developing collections.

HSD

HSD staff showed a need for all types of literature, although some material was requested more than other material (see Appendix C, figures 1b-5b). The documentation of least use to HSD staff was student theses with only one person (5%) interested in these. Also low on the list were pamphlets (9%, 2 replies) and text of conference speeches (14%, 3 replies). Contacts of people and organisations were the most sought after material with 59% (13) respondents requiring this information. The next highest were position papers and official statistics (41%, 9 replies). The question on journals produced a moderate response (27%, 6 replies). Two people provided more detailed information on their specific requirements, showing a preference for English language journals like Helios (see table 5) and specifying that short articles linking British and European issues were the sort of items required. Few members of HSD staff wanted the library to collect non-English language material; of the three replies received, one wanted Spanish literature and two showed an interest in French language material. One of the latter stated that some policy documents were only available untranslated (see table 4).

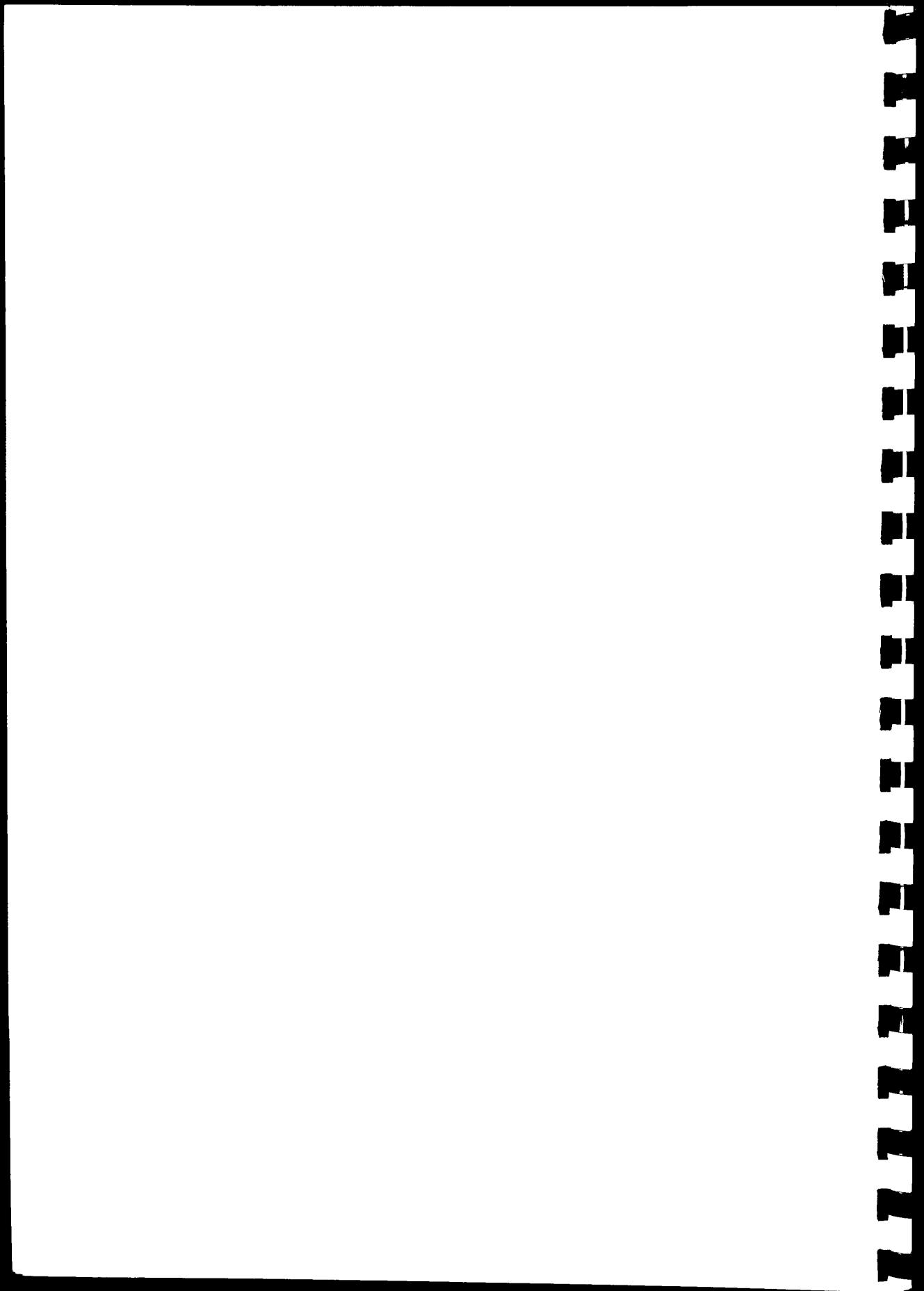


Language	IR		HSD		Inst.		Faculty		ORS*	
	No.	%	No.	%	No.	%	No.	%	No.	%
French	4	27	2	9	1	10	4	27	21	81
Italian	1	7	0	0	1	10	0	0	21	81
Spanish	1	7	1	5	0	0	1	7	21	81
Yiddish	0	0	0	0	0	0	1	7	0	0
Dutch	0	0	0	0	1	10	0	0	0	0
Scandinavian	0	0	0	0	1	10	0	0	0	0

* Only CASPE Research replied to this question.

Table 4
Language Material of Interest

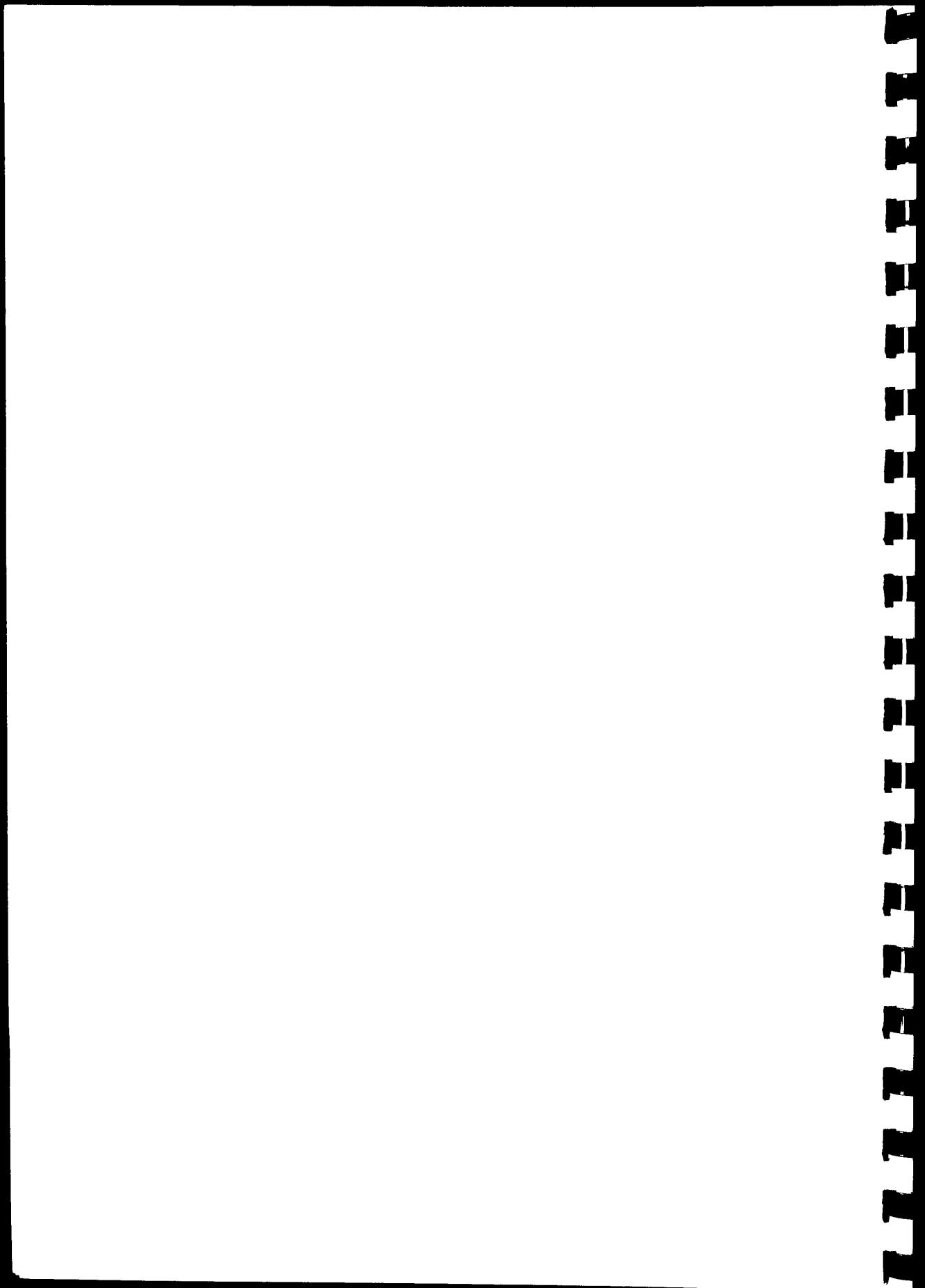
Note: Not all the people who showed an interest in foreign language material could read/speak the language. An informal survey of some respondents to this question showed that whilst they had a knowledge of languages other than English (notably French), including languages not mentioned by the respondents on the questionnaire (for example Polish), they were not necessarily fluent.



Journal	Section of the Fund
JAMA (Journal of the American Medical Association)	ORS
Medical Care	ORS
Inquiry	ORS
New England Journal of Medicine	ORS
International Journal of Health Sciences	INST.
Neiue d'epidemiologie et de sante publique	INST.
European Journal of Health Policy	INST.
Health policy	FACULTY, IR
Social Science and Medicine	IR
European Journal of Public Health	FACULTY, H.O.
International Journal of Public Health policy	H.O.
Health Affairs (Belgium)	FACULTY, H.O.
Lancet	IR
Nursing Times	IR
Nursing Standard	IR
Newsletter European Health libraries	IR
HELIOS	HSD
International Journal of Health Planning and Management	FACULTY

Table 5
Specific Journals of Interest to Staff

Note: only one person showed an interest in each of the above journals, unless otherwise stated. The table shows the section of the Fund to which the person who was interested in the journals belonged.



Institute

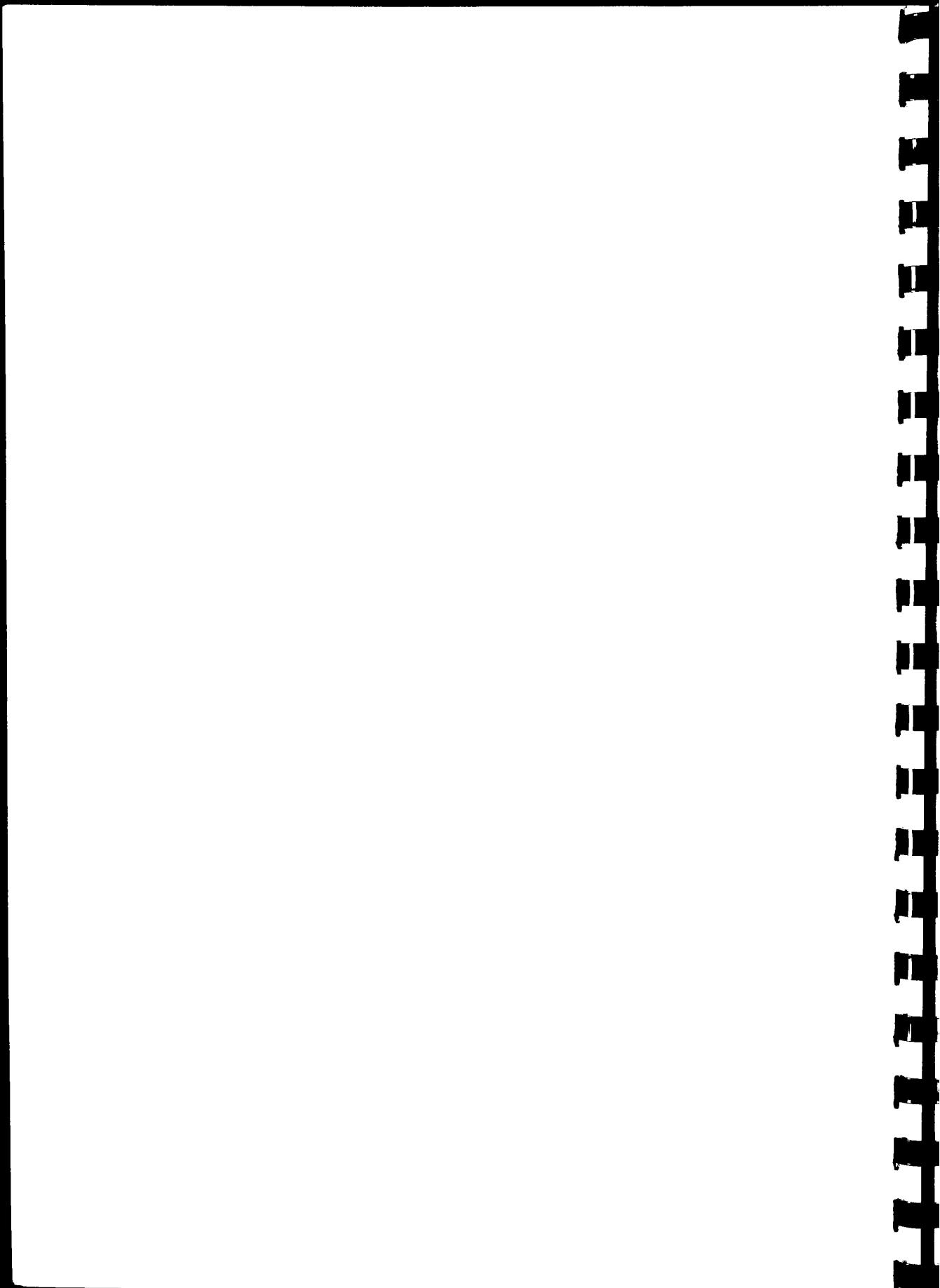
The type of literature required by the Institute differed markedly to the literature required by HSD staff (see Appendix C, figures 1b-5b). The response was focused on specific types of material, with almost half the categories producing no replies at all. Two people emphasised that what was required depended to a large extent on the topic which was being researched, a theme which also appeared in Faculty and Head Office responses. The Institute staff, reflecting their mainly research based work, showed the greatest interest in academic material with 60% (6 people) responding to this question. This was followed by research in progress and statistics (both official and unofficial) which produced a 50% reply (5 people). Less interest was shown in contacts of people and organisations with only a 20% response (2 replies). The lowest of the sections which received a reply were conference proceedings and press clippings, 1 response (10%). Directories and government statutory documents received no response at all. A larger proportion of Institute staff were interested in journals than HSD but only one person specified journals of particular interest (see table 5). The language requirements were more diverse than HSD although a similarly lower number of respondents considered such material useful. The languages mentioned were French, Spanish, Italian, Dutch, German and the Scandinavian languages (see table 4). It was pointed out, as it had been by HSD, that some useful material is not available in English. More people may be interested in foreign language material if there was a translator available at the Fund; more than one member of staff asked if there would be a translation service available.

Centre Facilities

The respondents from Centre Facilities showed an interest in statistics (official and unofficial), government reports, grey literature (excluding position papers), and contacts of people and organisations.

Faculty

Faculty, like HSD, displayed an interest in all types of literature, although the areas of specific interest differed greatly (see Appendix C, figures 6b-10b). The most useful information to Faculty was contacts of people and organisations, with 47% (7 respondents) showing an interest in this type of material. There was also a strong interest



in university/academic material and official statistics, 40% (6 replies) each. The least popular items were material from voluntary organisations and text of conference speeches. Most of the categories had a reply of 20-40%. Some staff showed an interest in types of literature not listed in the questionnaire; these seemed mainly to relate to specific work subjects, echoing the Institute response that the type of literature required varies depending on the subject of the work staff are doing. Faculty requirements included:

- Law reports and EEC regulations
- World bank consultancy reports
- OECD publications on health expenditure
- Literature on women in management

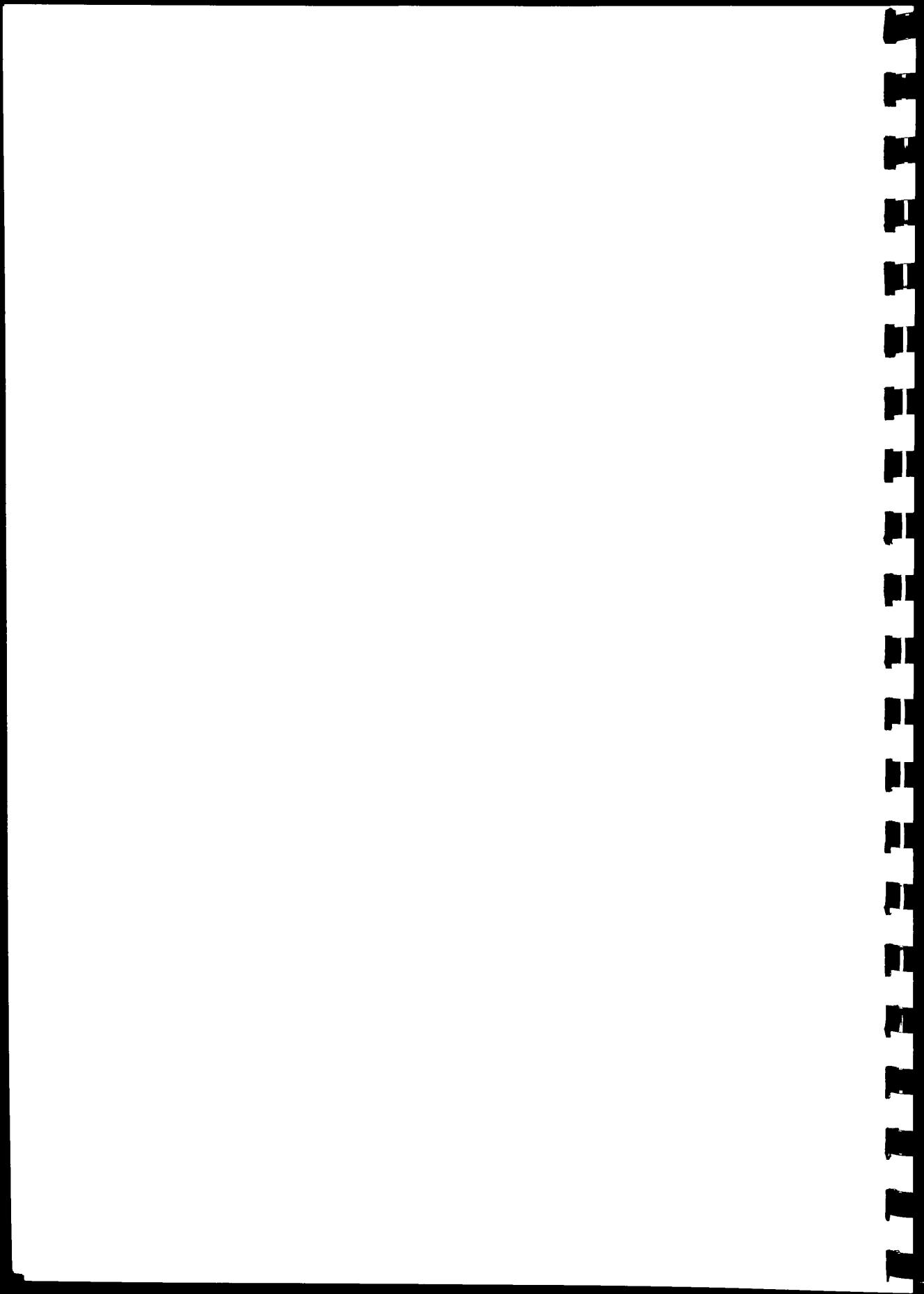
Journals were fairly low on the list of priorities with 27% of staff (4 respondents) interested in journals on European health care. The majority of staff who replied to this question specified particular titles (see table 5). It was noticeable that some of the journals which were mentioned by King's Fund staff are already held by the Centre or College library. Faculty showed a limited interest in non-English language material, French being the most popular. Also on the list were Yiddish, Spanish, German and Italian.

ORS

ORS showed an interest in all types of literature (see Appendix C, figures 6b-10b). They were mainly concerned with statistics (official and unofficial), conference proceedings and university material. There was also an interest shown in journals. Languages which may be of use included French, Italian, Spanish and German (see table 4).

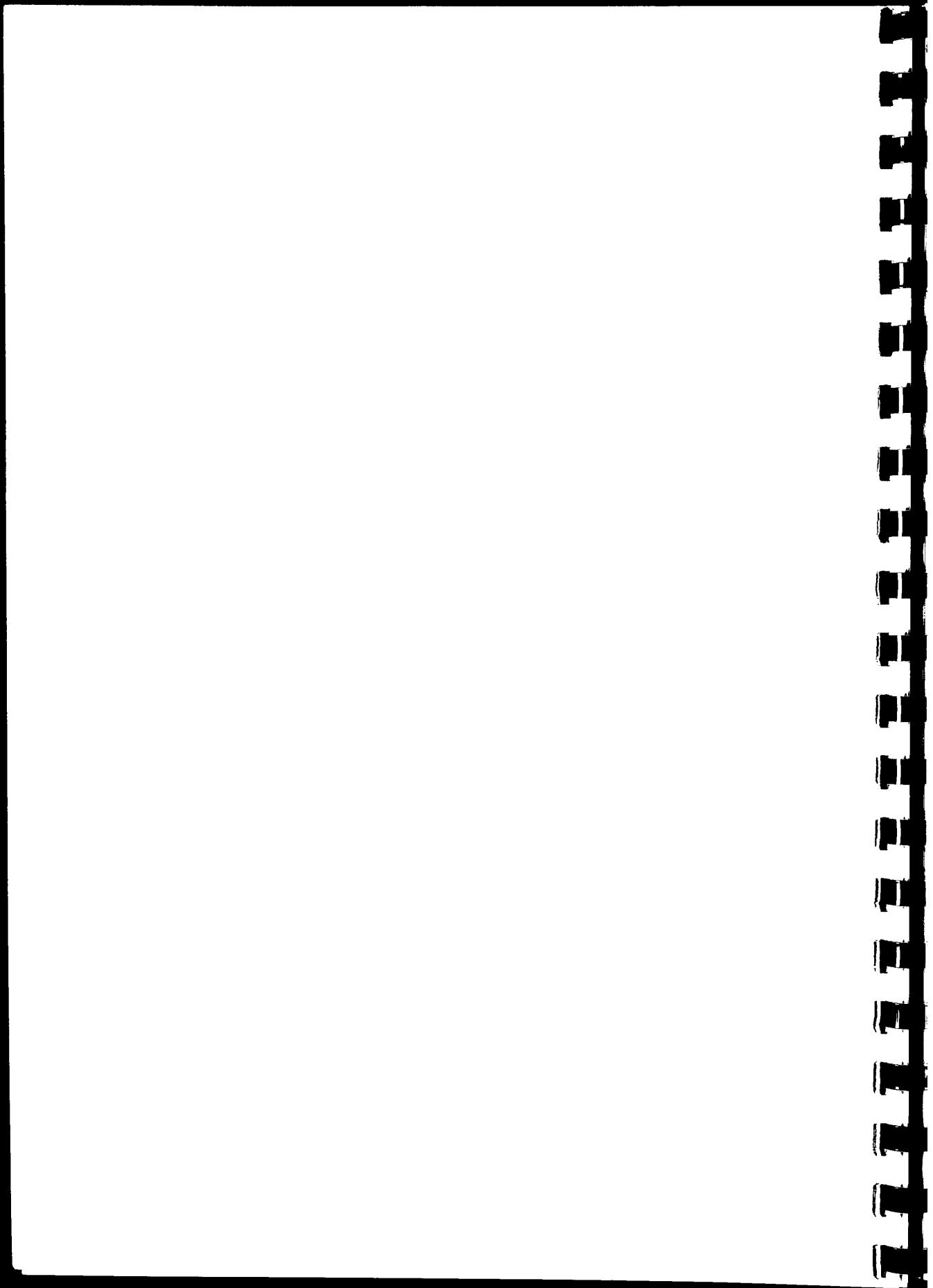
Head Office

Head Office staff were interested in a wide variety of material; books, journals, grey literature and other items were mentioned. It was the quality of the material which was emphasised by Head Office. Particular items of interest were analytical (rather than descriptive) studies. Journals were also useful, with some specific titles mentioned (see table 5). The language requirement was English except for some important items which are only published in the natural language, for example some CREDES publications.



Information Resources

IR, like HSD and Faculty produced at least one respondent who was interested in all the types of literature listed (see Appendix C, figures 1b-5b). The main interest of IR were directories and contacts of people and organisations. This probably reflects the reference and enquiry work the department does. The materials of least interest, similar to the other sections of the Fund, were student theses. Also low on the list were conference proceedings, unofficial statistics, positions papers, and text of conference speeches with 13% (2 replies) each. A third of staff were interested in journals. No new journal titles were mentioned although one person was interested in any journals on a specific topic (library and information management). The specific journals listed were all in the current library stock. Four languages were of interest to staff. These were French, German, Spanish and Italian (see table 4).



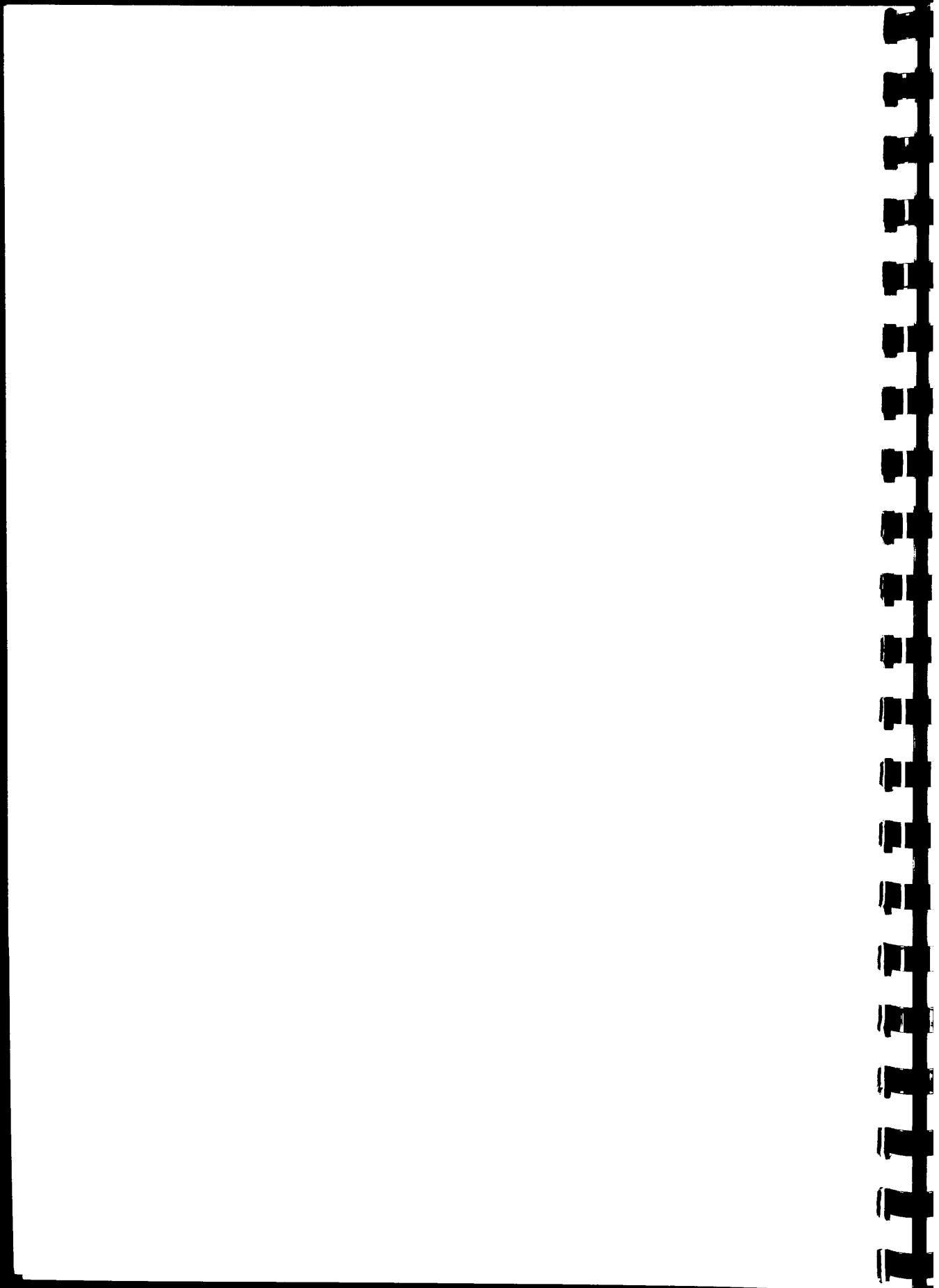
3.1 Conclusion

If the Centre Library decides to expand its collecting policy to include more European material, the literature which would be of most use to staff, would be contacts of people and organisations. This could be an extension of the British health care index which is currently maintained on cards. Many contacts are also listed in directories which the IR staff (who are probably more familiar with the depth of material generally contained in such items) highlighted as a major information source.

University and academic material (not student theses) would also be of use to a large number of staff, as would statistics. Most other types of material would interest at least some staff. Journals do not appear to be a major source of information for most staff although some specific European journals were mentioned. It is possible that many staff do not know which European health care journals are available. At least one person asked for a list of them. This is something which could be investigated in the future by the Information Resources department.

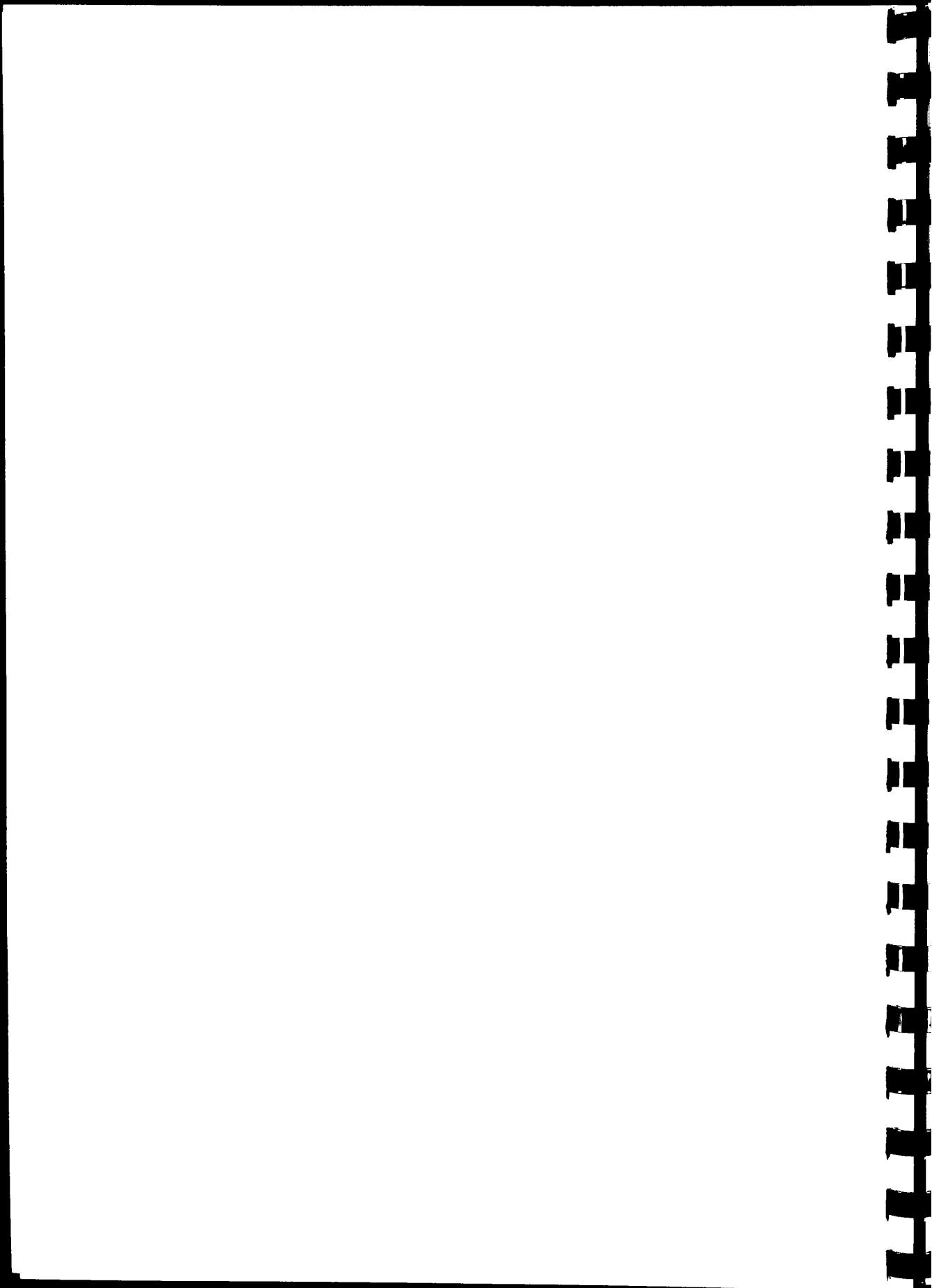
There is not at present a strong demand for foreign language material. If such material were to be collected in the future, consideration would need to be given to any 'key' items which are only available in untranslated format. Specific items mentioned included material published by CREDES and policy documents.

The overall impression which was given was that it was the quality of the literature which was the most important consideration when assessing its value to library users.



Appendix A

European Regions and General Topics of Interest



European Areas of Interest (incl. work)

Measured as % total respondents from
each section of the Fund

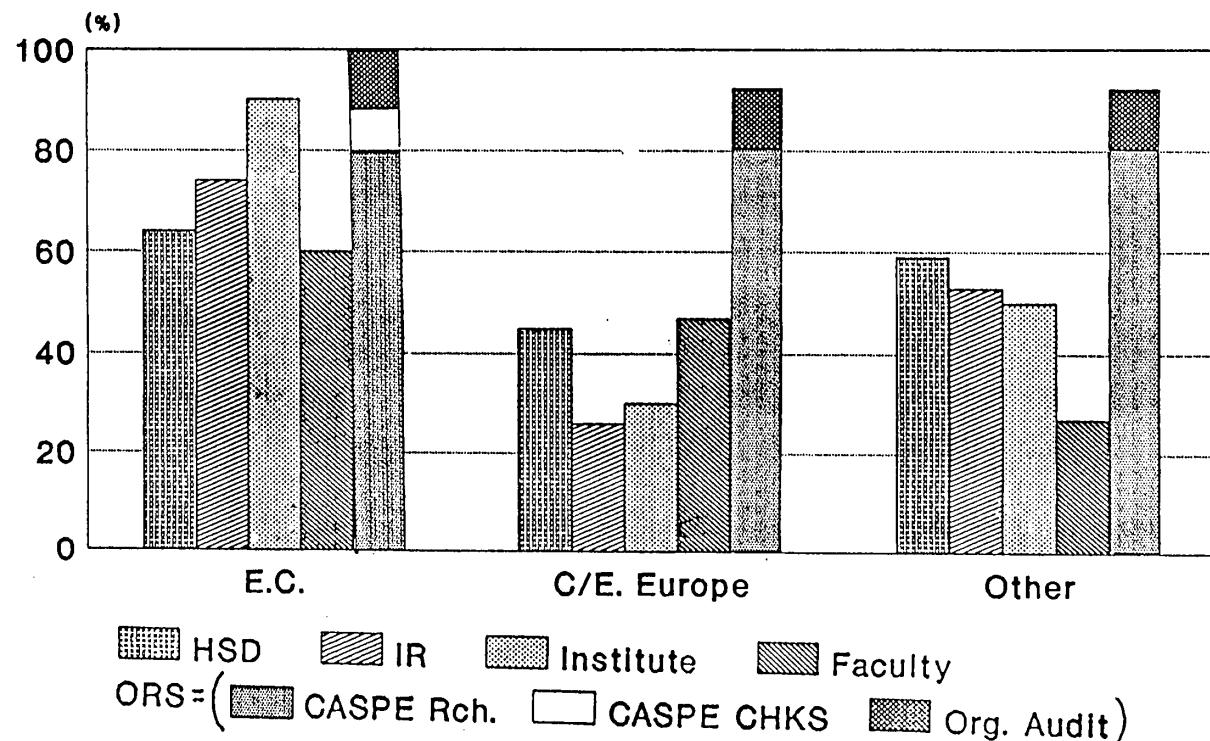
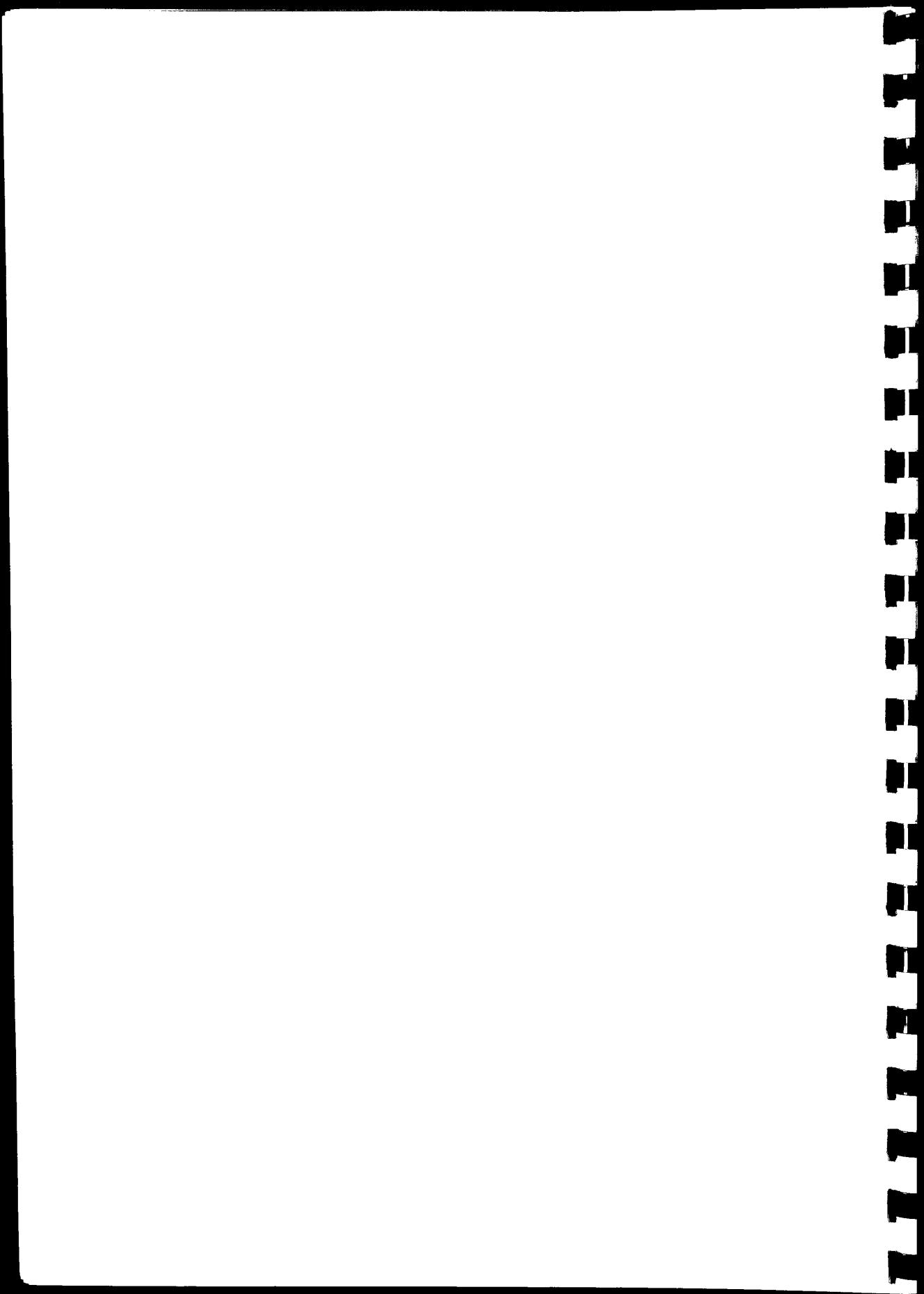


Figure 1a



European Community

Measured as % total respondents from
each section of the Fund

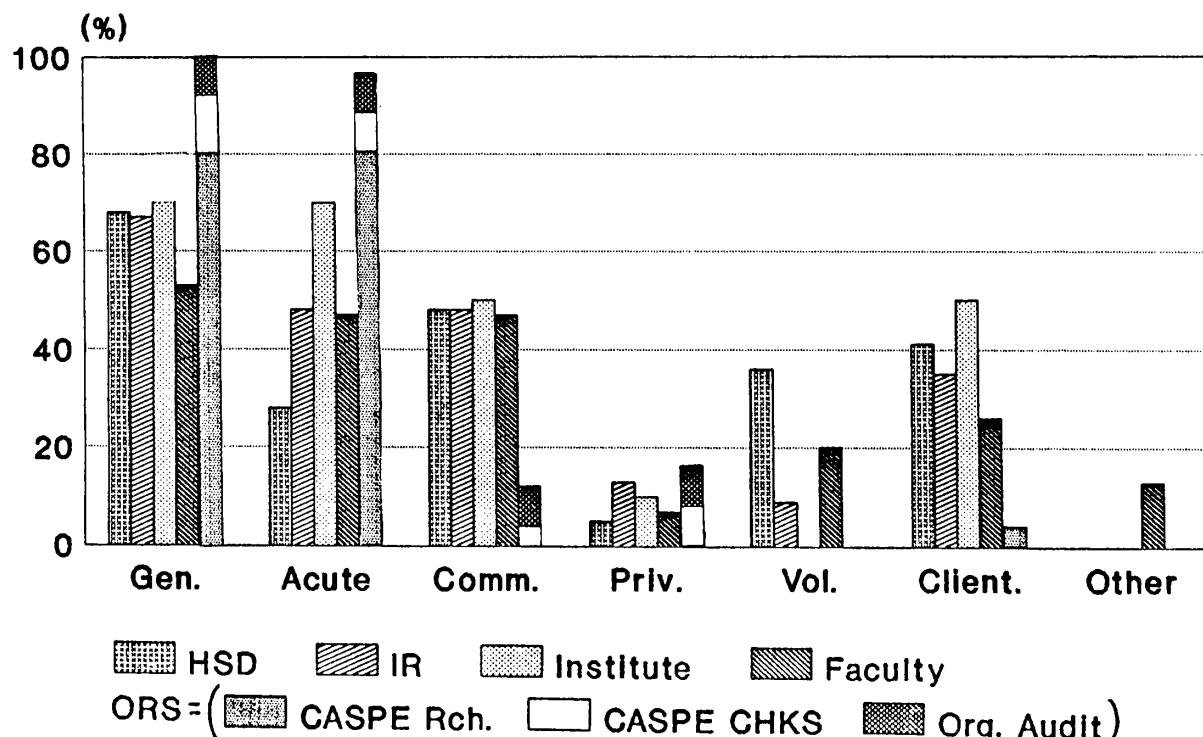
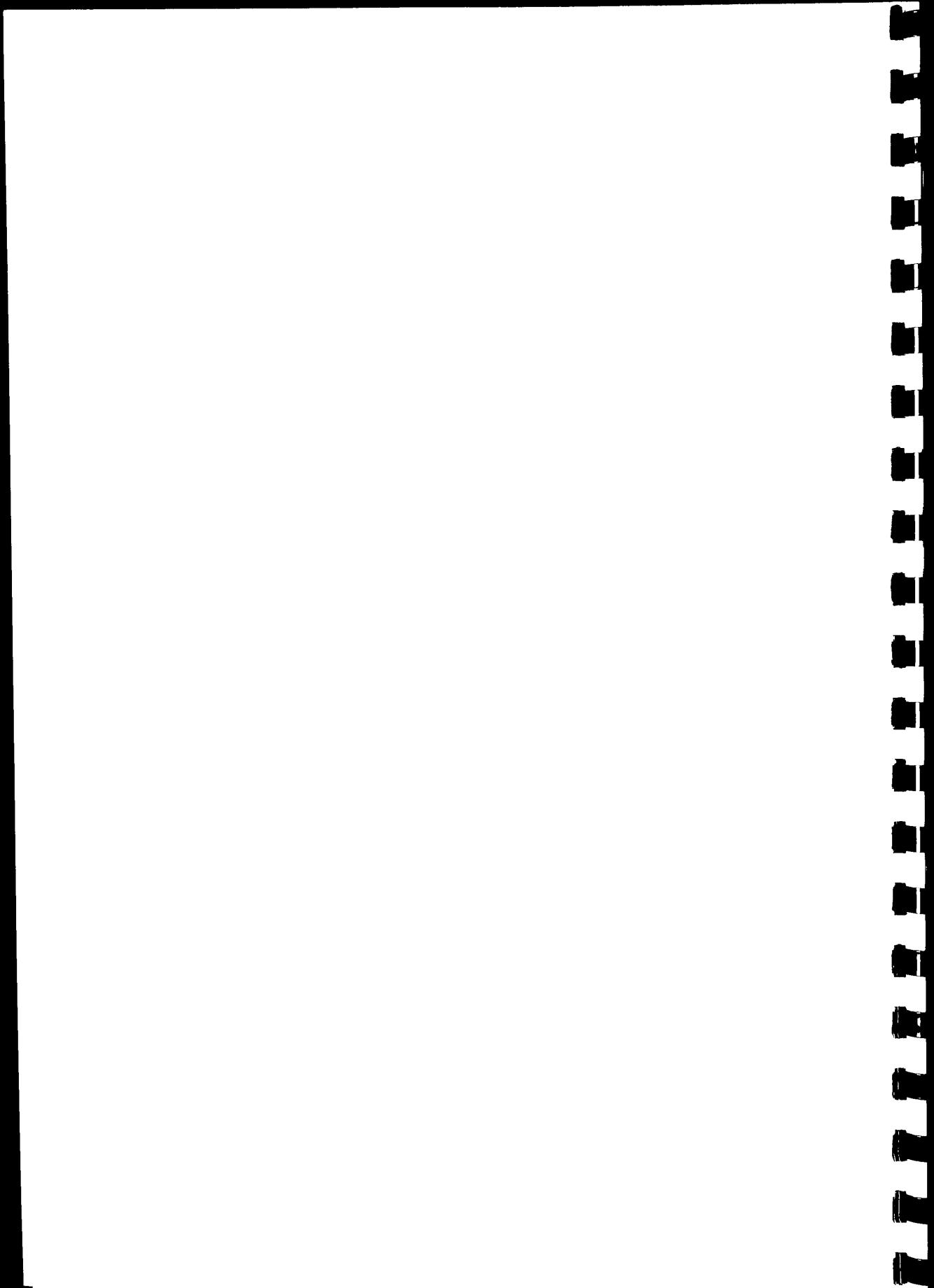


Figure 2a



Central and Eastern Europe

Measured as % total respondents from
each section of the Fund

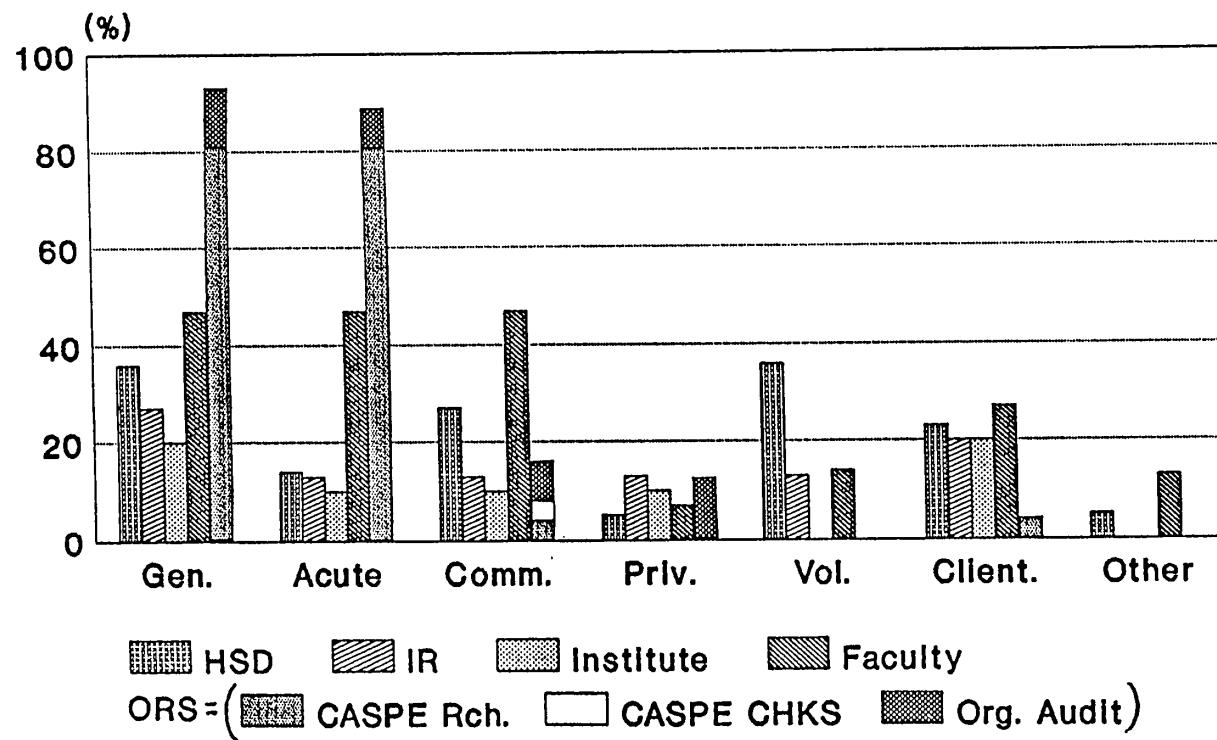
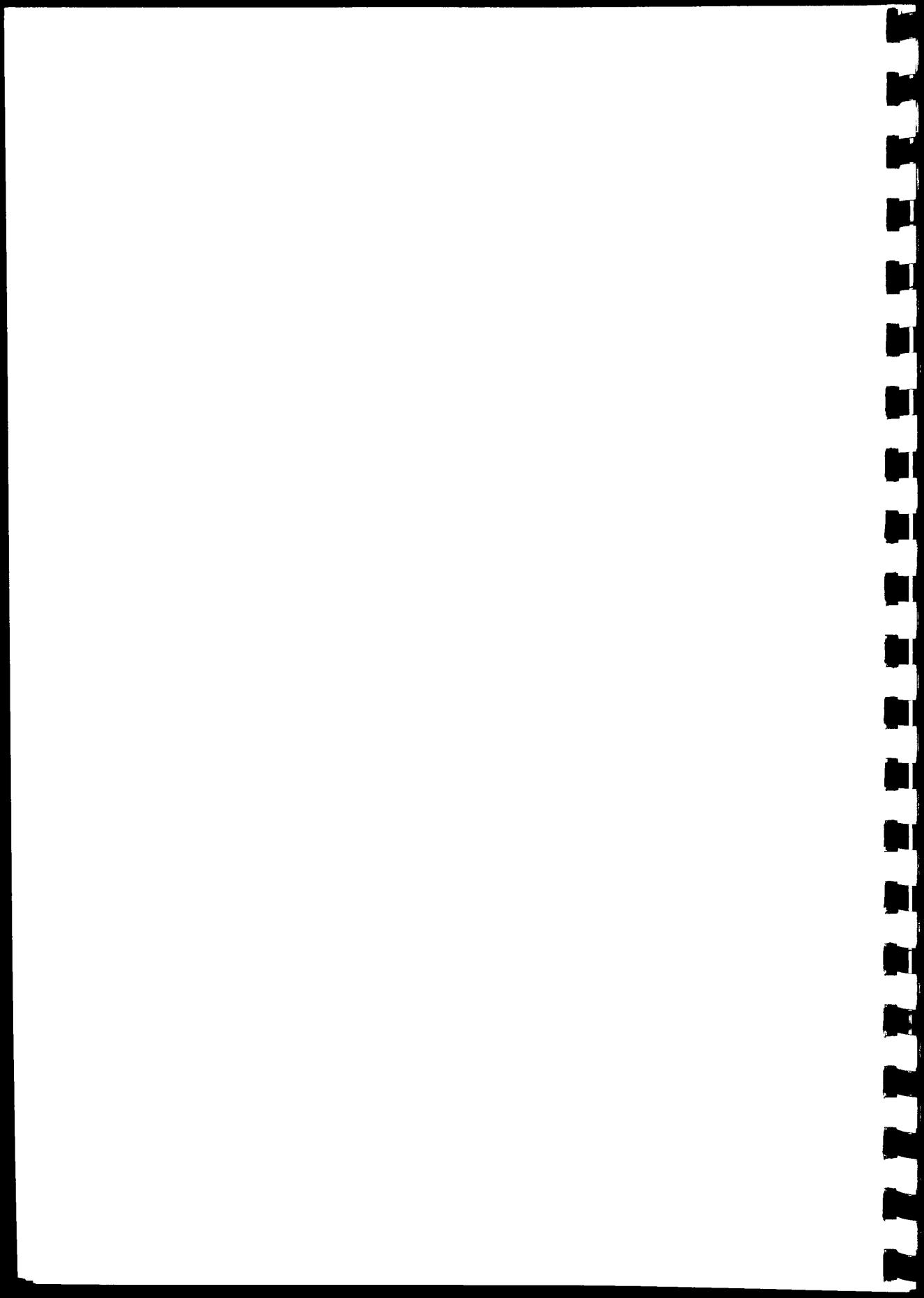


Figure 3a



Other European Areas

Measured as % total respondents from
each section of the Fund

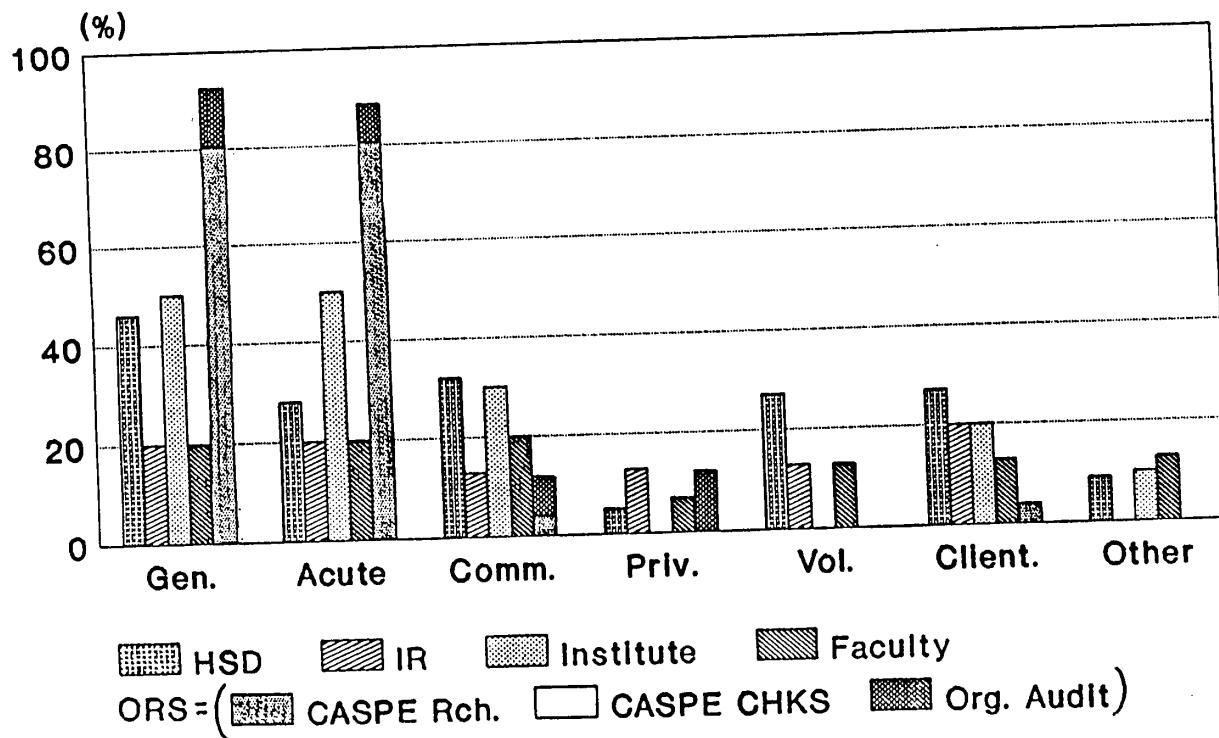
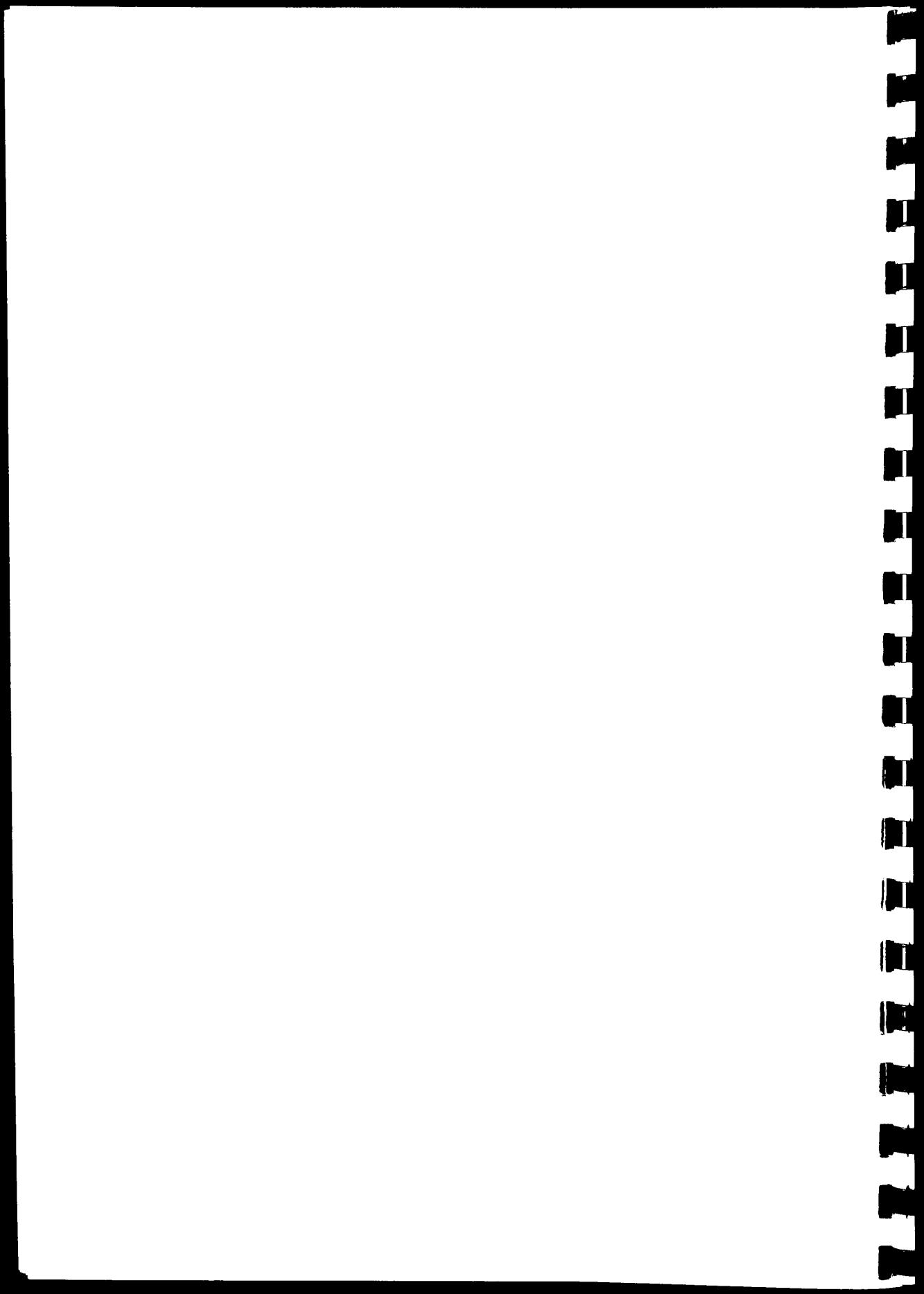


Figure 4a



European Subject Interests (incl. work)

Measured as % total respondents from
each section of the Fund

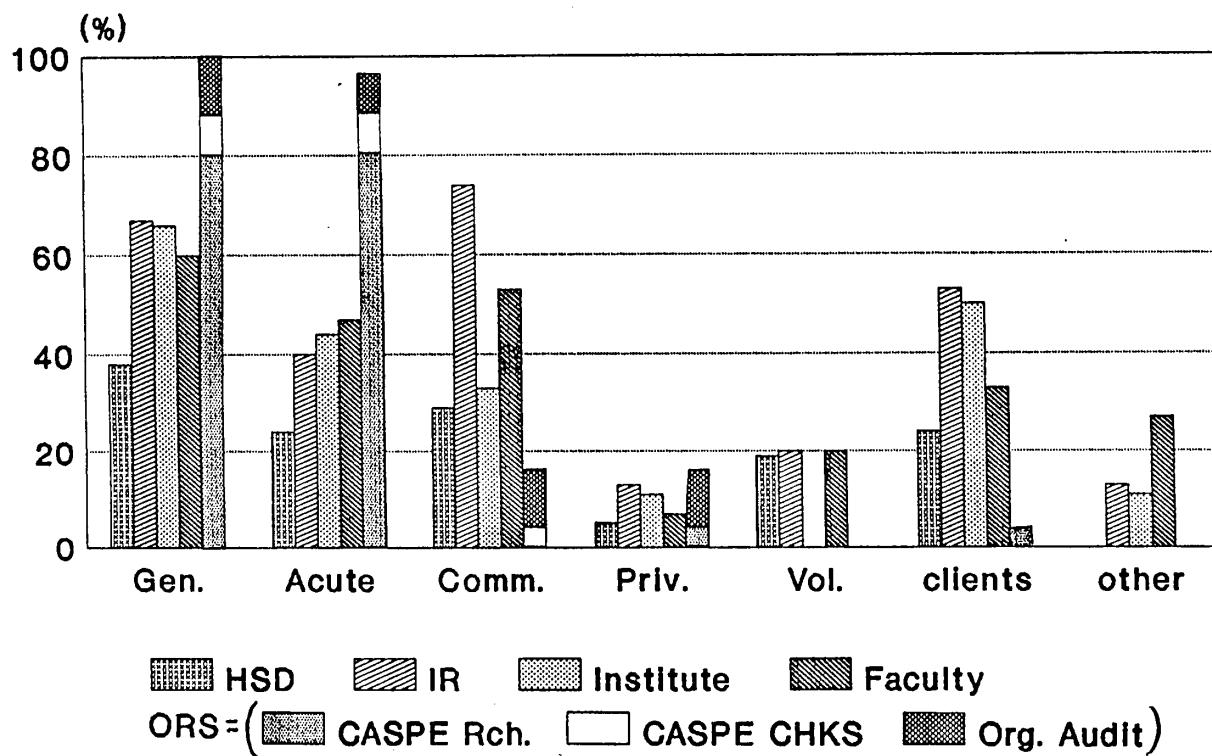
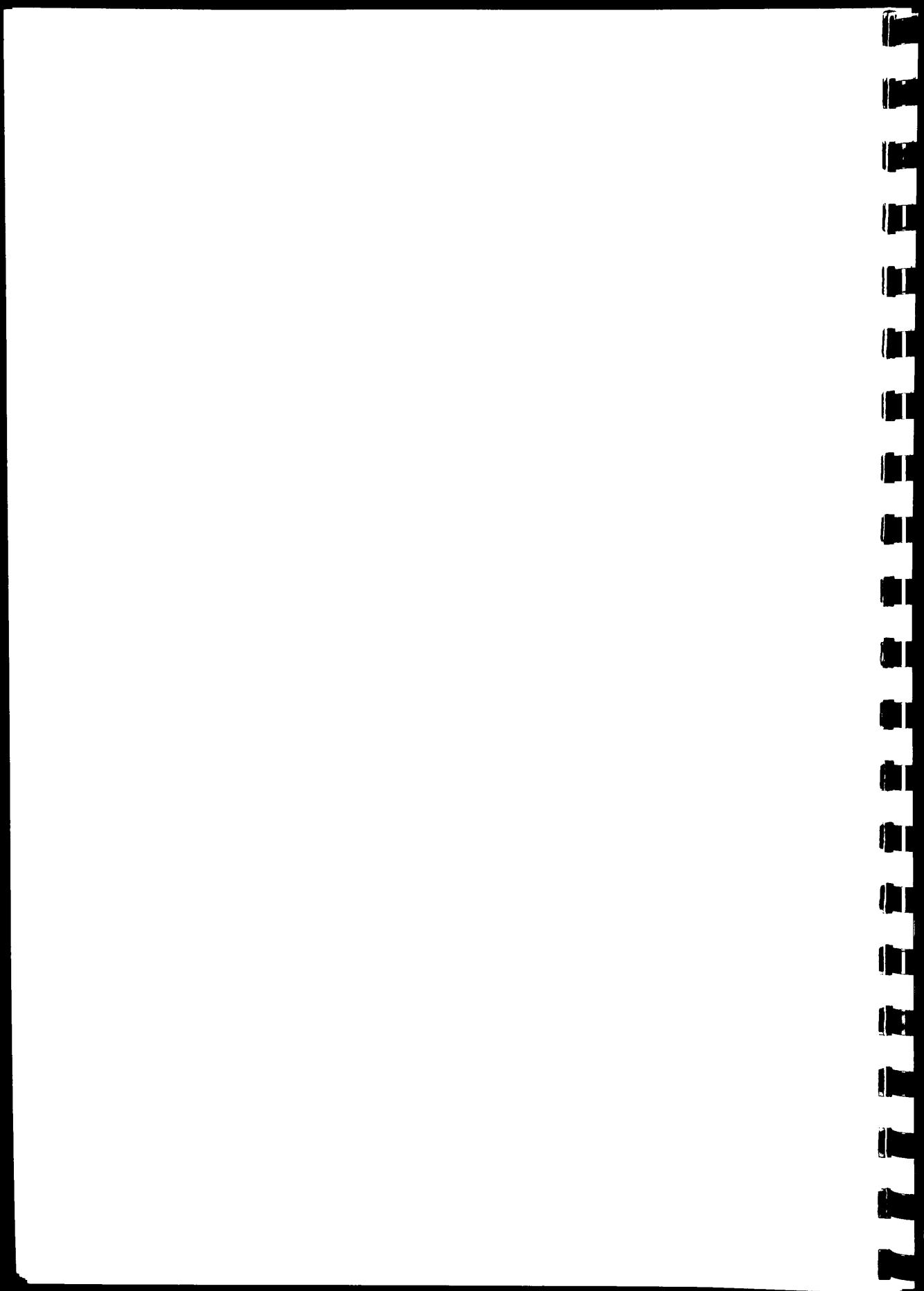


Figure 5a



European Community - Interest and Work

Measured as % total respondents from
each section of the Fund

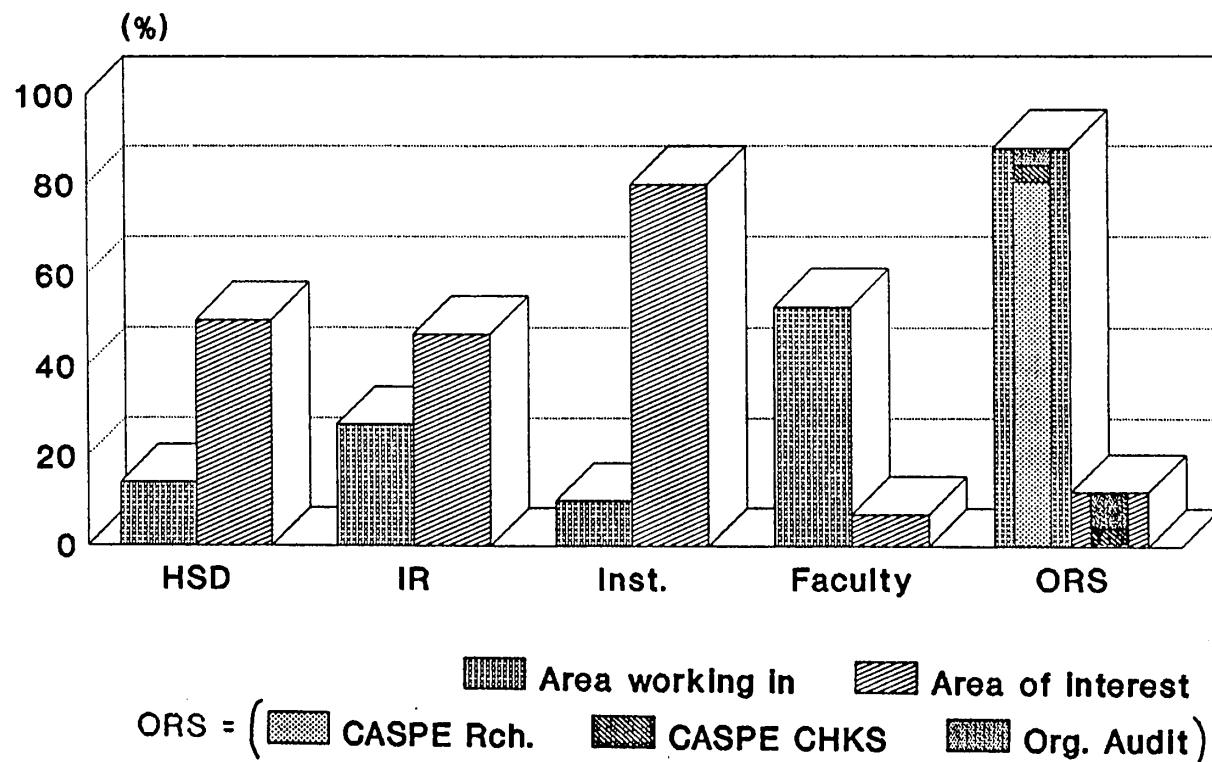
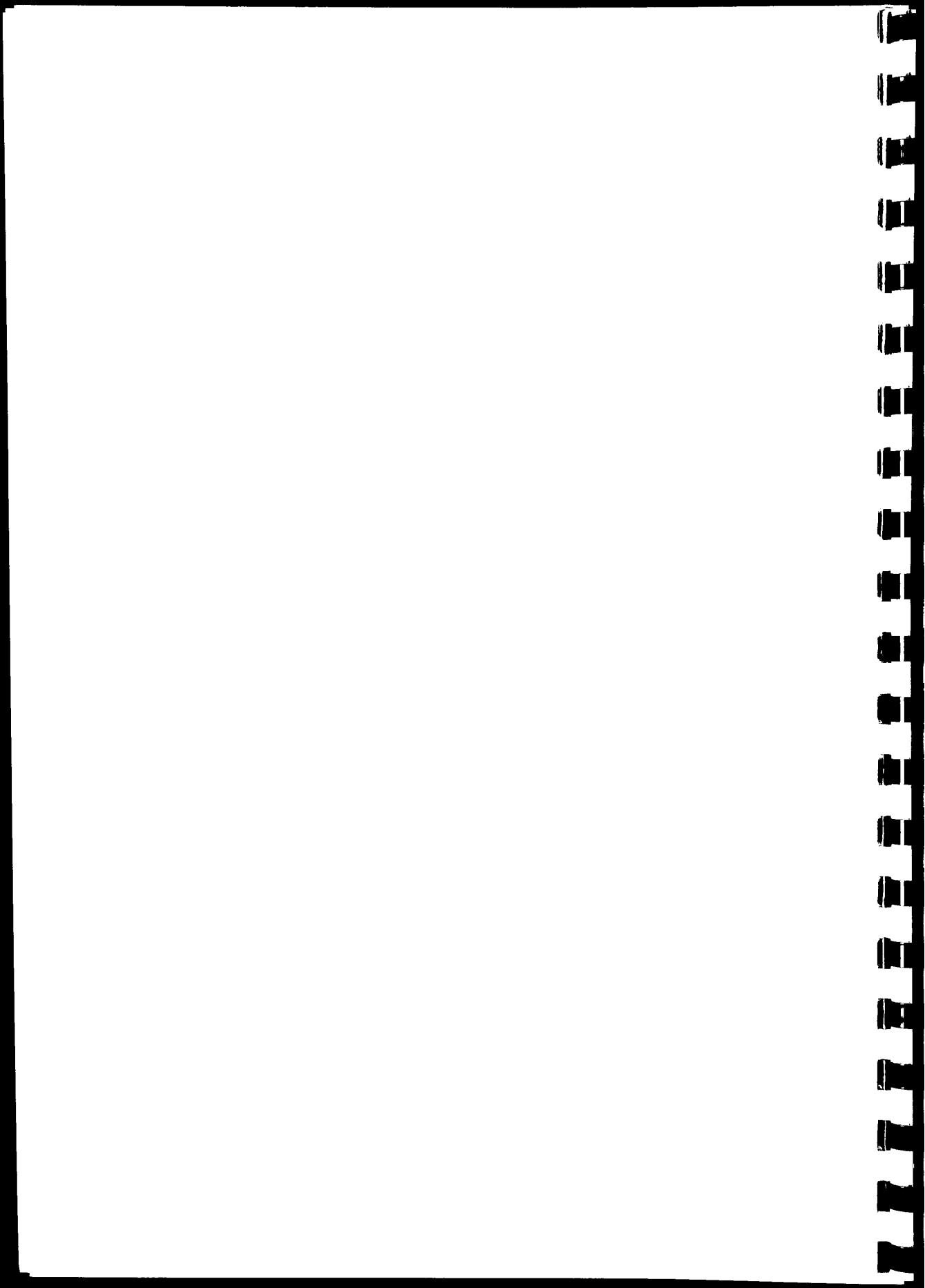


Figure 6a



Centr./East. Europe - Interest and Work

Measured as % total respondents from
each section of the Fund

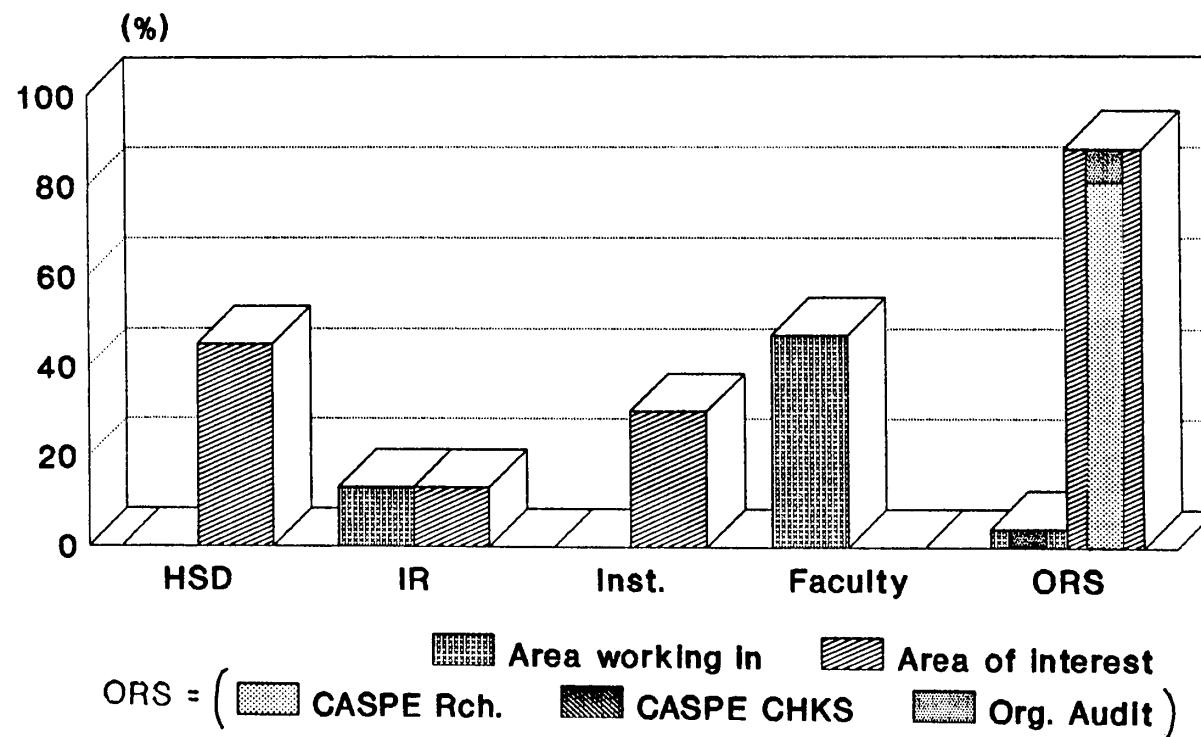
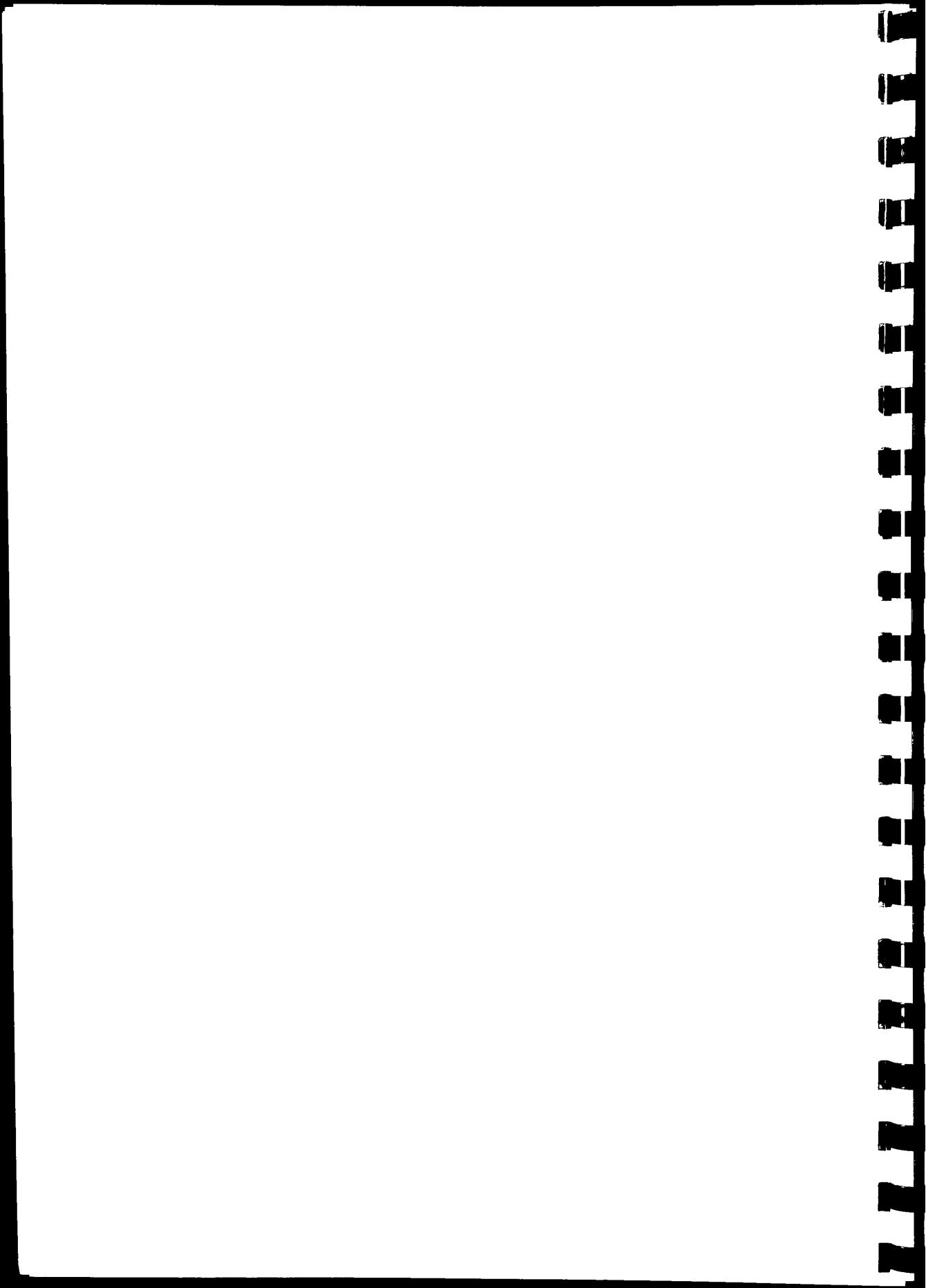


Figure 7a



Other European Areas - Interest and Work

Measured as % total respondents from
each section of the Fund

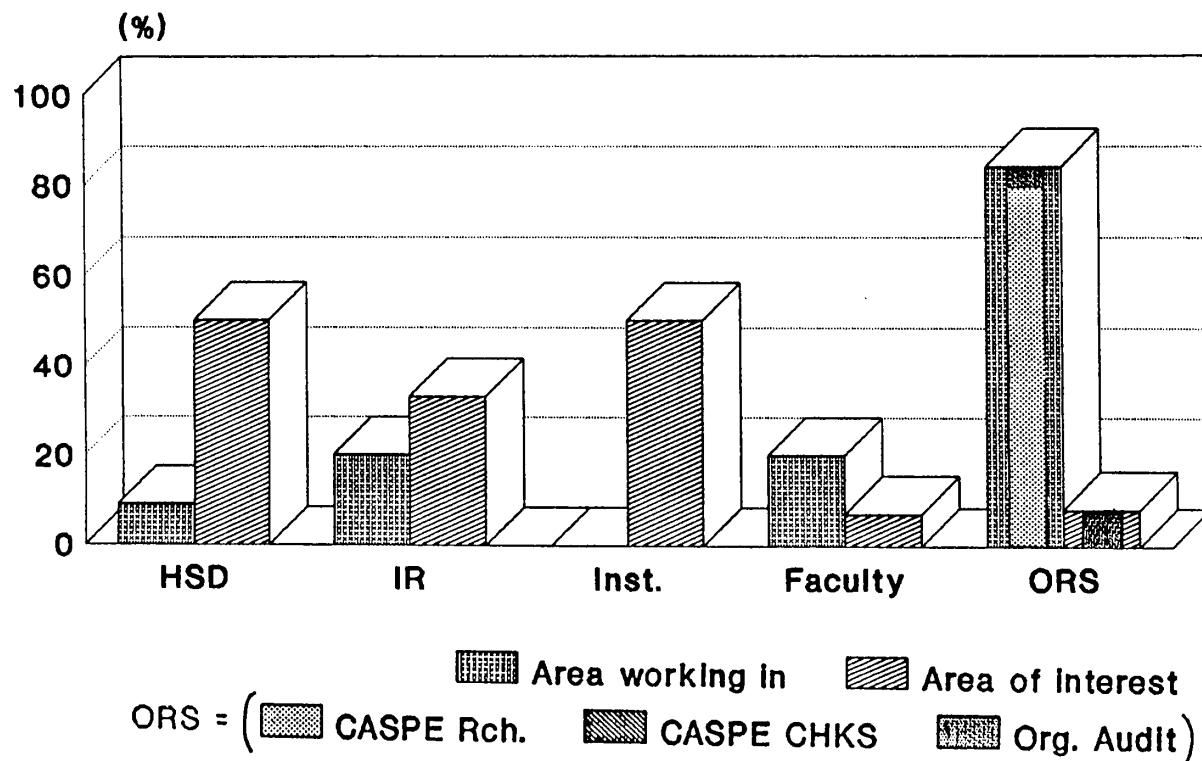
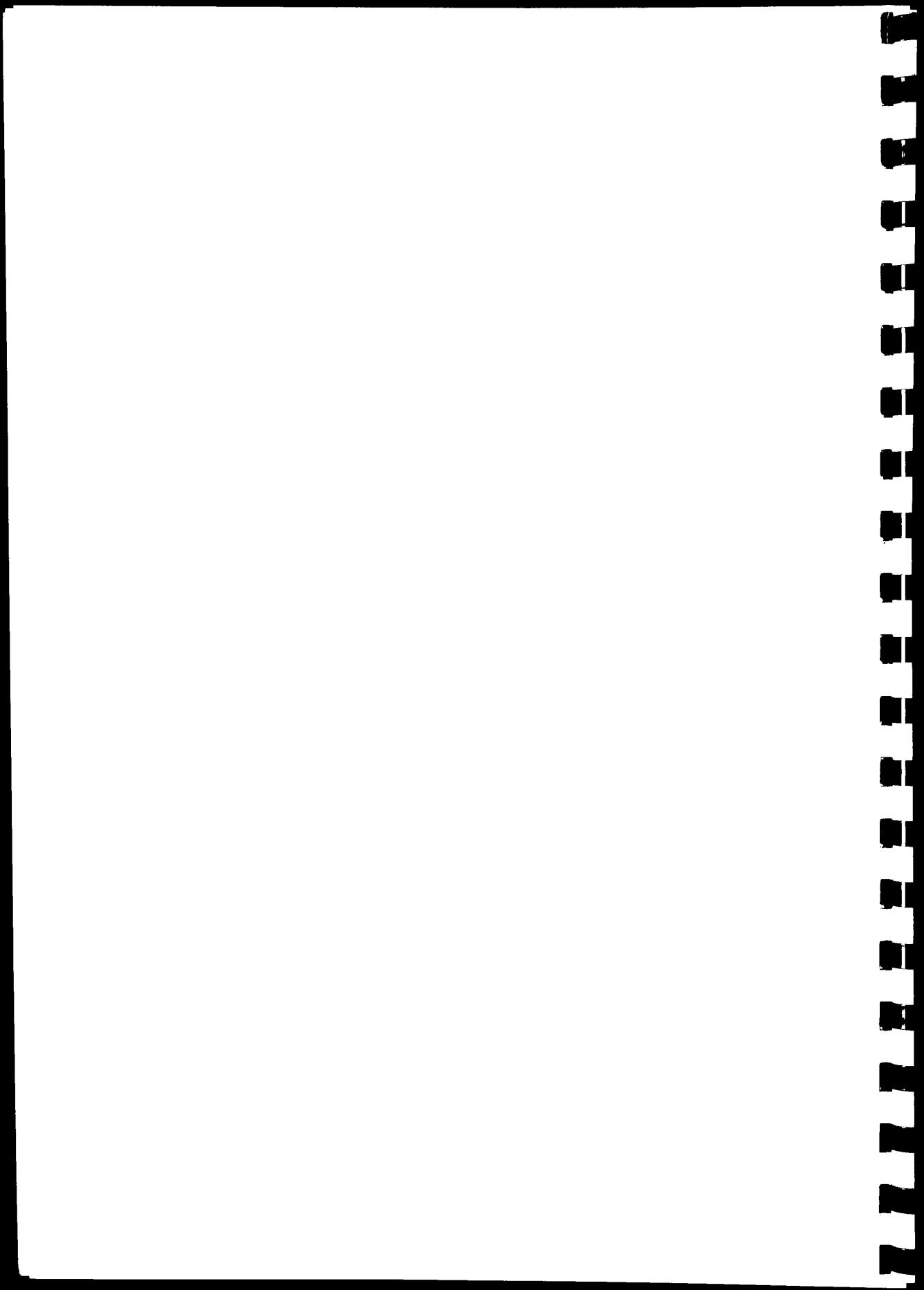


Figure 8a



Appendix B
Specific Subjects of Interest

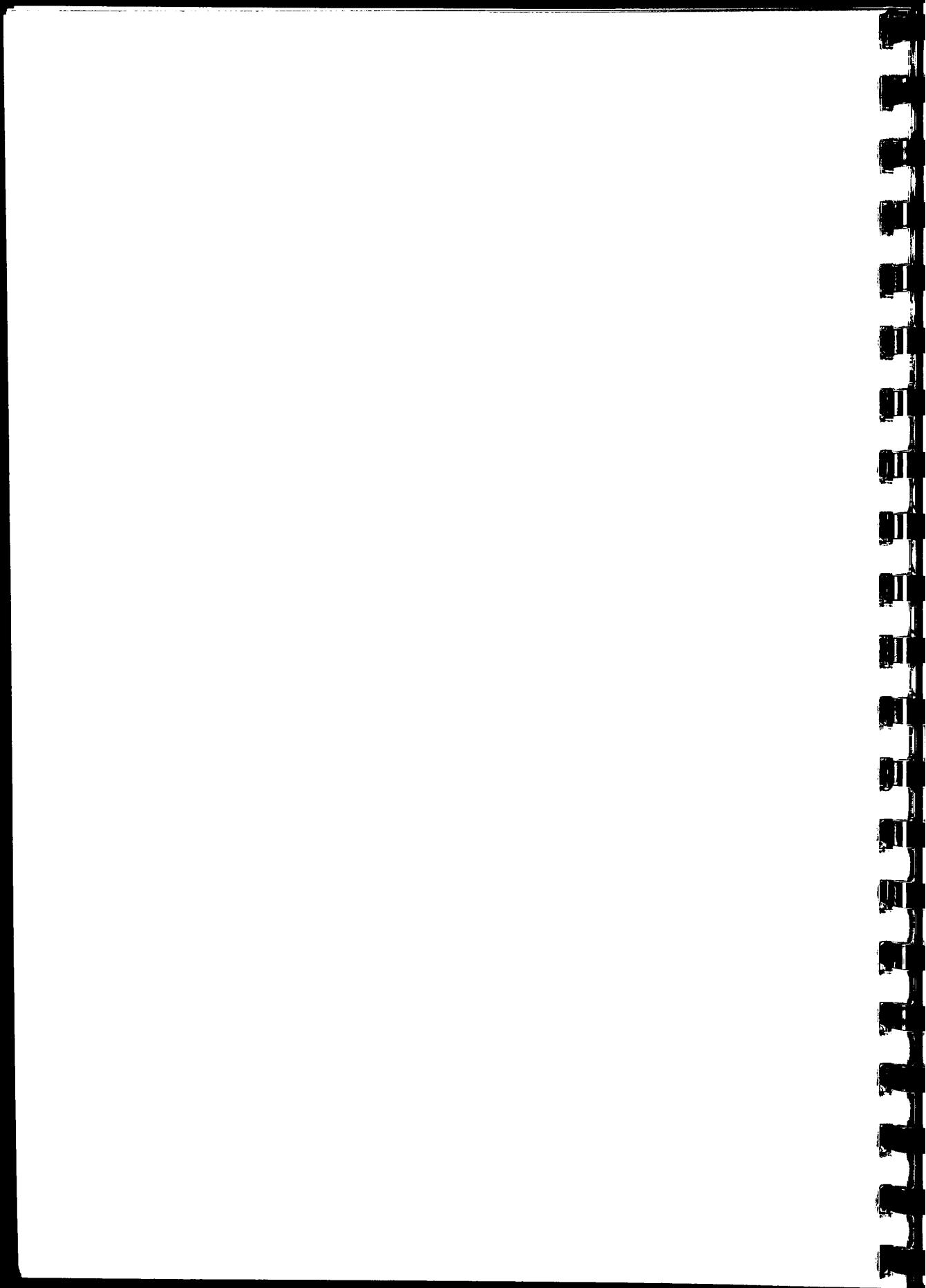
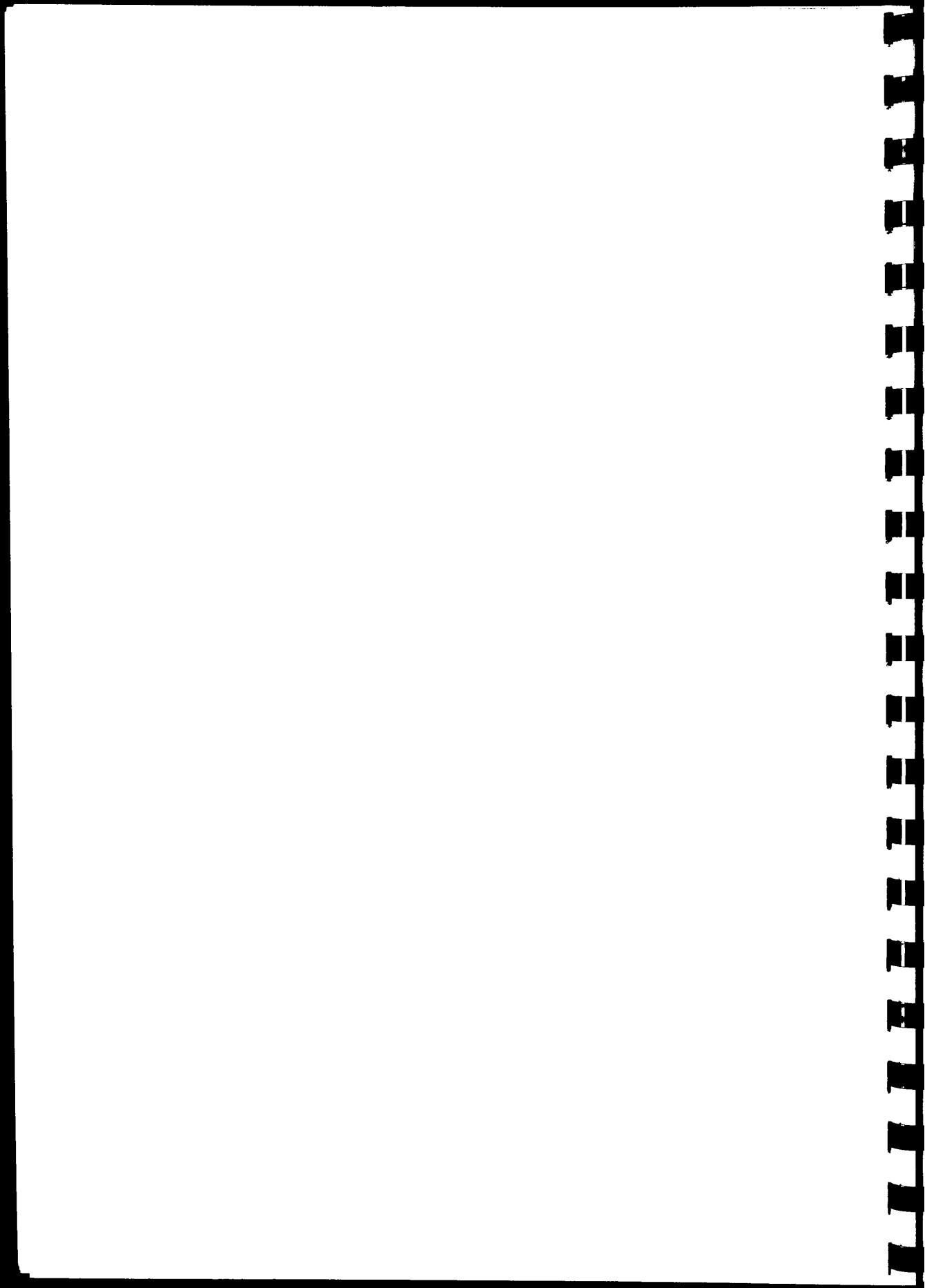


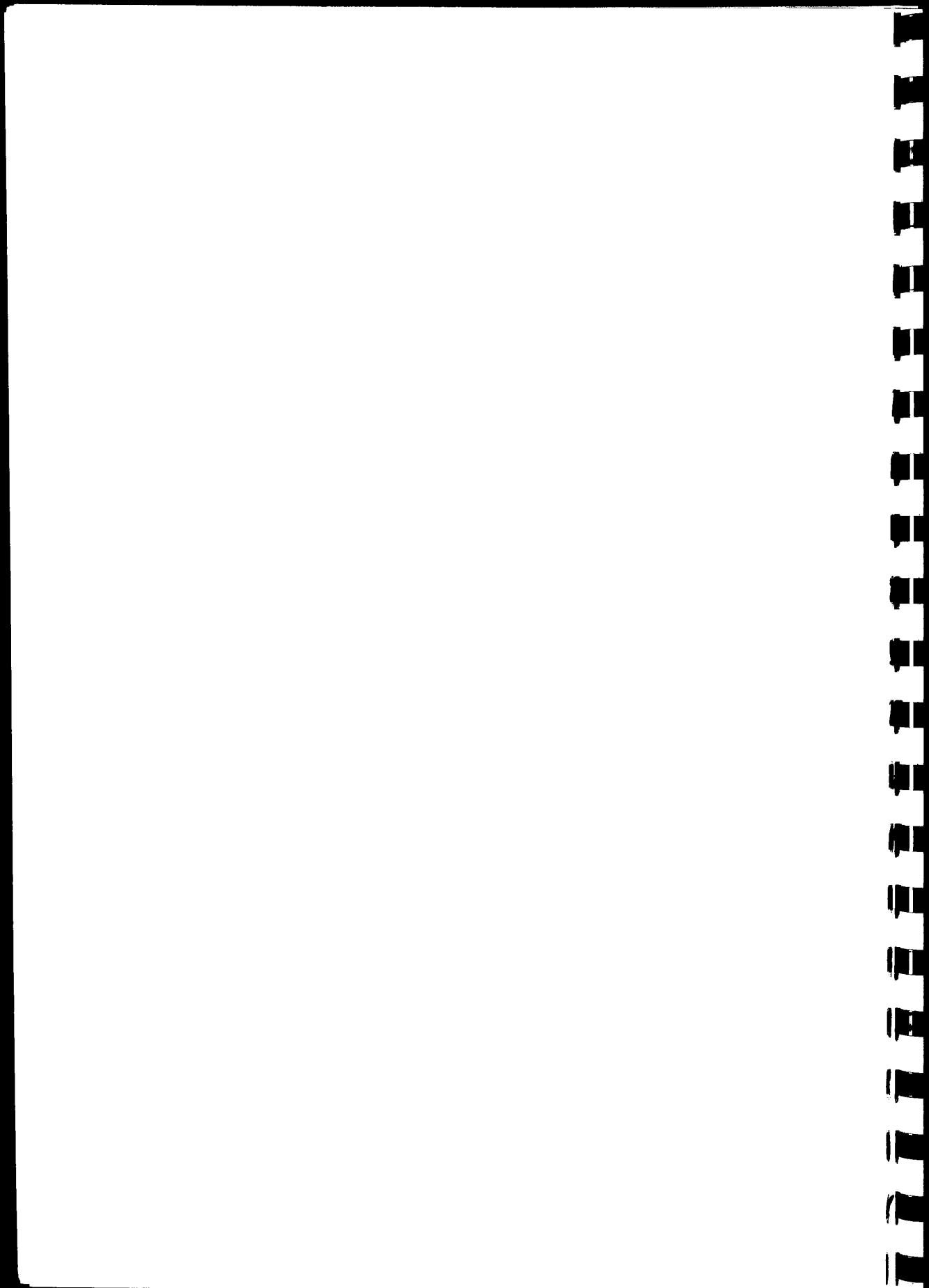
Table 1

Specific subjects of interest (including work areas) in the European Community

SUBJECT	HSD No. (%)	IR No. (%)	INST. No. (%)	FACULTY ORS No. (%)
General areas in health care (including acute, community and social care)				
Quality of care/service provision	16 (73)	8 (54)	1 (10)	5 (33) 26 (100)
Service structure/ organisation	9 (41)	4 (27)	5 (50)	7 (46) 24 (92)
Organisational Development	9 (41)	2 (13)	2 (20)	9 (60) 25 (96)
Management/planning	7 (32)	4 (27)	2 (20)	8 (53) 25 (96)
Economics/finance/funding (including health insurance)	2 (9)	1 (7)	6 (60)	8 (53) 22 (85)
Contracting	5 (23)	3 (20)	1 (10)	6 (40) 23 (88)
Ethics	4 (18)	3 (20)	1 (10)	3 (20) 0 (0)
Education of health professionals	7 (32)	5 (33)	1 (10)	3 (20) 22 (85)
Movement of health professionals	4 (18)	1 (7)	0 (0)	0 (0) 0 (0)
Health needs assessment	7 (32)	4 (27)	5 (50)	7 (46) 1 (4)
Pharmaceuticals (e.g. costs/benefits)	0 (0)	1 (7)	1 (10)	0 (0) 1 (4)
Public/environmental health	7 (32)	4 (27)	5 (50)	5 (33) 0 (0)
Information systems for users	6 (27)	12 (67)	0 (0)	2 (13) 24 (92)
Other	2 (9)	0 (0)	2 (20)	2 (13) 1 (4)



SUBJECT	HSD	IR	INST.	FACULTY	ORS
	No. (%)				
Acute care					
Clinical/medical audit	4 (18)	6 (40)	2 (20)	2 (13)	23 (88)
Outcome measurement	6 (27)	5 (33)	4 (40)	4 (26)	25 (96)
Clinicians as managers	3 (14)	1 (7)	1 (10)	3 (20)	23 (88)
Futures (e.g. Future of acute hospitals)	4 (18)	3 (20)	5 (50)	2 (13)	23 (88)
Other	0 (0)	0 (0)	0 (0)	0 (0)	2 (8)
Private health care	1 (5)	2 (13)	1 (10)	1 (7)	4 (15)
Community and social care					
Community practitioners (e.g. G.P's, professional carers)	10 (45)	3 (20)	3 (30)	10 (40)	3 (12)
Intersectoral collaboration	9 (41)	3 (20)	3 (30)	6 (40)	2 (8)
Residential care	9 (41)	3 (20)	3 (30)	4 (26)	2 (8)
Domiciliary care	8 (37)	3 (20)	1 (10)	4 (26)	1 (4)
Day care	10 (45)	3 (20)	0 (0)	3 (20)	1 (4)
Respite care	9 (41)	3 (20)	0 (0)	3 (20)	1 (4)
Independent living	7 (32)	3 (20)	0 (0)	3 (20)	0 (0)
User involvement	12 (55)	5 (33)	0 (0)	4 (26)	3 (12)
Other	0 (0)	0 (0)	1 (10)	1 (7)	0 (0)
Voluntary organisations	8 (37)	4 (27)	0 (0)	3 (20)	0 (0)



SUBJECT	HSD	IR	INST.	FACULTY	ORS
	No. (%)				
Special client groups					
Homeless people	2 (9)	2 (13)	0 (0)	0 (0)	0 (0)
Elderly people	7 (32)	3 (20)	1 (10)	3 (20)	0 (0)
People with physical disabilities	8 (37)	2 (13)	0 (0)	1 (7)	0 (0)
People with learning difficulties	10 (45)	4 (27)	2 (20)	3 (20)	0 (0)
People with mental health problems	8 (37)	1 (7)	1 (10)	1 (7)	1 (4)
Black populations	10 (45)	4 (26)	3 (30)	0 (0)	0 (0)
Patients with a terminal illness	5 (23)	0 (0)	2 (20)	0 (0)	1 (4)
People with Acquired Immune Deficiency Syndrome and H.I.V. infections	4 (18)	3 (20)	1 (10)	0 (0)	0 (0)
Informal carers	9 (41)	1 (7)	0 (0)	0 (0)	1 (4)
Pregnant women	3 (14)	3 (20)	0 (0)	0 (0)	0 (0)
Other	0 (0)	0 (0)	0 (0)	2 (9)	0 (0)
Other topics no specified above	2 (9)	2 (13)	1 (10)	4 (26)	0 (0)

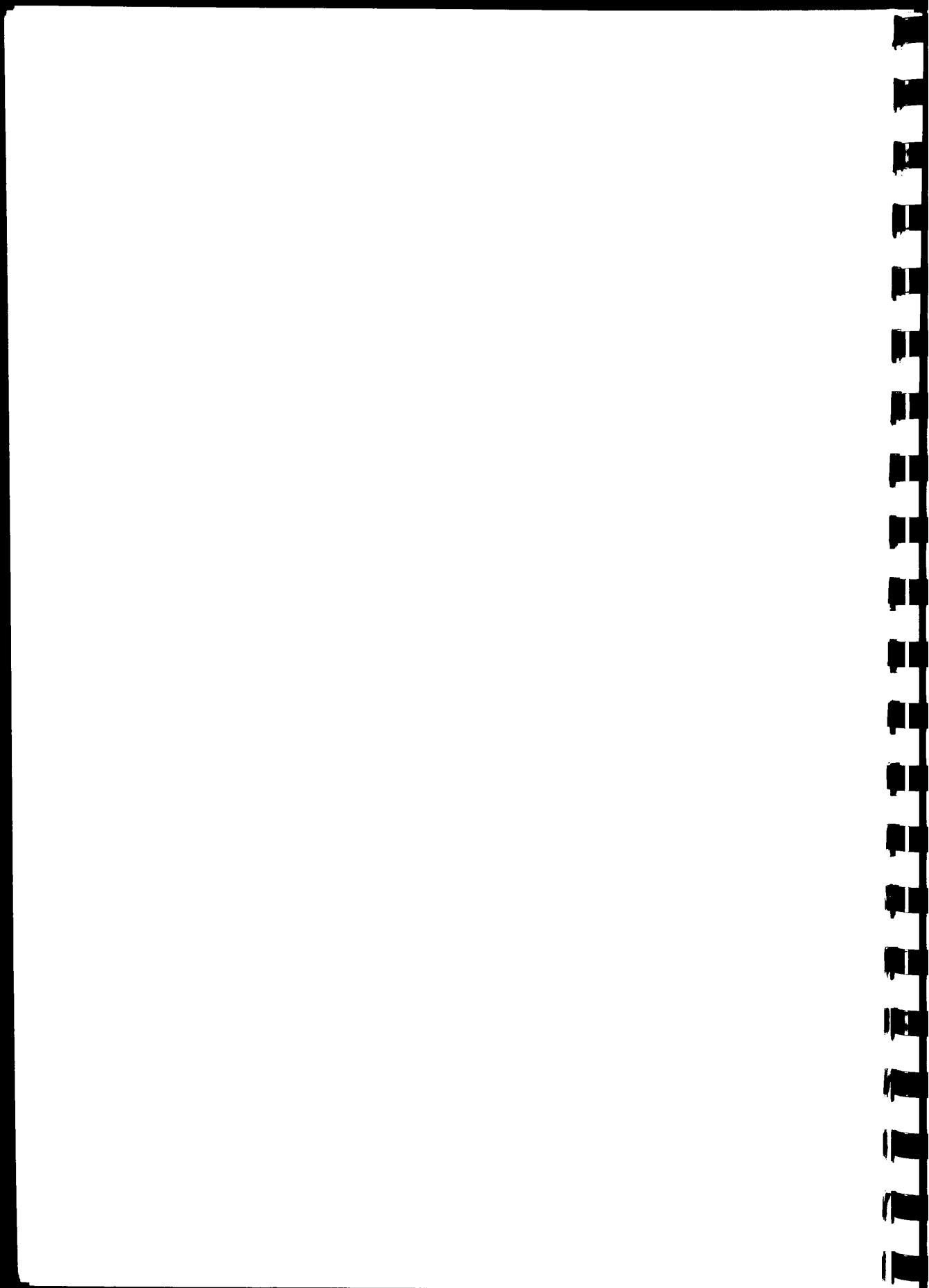
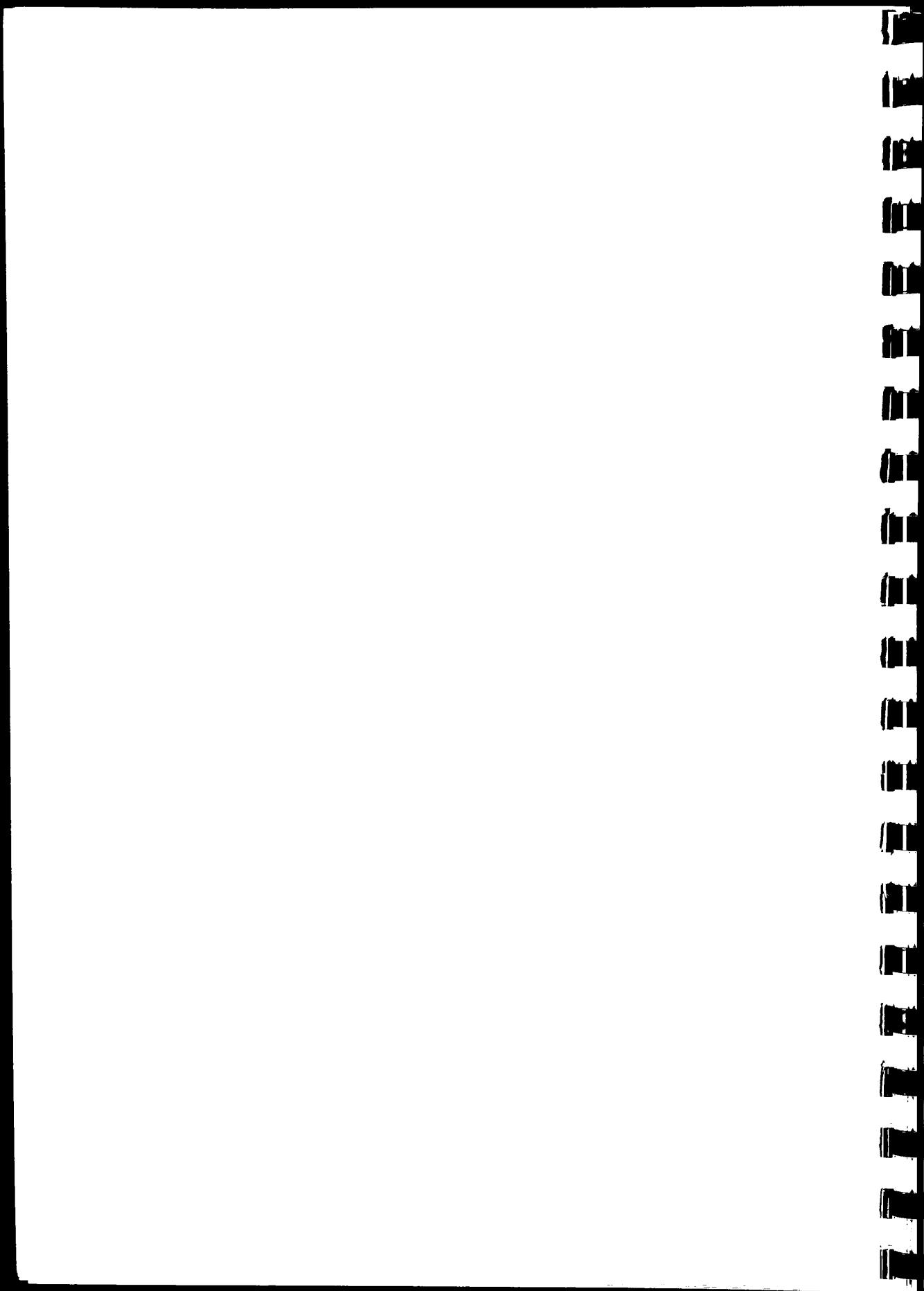


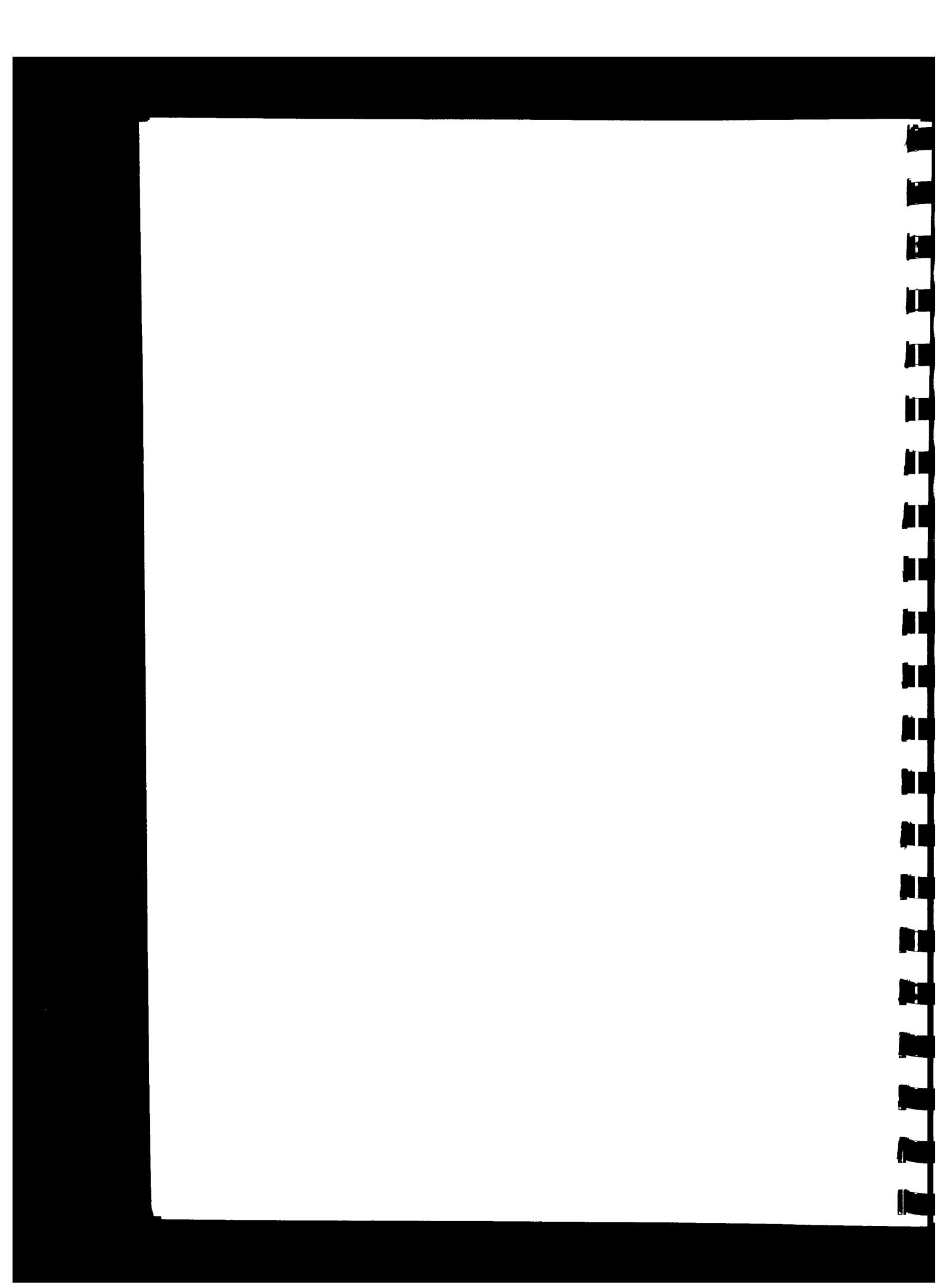
Table 2

Specific subjects of interest (including work areas) in Central and Eastern Europe

SUBJECT	HSD	IR	INST.	FACULTY	ORS
	No. (%)				
General areas in health care (including acute, community and social care)					
Quality of care/service provision	10 (45)	4 (27)	0 (0)	5 (33)	24 (92)
Service structure/organisation	7 (32)	3 (20)	1 (10)	6 (40)	24 (92)
Organisational Development	6 (27)	4 (27)	0 (0)	8 (53)	24 (92)
Management/planning	6 (27)	2 (13)	0 (0)	8 (53)	24 (92)
Economics/finance/funding (including health insurance)	2 (9)	1 (7)	2 (20)	8 (53)	22 (85)
Contracting	4 (18)	1 (7)	0 (0)	6 (40)	23 (88)
Ethics	3 (14)	1 (7)	0 (0)	3 (20)	0 (0)
Education of health professionals	4 (18)	2 (13)	0 (0)	3 (20)	21 (81)
Movement of health professionals	2 (9)	1 (7)	0 (0)	0 (0)	0 (0)
Health needs assessment	5 (23)	2 (13)	2 (20)	7 (46)	1 (4)
Pharmaceuticals (e.g. costs/benefits)	0 (0)	1 (7)	0 (0)	0 (0)	0 (0)
Public/environmental health	3 (14)	2 (13)	0 (0)	5 (33)	0 (0)
Information systems for users	1 (5)	4 (27)	0 (0)	2 (13)	22 (85)
Other	1 (5)	1 (7)	2 (20)	2 (13)	1 (4)



SUBJECT	HSD	IR	INST.	FACULTY	ORS
	No. (%)				
Acute care					
Clinical/medical audit	4 (18)	2 (13)	0 (0)	2 (13)	23 (88)
Outcome measurement	4 (18)	3 (20)	1 (10)	4 (27)	23 (88)
Clinicians as managers	3 (14)	2 (13)	0 (0)	4 (27)	22 (85)
Futures (e.g. Future of acute hospitals)	3 (14)	2 (13)	0 (0)	2 (13)	23 (88)
Other	0 (0)	0 (0)	0 (0)	0 (0)	2 (8)
Private health care	1 (5)	2 (13)	1 (10)	1 (7)	3 (12)
Community and social care					
Community practitioners (e.g. G.P's, professional carers)	5 (23)	2 (13)	1 (10)	5 (33)	3 (12)
Intersectoral collaboration	8 (36)	2 (13)	0 (0)	5 (33)	2 (8)
Residential care	7 (32)	2 (13)	0 (0)	3 (20)	2 (8)
Domiciliary care	6 (27)	2 (13)	0 (0)	3 (20)	1 (4)
Day care	8 (36)	2 (13)	0 (0)	2 (13)	1 (4)
Respite care	7 (32)	2 (13)	0 (0)	2 (13)	1 (4)
Independent living	6 (27)	2 (13)	0 (0)	2 (13)	0 (0)
User involvement	8 (36)	2 (13)	0 (0)	3 (20)	3 (12)
Other	0 (0)	0 (0)	0 (0)	1 (7)	0 (0)
Voluntary organisations	3 (14)	2 (13)	0 (0)	2 (13)	1 (4)



SUBJECT	HSD	IR	INST.	FACULTY	ORS
	No. (%)				
Special client groups					
Homeless people	1 (5)	1 (7)	0 (0)	0 (0)	0 (0)
Elderly people	4 (18)	2 (13)	0 (0)	3 (20)	0 (0)
People with physical disabilities	5 (23)	2 (13)	0 (0)	1 (7)	0 (0)
People with learning difficulties	7 (32)	2 (13)	2 (20)	3 (20)	0 (0)
People with mental health problems	6 (27)	2 (13)	1 (10)	1 (7)	1 (4)
Black populations	5 (23)	1 (7)	1 (10)	0 (0)	0 (0)
Patients with a terminal illness	2 (9)	2 (13)	1 (10)	0 (0)	1 (4)
People with Acquired Immune Deficiency Syndrome and H.I.V. infections	2 (9)	2 (13)	1 (10)	0 (0)	0 (0)
Informal carers	6 (27)	1 (7)	0 (0)	0 (0)	1 (4)
Pregnant women	2 (9)	2 (13)	0 (0)	0 (0)	0 (0)
Other	0 (0)	0 (0)	0 (0)	2 (13)	0 (0)
Other topics no specified above	2 (9)	0 (0)	0 (0)	2 (13)	0 (0)

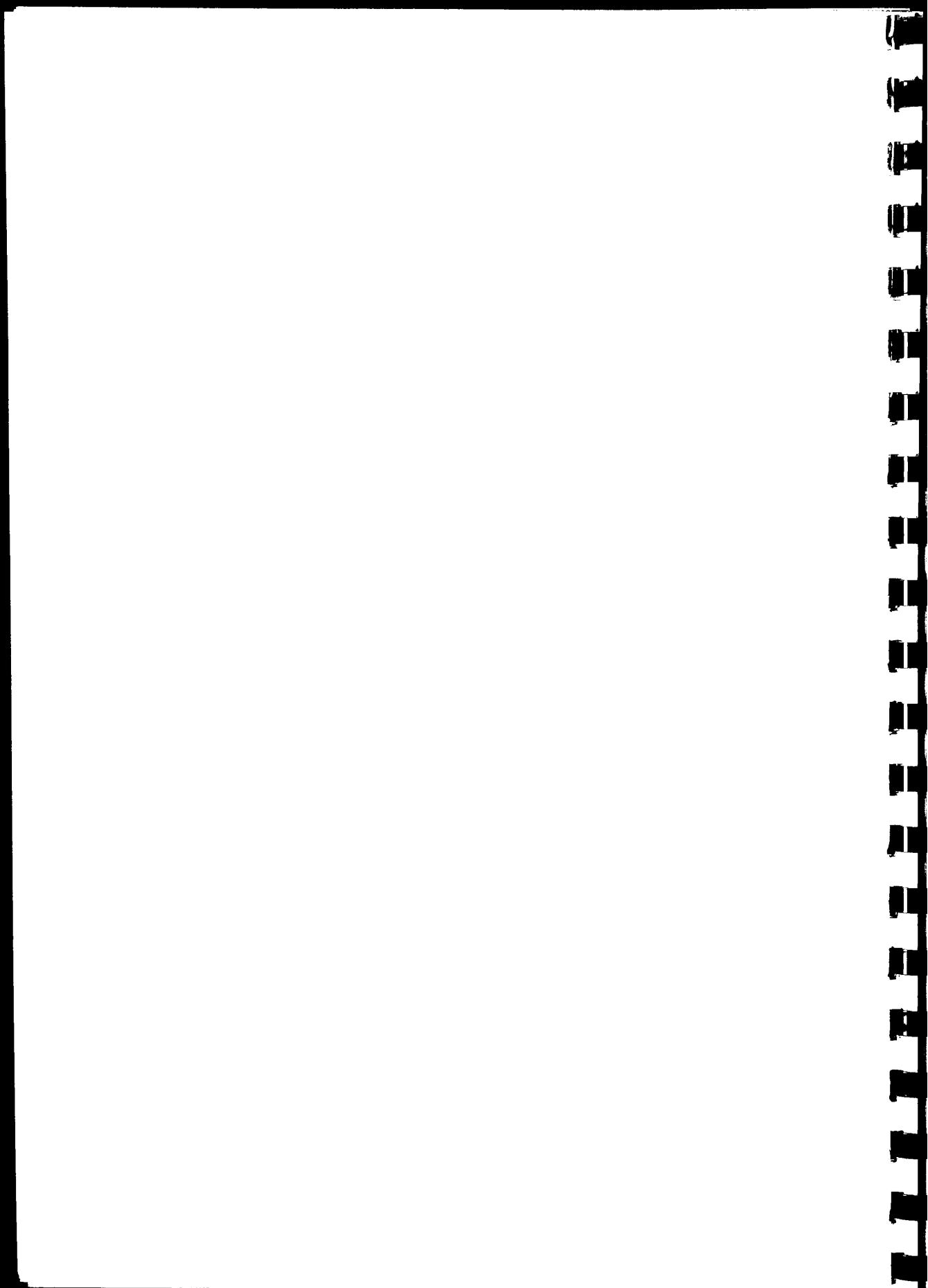
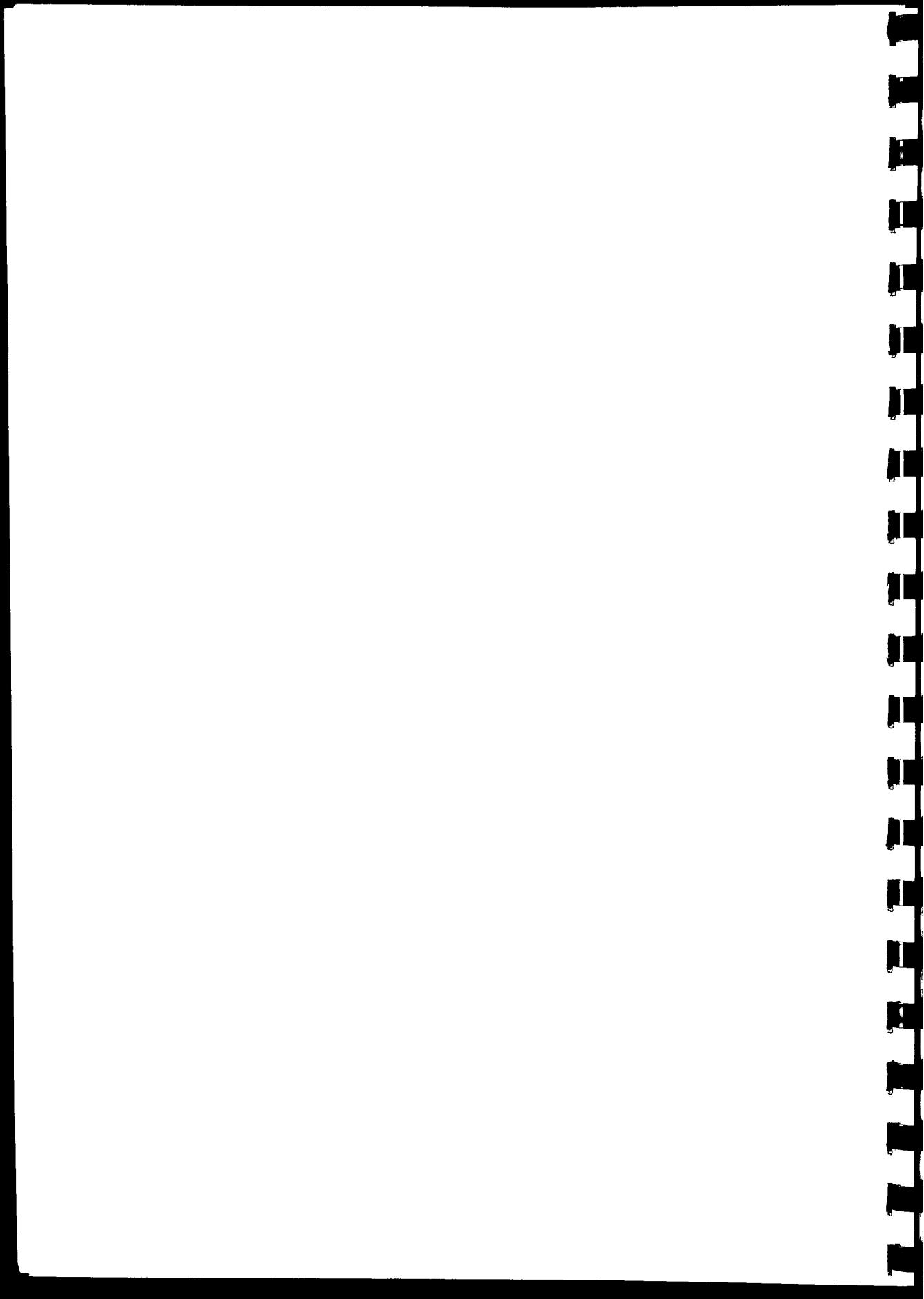


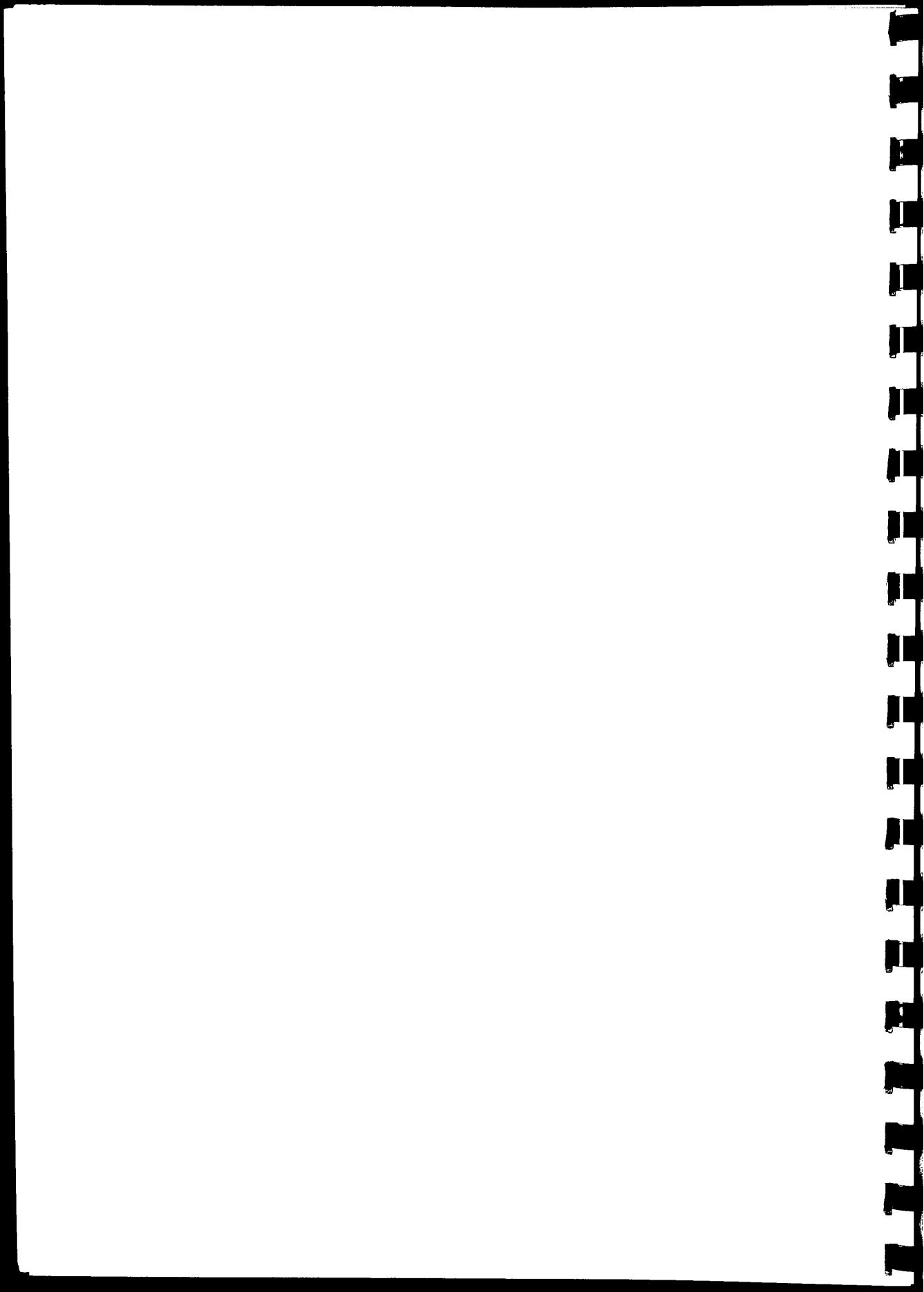
Table 3

Specific subjects of interest (including work areas) in Other European Countries

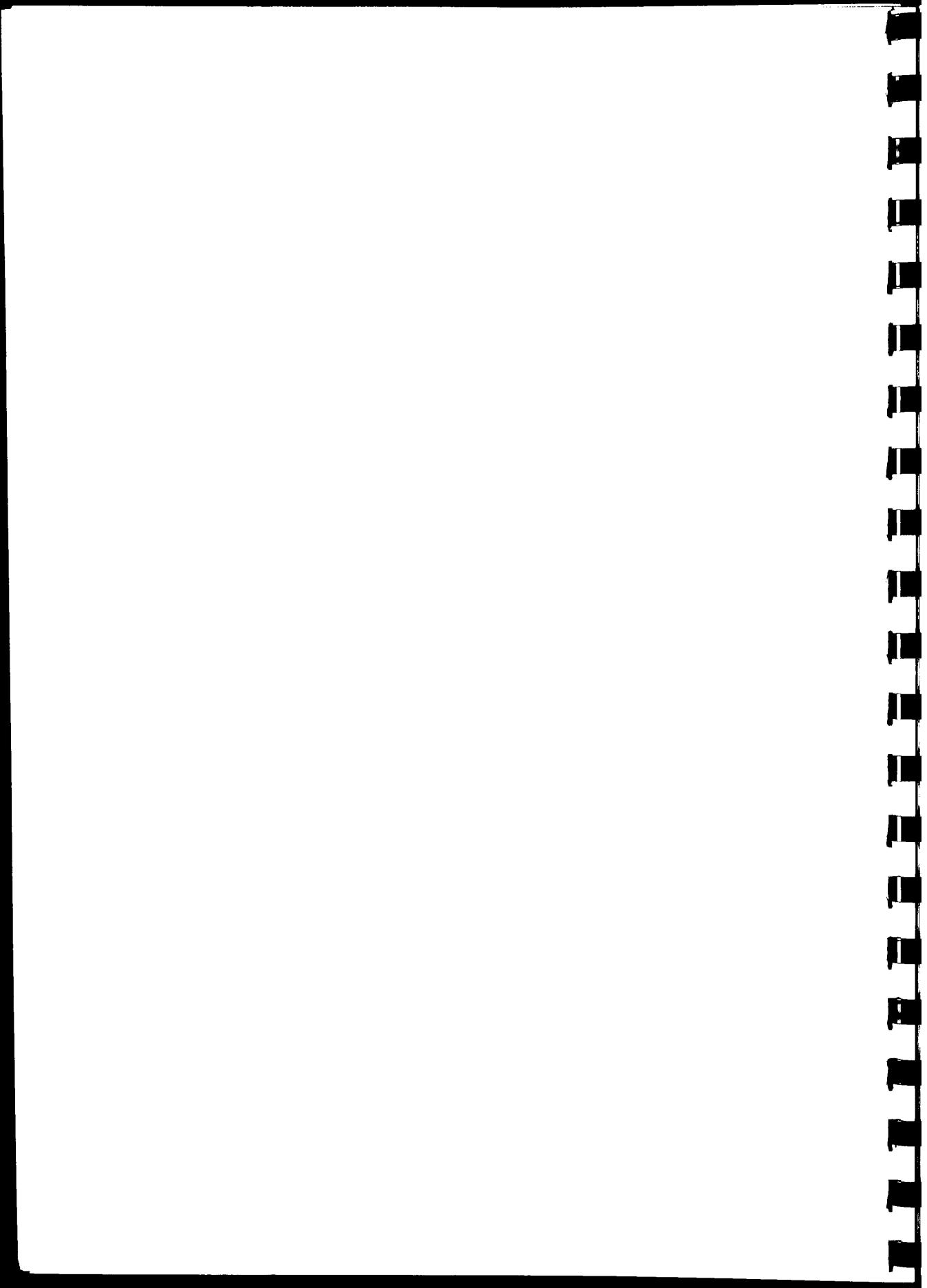
SUBJECT	HSD No. (%)	IR No. (%)	INST. No. (%)	FACULTY No. (%)	ORS No. (%)
General areas in health care (including acute, community and social care)					
Quality of care/service provision	11 (50)	6 (40)	1 (10)	2 (14)	24 (92)
Service structure/organisation	6 (27)	3 (20)	3 (30)	1 (7)	24 (92)
Organisational Development	5 (23)	5 (33)	1 (10)	3 (20)	24 (92)
Management/planning	5 (23)	3 (20)	2 (20)	3 (20)	24 (92)
Economics/finance/funding (including health insurance)	2 (9)	1 (7)	5 (50)	3 (20)	22 (85)
Contracting	4 (18)	1 (7)	1 (10)	3 (20)	23 (88)
Ethics	3 (14)	1 (7)	0 (0)	1 (7)	0 (0)
Education of health professionals	6 (27)	2 (13)	1 (10)	1 (7)	21 (81)
Movement of health professionals	3 (14)	1 (7)	0 (0)	0 (0)	0 (0)
Health needs assessment	5 (23)	2 (13)	4 (40)	3 (20)	1 (4)
Pharmaceuticals (e.g. costs/benefits)	0 (0)	1 (7)	0 (0)	0 (0)	0 (0)
Public/Env. Health	4 (18)	2 (13)	0 (0)	3 (20)	0 (0)
Information systems for users	3 (14)	6 (40)	0 (0)	1 (7)	22 (85)
Other	3 (14)	0 (0)	1 (10)	1 (7)	1 (4)



SUBJECT	HSD	IR	INST.	FACULTY	ORS
	No. (%)				
Acute care					
Clinical/medical audit	4 (18)	4 (27)	2 (20)	3 (20)	23 (88)
Outcome measurement	6 (27)	5 (33)	3 (30)	0 (0)	23 (88)
Clinicians as managers	2 (9)	1 (7)	1 (10)	1 (7)	22 (85)
Futures (e.g. Future of acute hospitals)	1 (5)	2 (13)	3 (30)	7 (7)	23 (88)
Other	2 (9)	0 (0)	1 (10)	0 (0)	2 (8)
Private health care	1 (5)	2 (13)	0 (0)	1 (7)	3 (12)
Community and social care					
Community practitioners (e.g. G.P's, professional carers)	6 (27)	2 (13)	2 (20)	2 (13)	3 (12)
Intersectoral collaboration	8 (36)	3 (20)	2 (20)	3 (20)	2 (8)
Residential care	6 (27)	2 (13)	0 (0)	3 (20)	2 (8)
Domiciliary care	5 (23)	2 (13)	0 (0)	2 (13)	1 (4)
Day care	7 (32)	2 (13)	0 (0)	2 (13)	1 (4)
Respite care	6 (27)	2 (13)	0 (0)	3 (13)	1 (4)
Independent living	6 (27)	2 (13)	0 (0)	2 (13)	0 (0)
User involvement	10 (45)	3 (20)	0 (0)	2 (13)	3 (12)
Other	0 (0)	0 (0)	1 (10)	0 (0)	0 (0)
Voluntary organisations	6 (27)	2 (13)	0 (0)	2 (23)	0 (0)



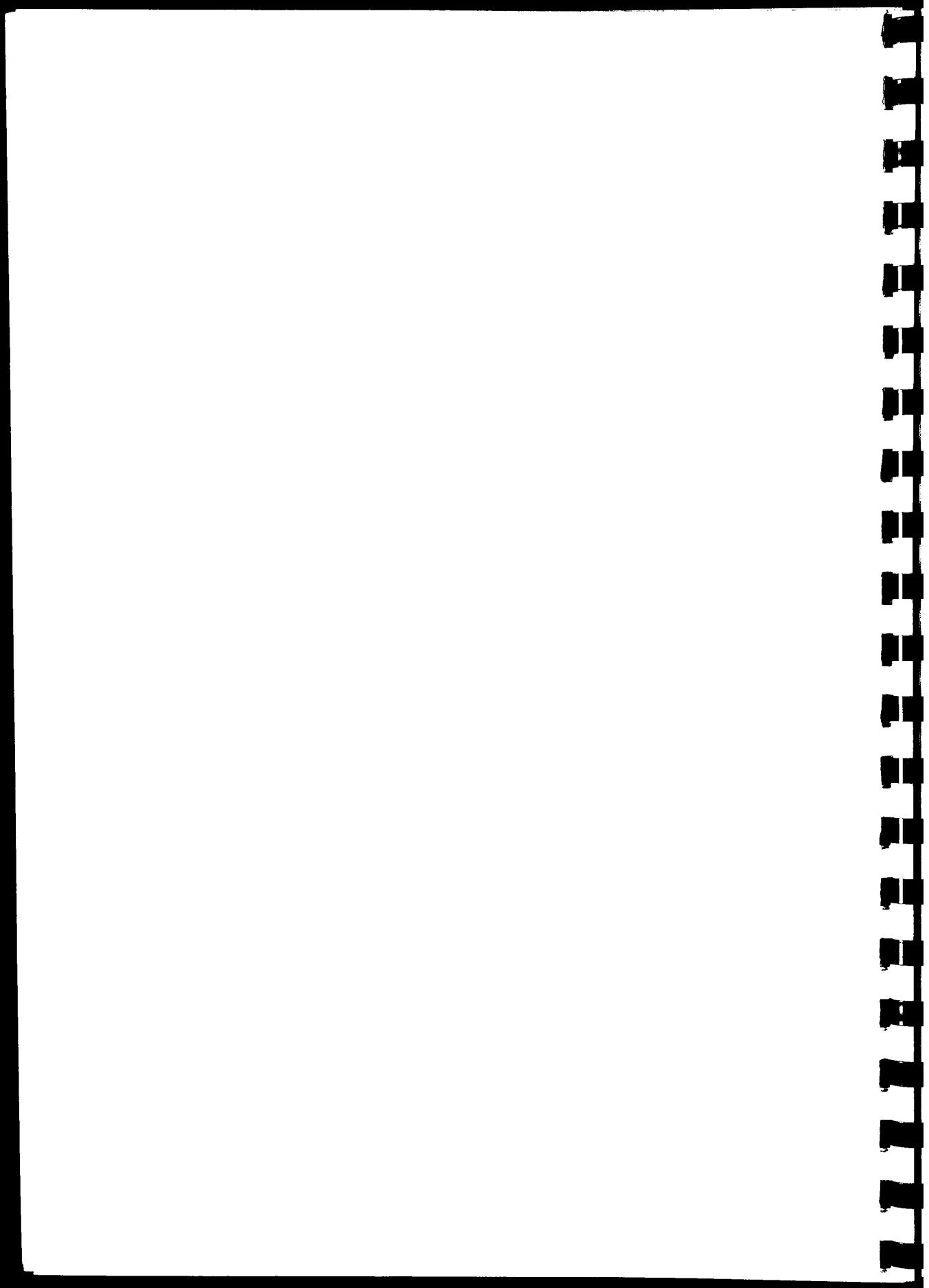
SUBJECT	HSD	IR	INST.	FACULTY	ORS
	No. (%)				
Special client groups					
Homeless people	0 (0)	1 (7)	0 (0)	0 (0)	0 (0)
Elderly people	2 (9)	2 (13)	0 (0)	2 (13)	0 (0)
People with physical disabilities	5 (23)	2 (13)	0 (0)	1 (7)	0 (0)
People with learning difficulties	7 (32)	2 (13)	0 (0)	2 (13)	0 (0)
People with mental health problems	4 (18)	2 (13)	0 (0)	0 (0)	1 (4)
Black populations	7 (32)	2 (13)	2 (20)	0 (0)	0 (0)
Patients with a terminal illness	1 (5)	2 (13)	1 (10)	0 (0)	1 (4)
People with Acquired Immune Deficiency Syndrome and H.I.V. infections	2 (9)	2 (13)	0 (0)	0 (0)	0 (0)
Informal carers	4 (18)	1 (7)	0 (0)	0 (0)	1 (4)
Pregnant women	2 (9)	2 (13)	0 (0)	0 (0)	0 (0)
Other	0 (0)	0 (0)	0 (0)	0 (0)	0 (0)
Other topics not specified above	2 (9)	0 (0)	6 (5)	0 (0)	0 (0)





Appendix C

Literature of Interest



Books

Measured as % total respondents from
each section of the Fund

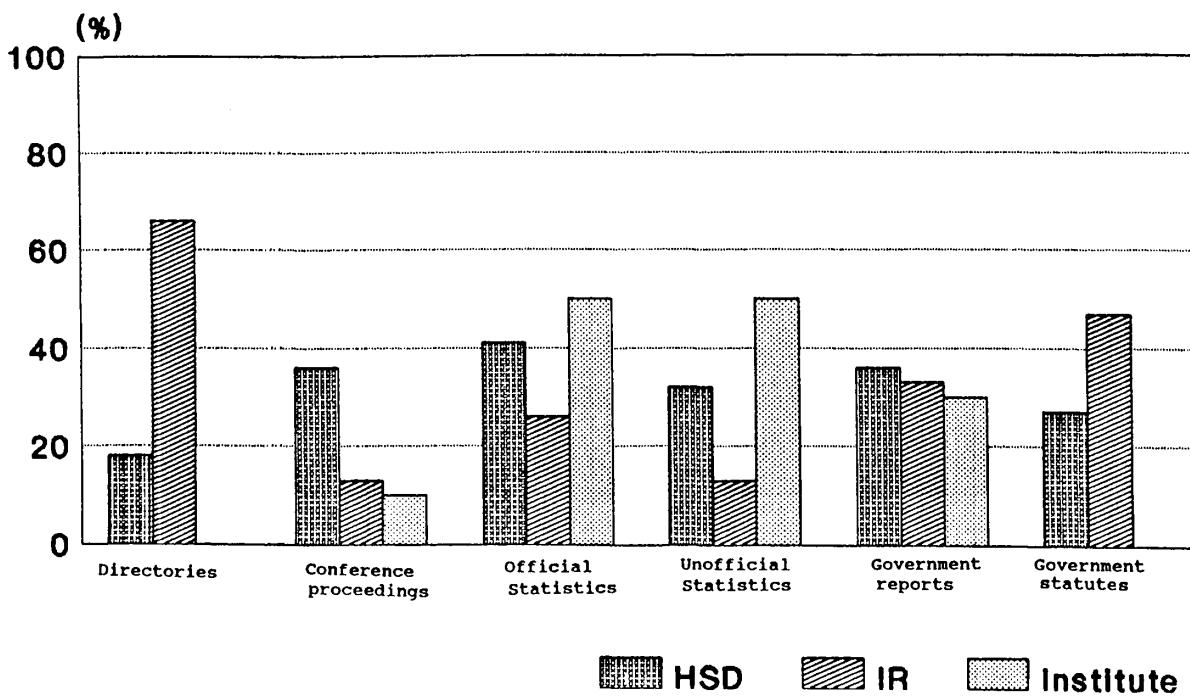
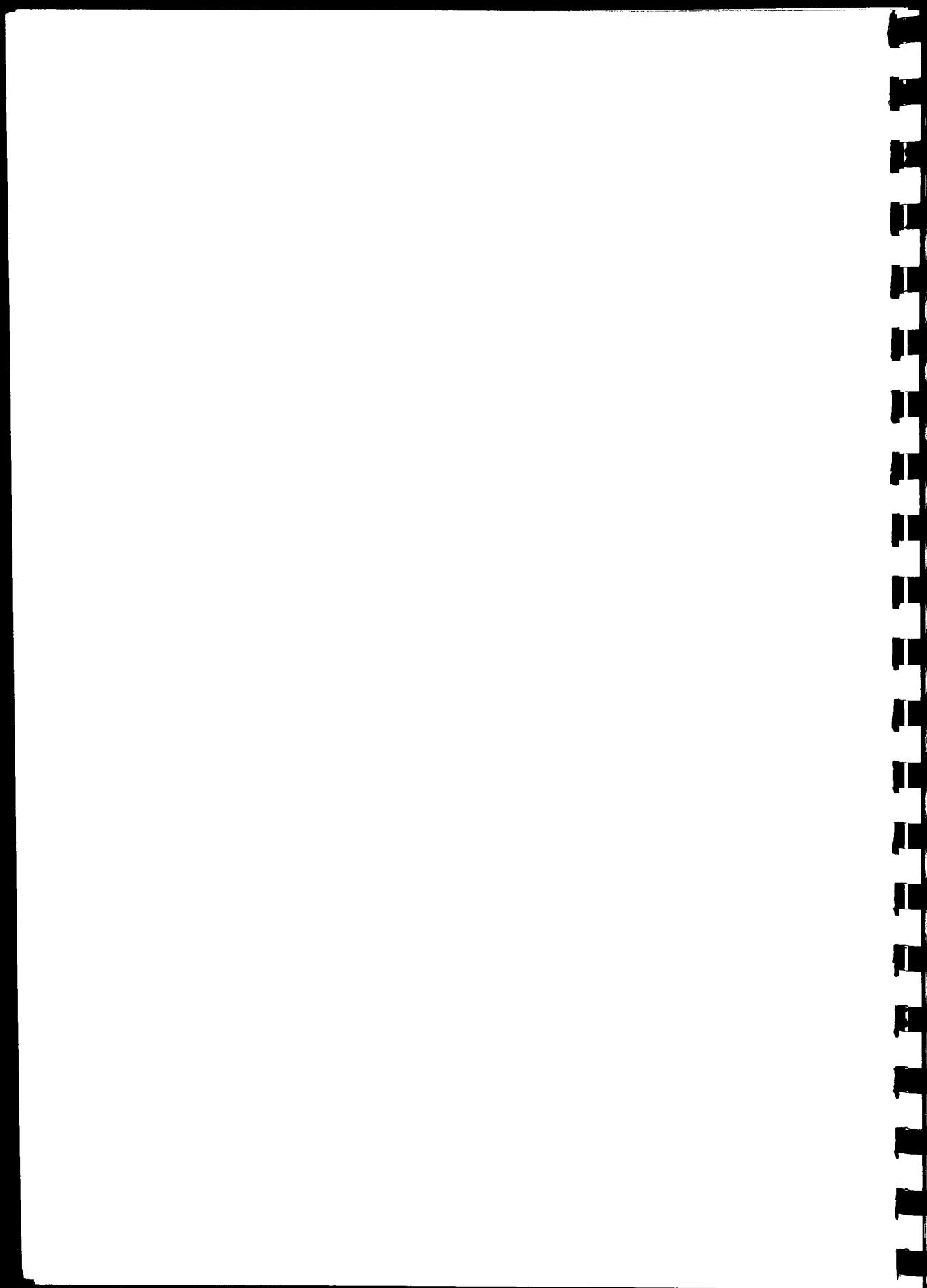


Figure 1b



Books

Measured as % total respondents from
each section of the Fund

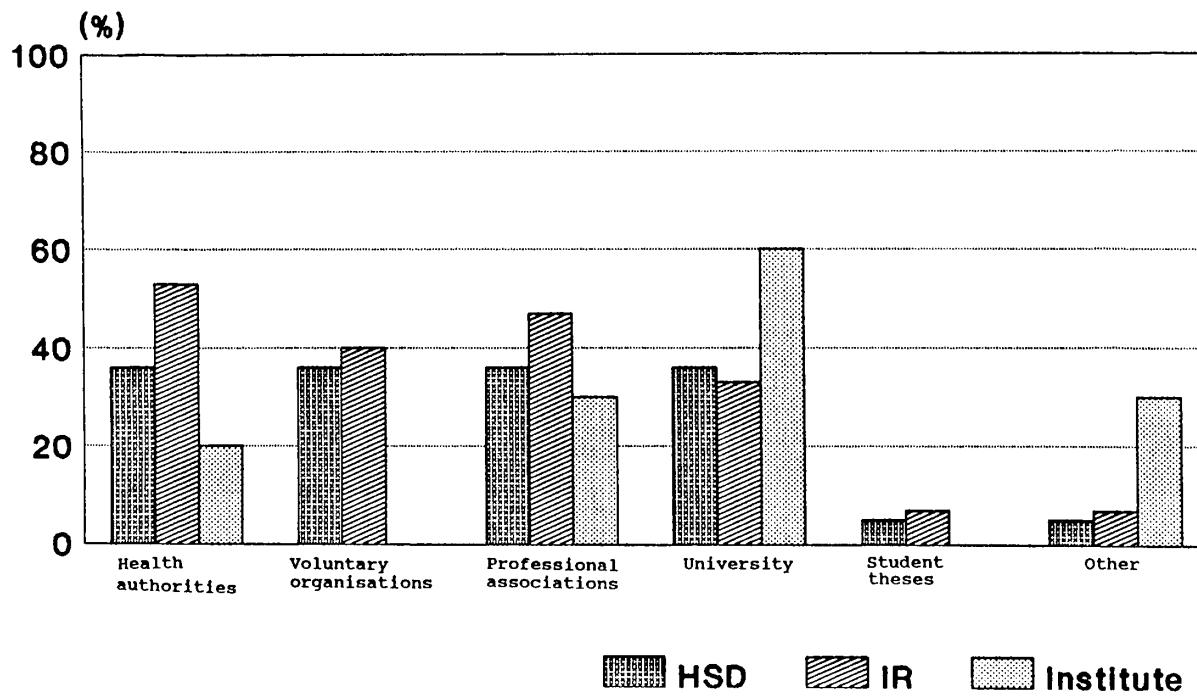
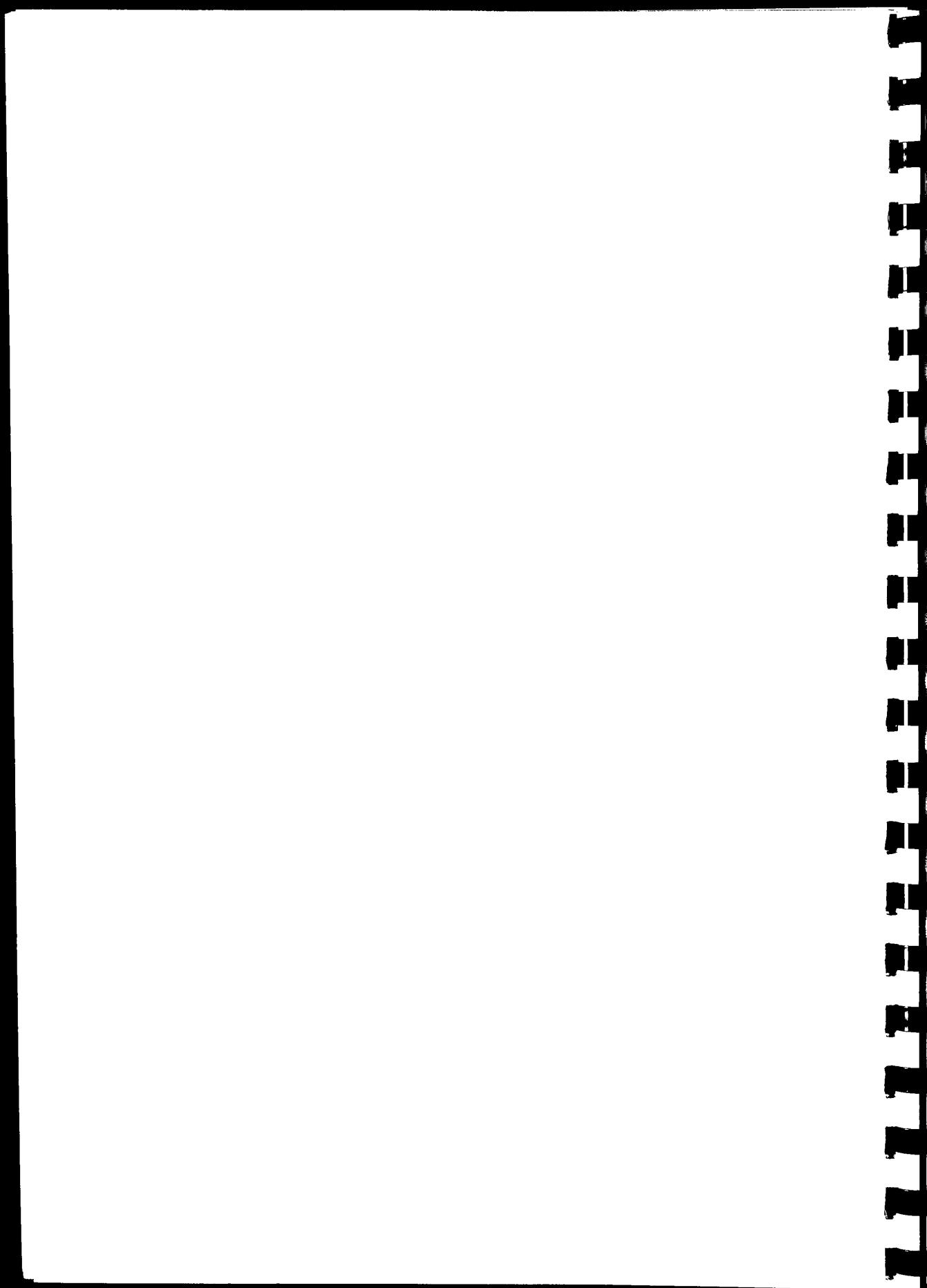


Figure 2b



Grey Literature

Measured as % total respondents from
each section of the Fund

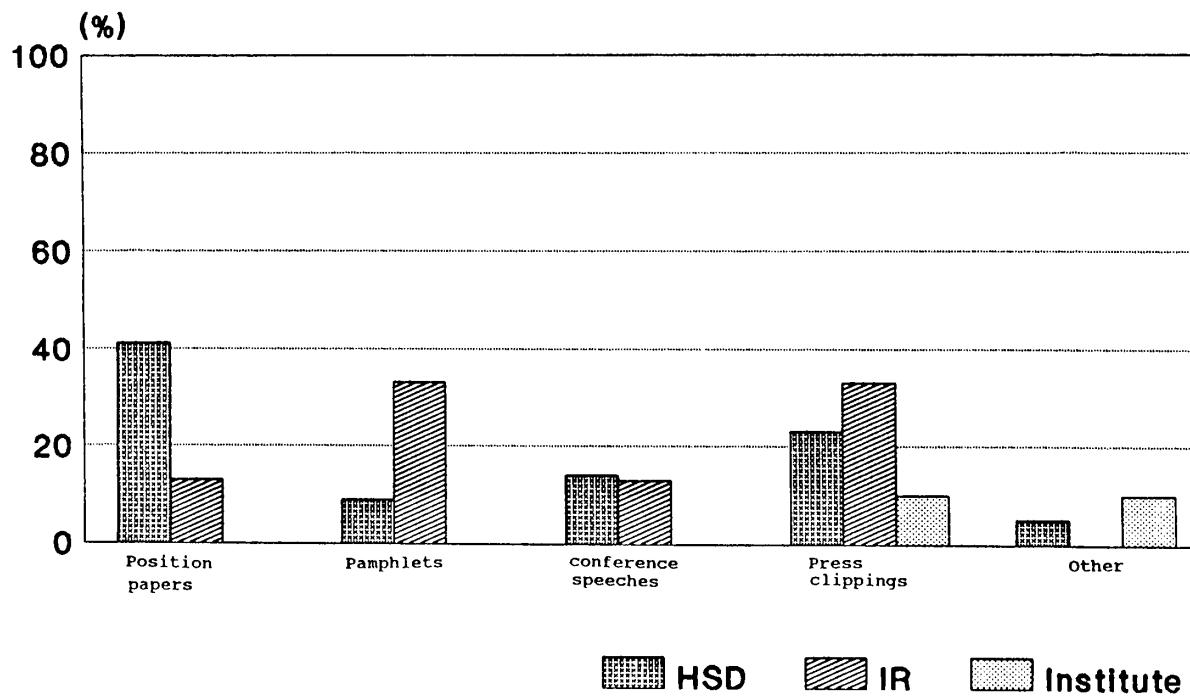
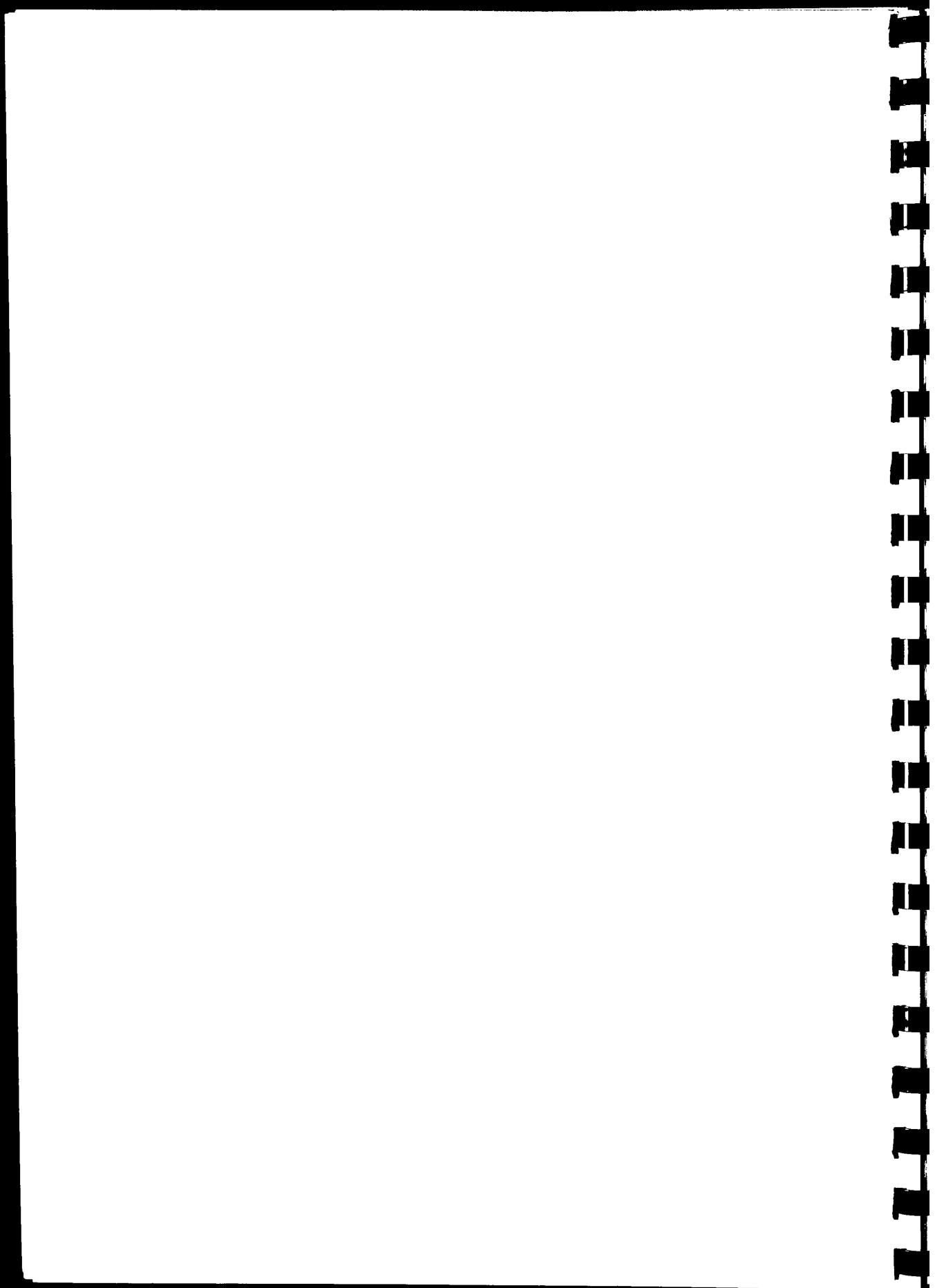


Figure 3b



Other Literature
Measured as % total respondents from
each section of the Fund

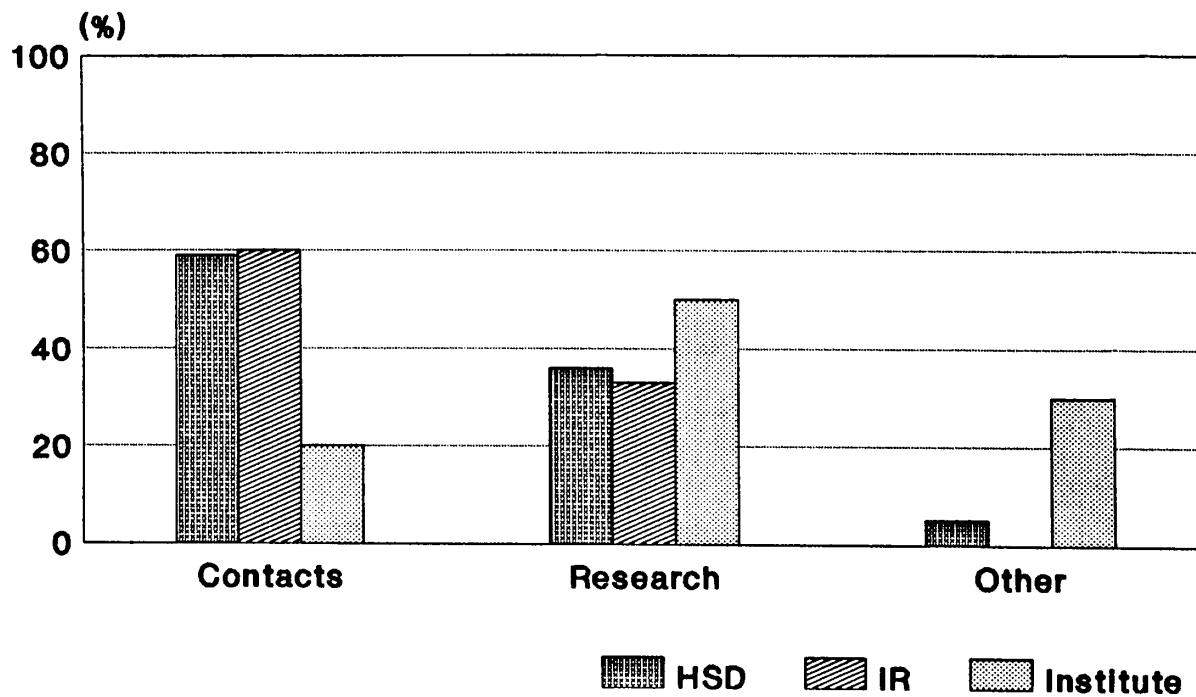
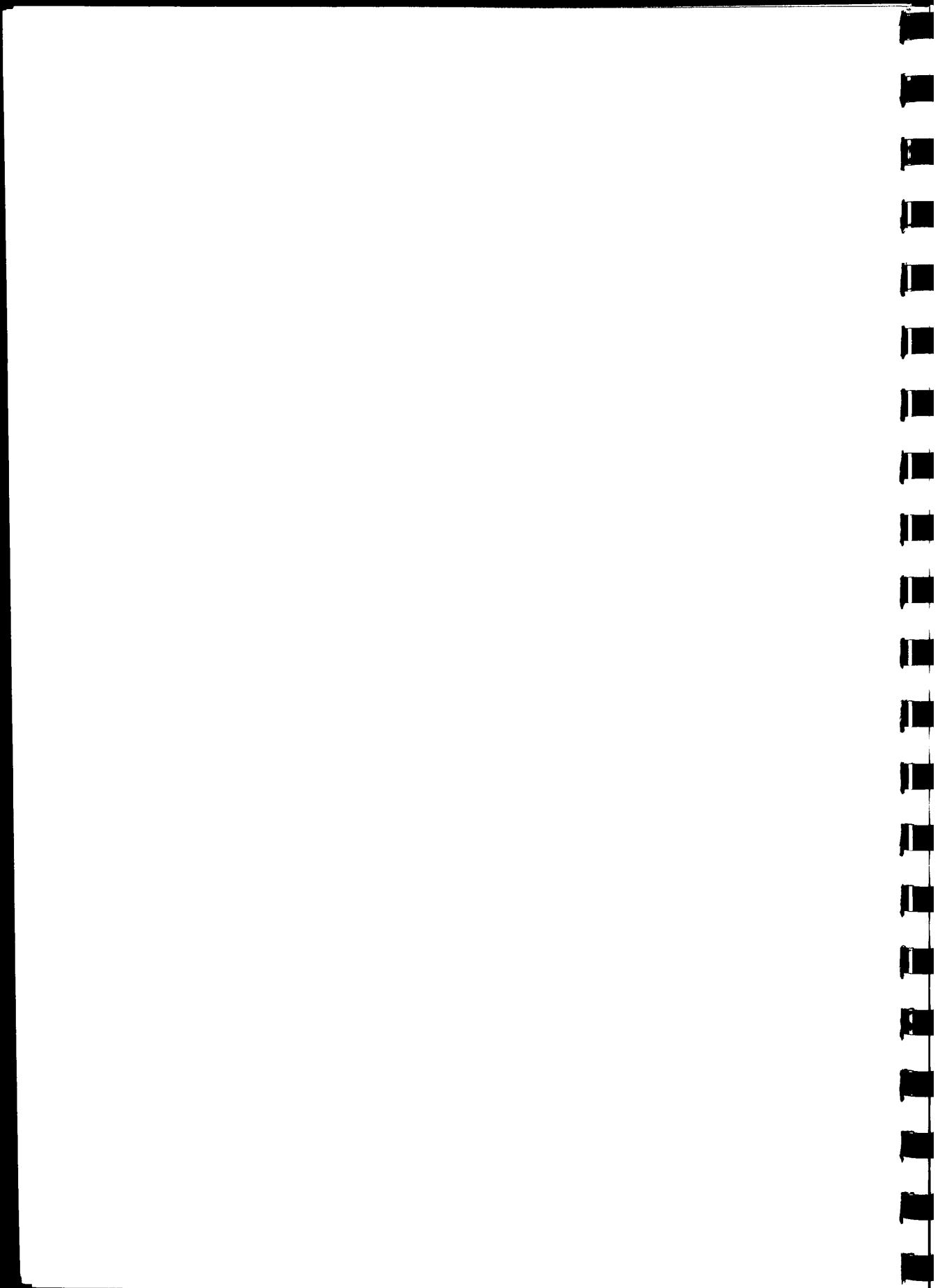


Figure 4b



Journals
Measured as % total respondents from
each section of the Fund

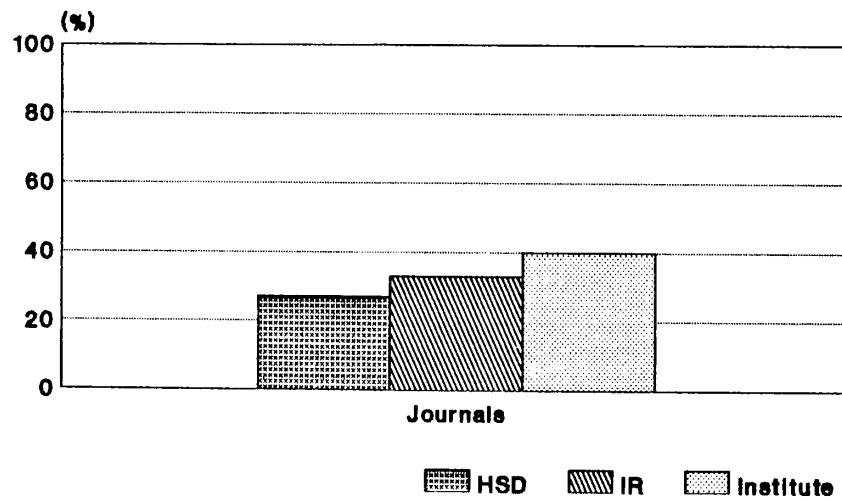
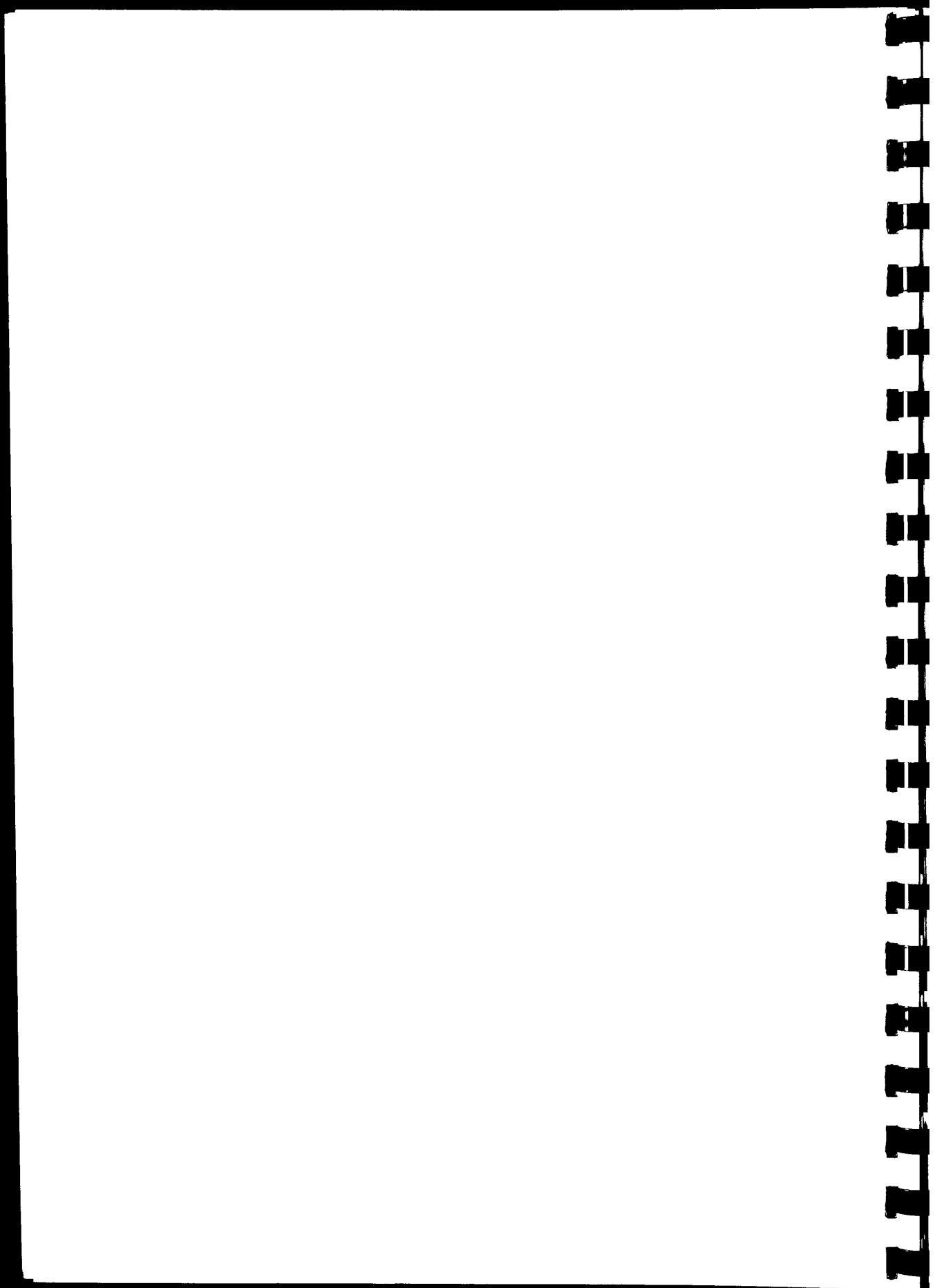


Figure 5b



Books

Measured as % total respondents from
each section of the Fund

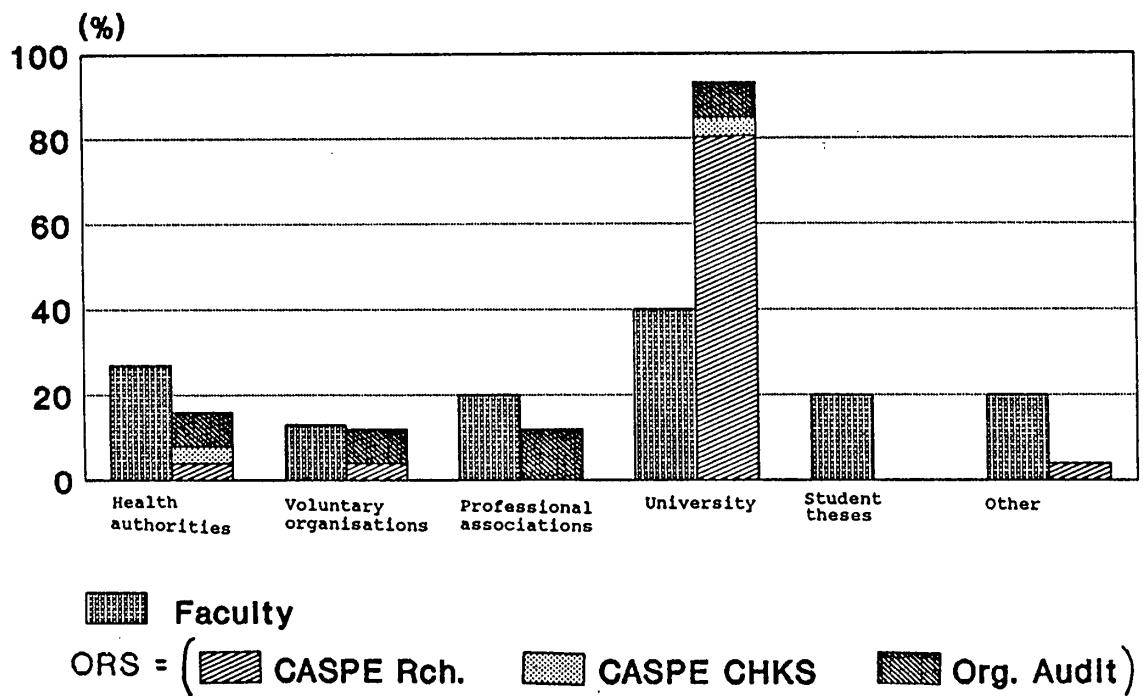
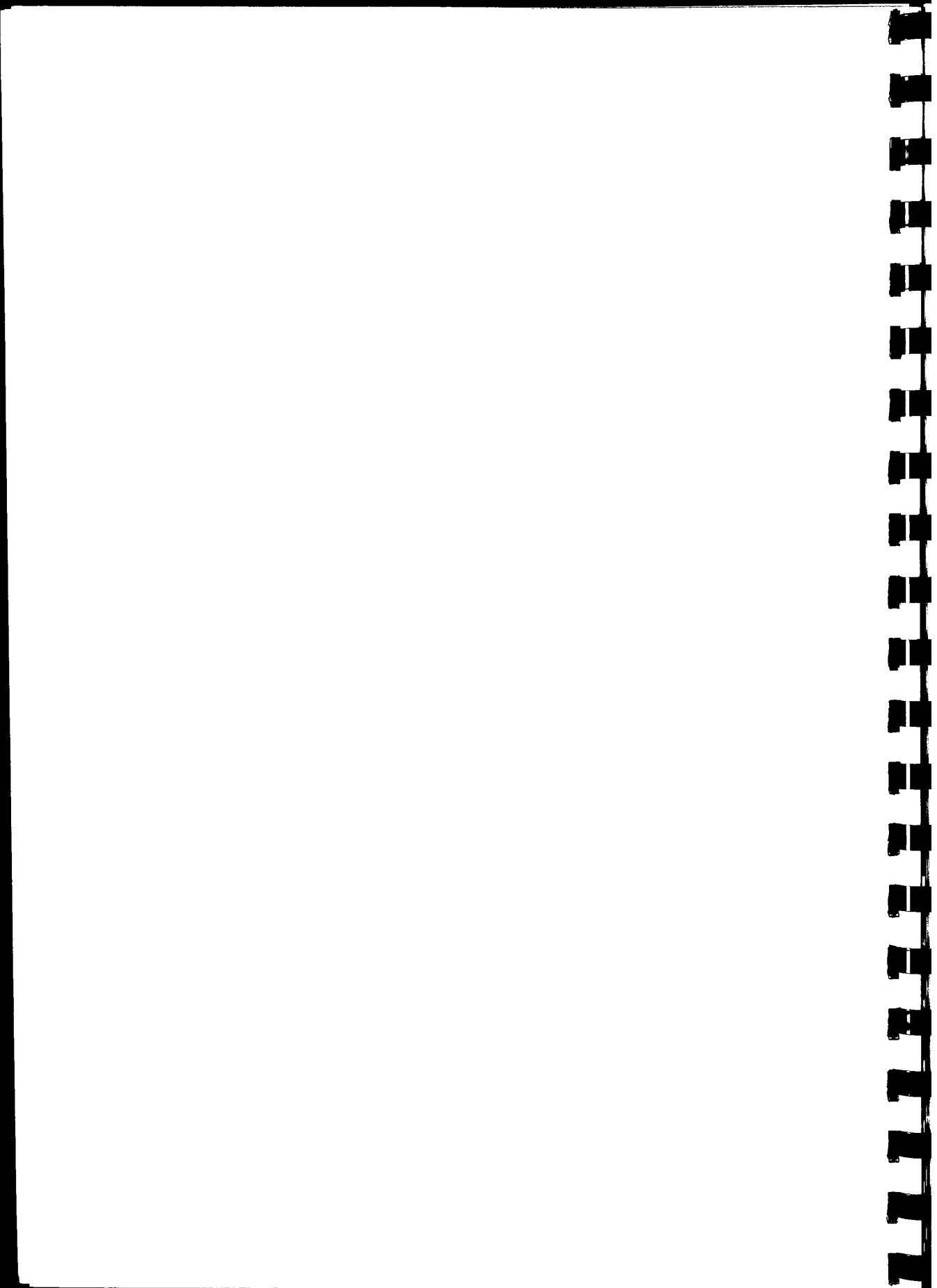


Figure 7b



Books

Measured as % total respondents from
each section of the Fund

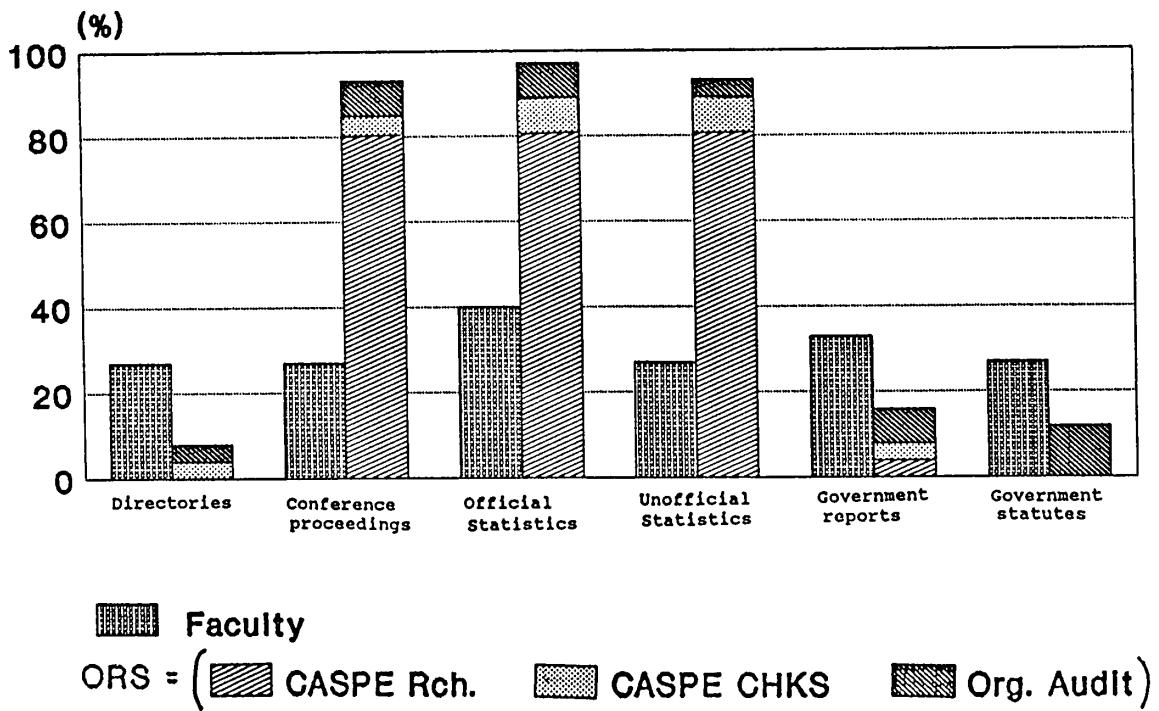
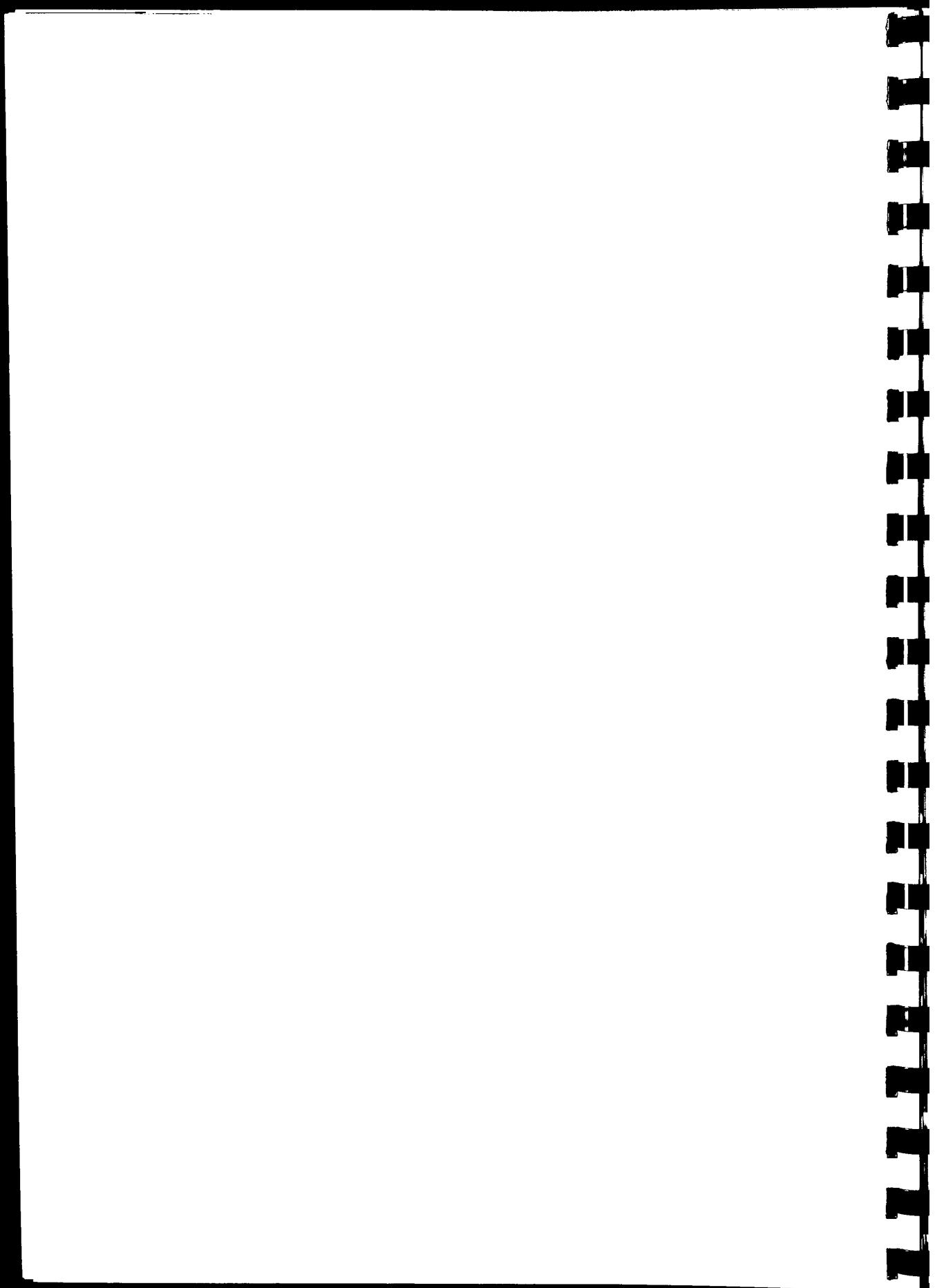


Figure 6b



Grey Literature

Measured as % total respondents from
each section of the Fund

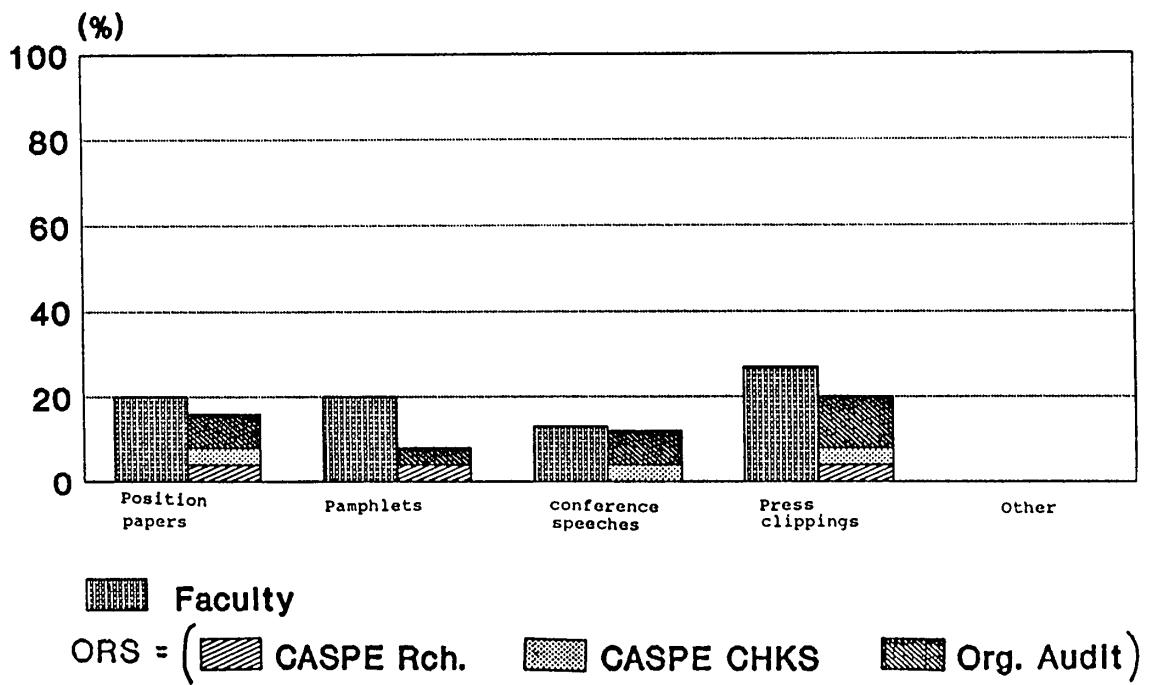
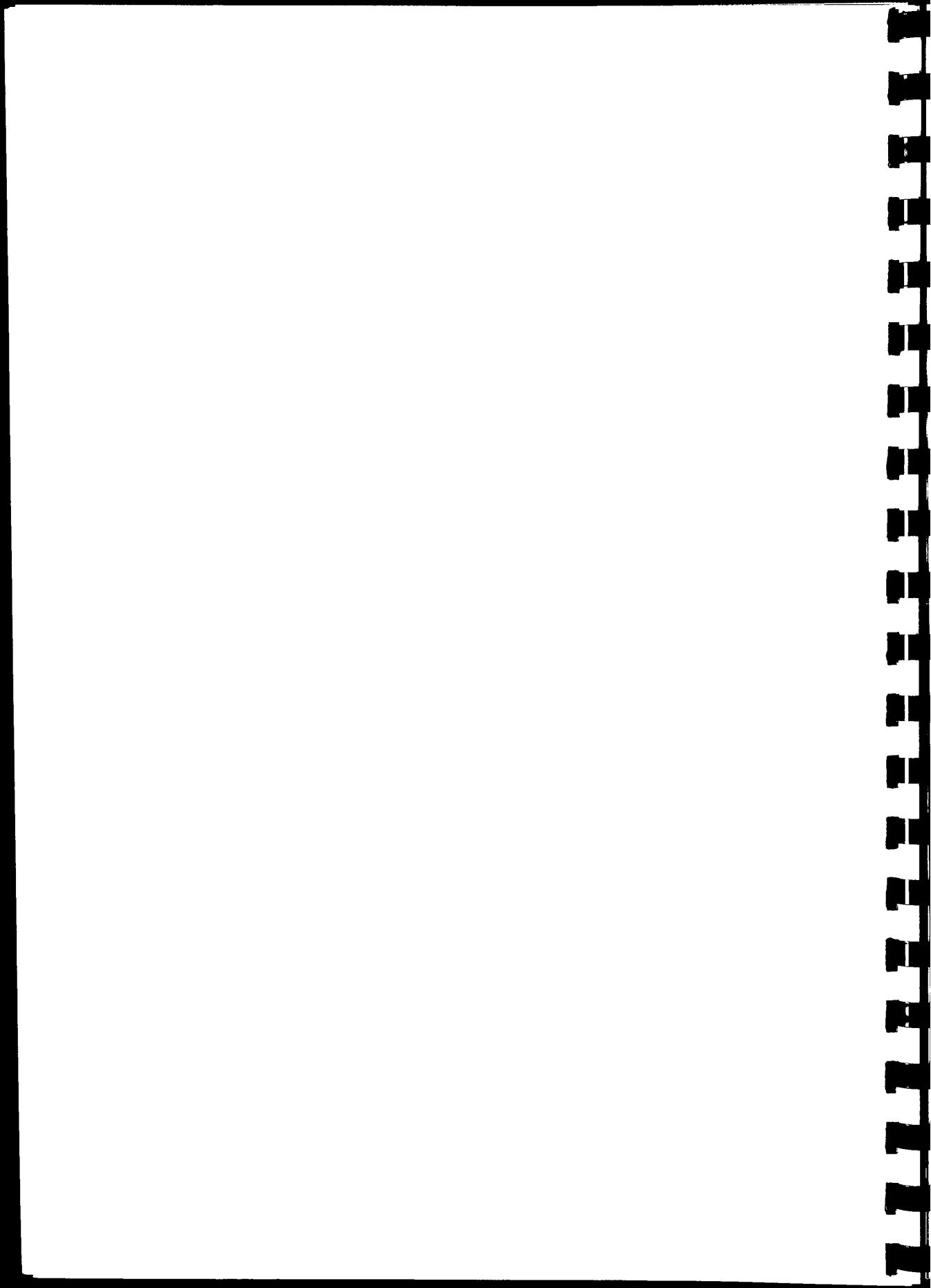


Figure 8b



Other Literature

Measured as % total respondents from
each section of the Fund

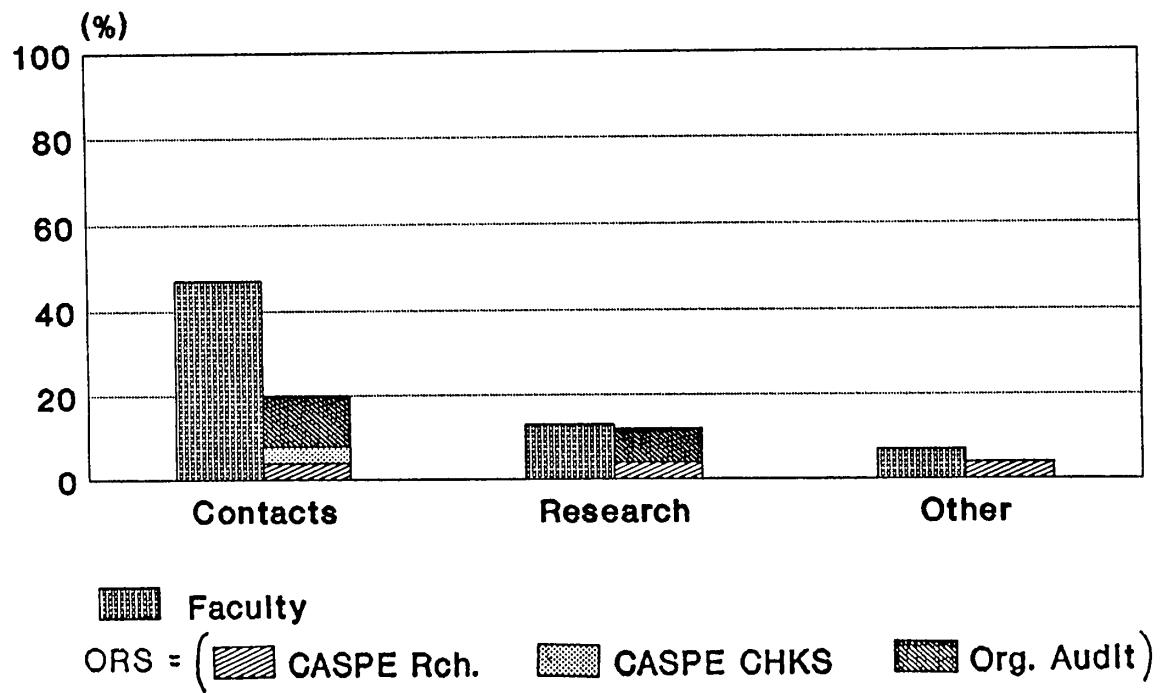
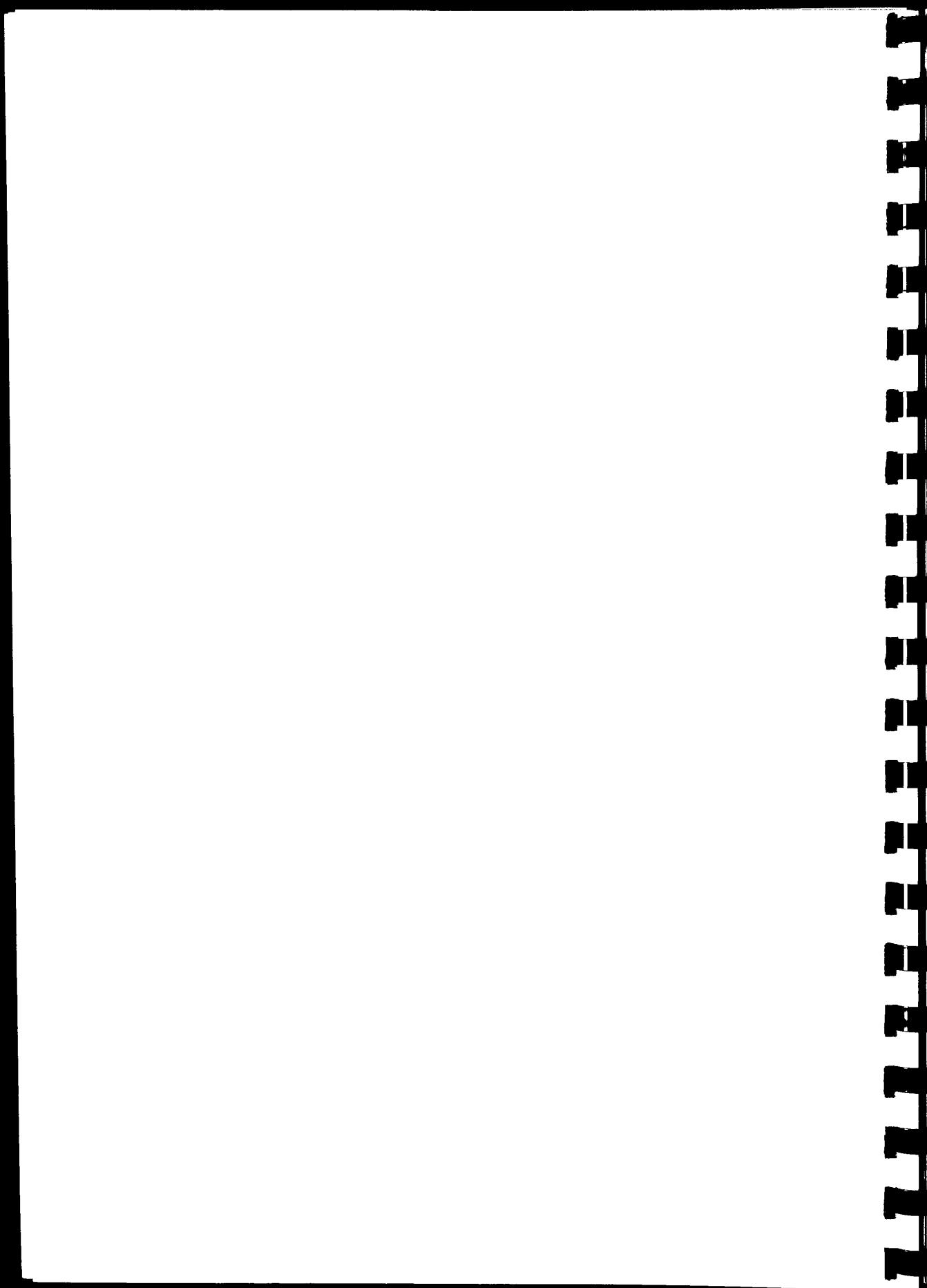


Figure 9b



Journals
Measured as % total respondents from
each section of the Fund

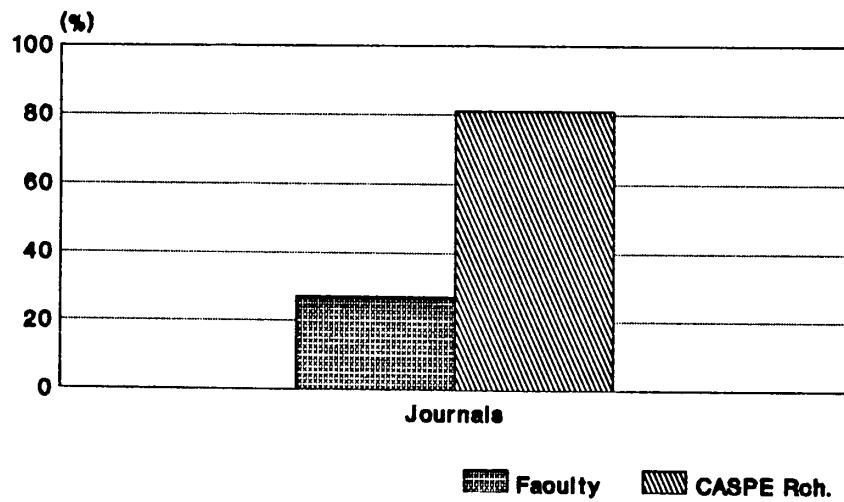
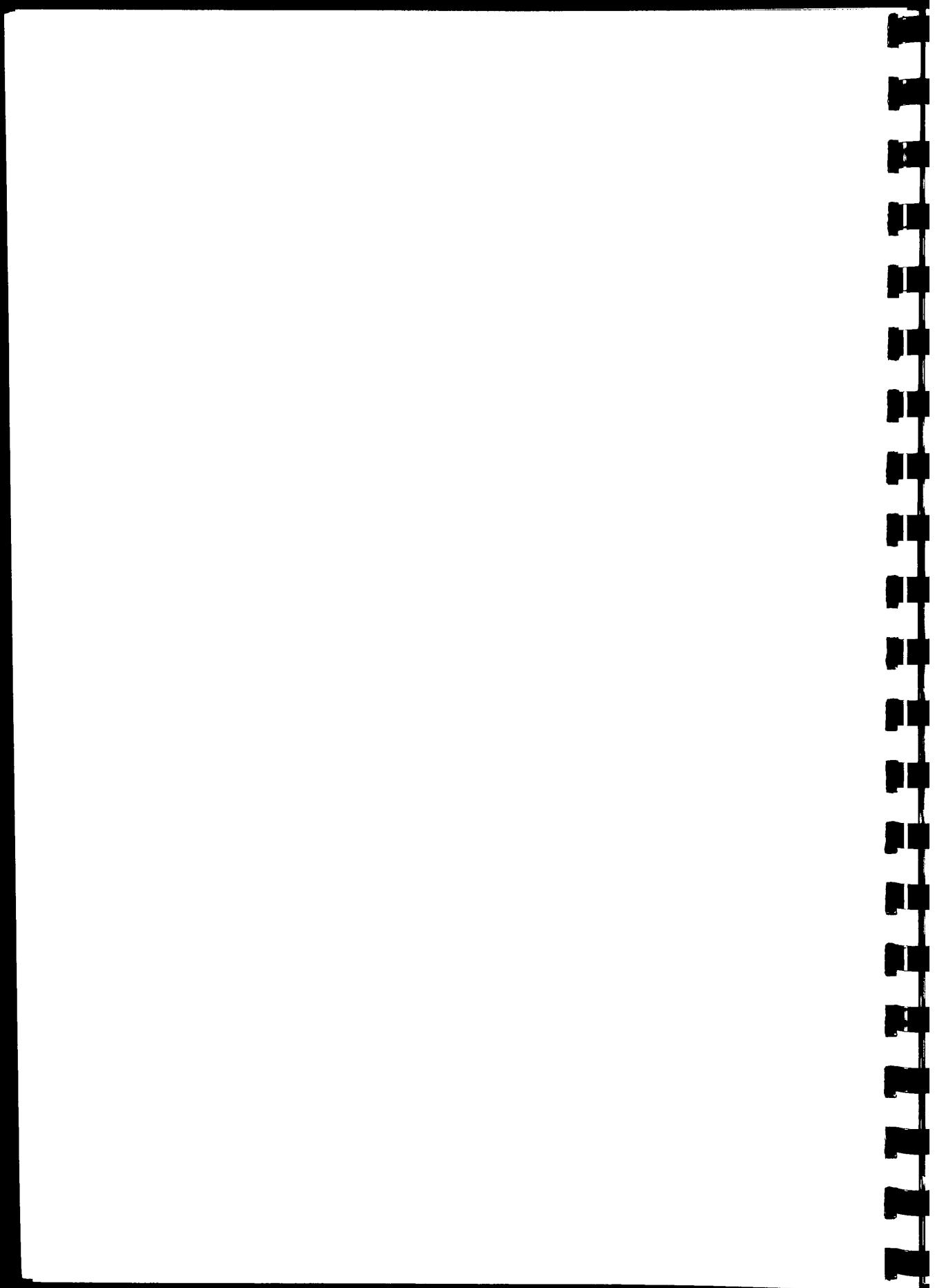
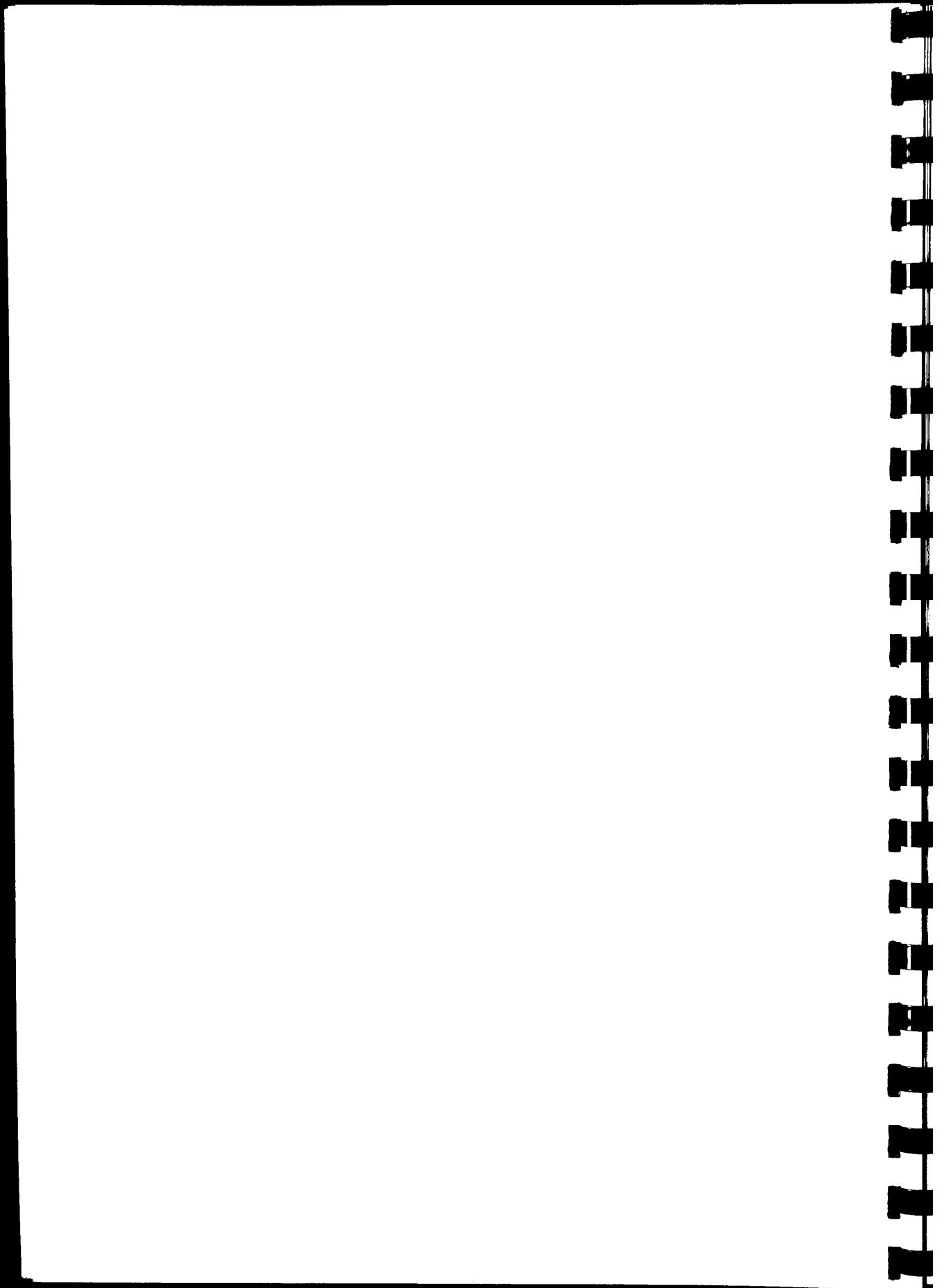


Figure 10 b



Appendix D

The Questionnaire



SURVEY OF KING'S FUND STAFF INTEREST IN
EUROPEAN HEALTH CARE

This survey is designed to help determine collecting practices for the Centre library and to provide information support to the Cross-Fund Working Party on Europe.

Please TICK the relevant boxes.

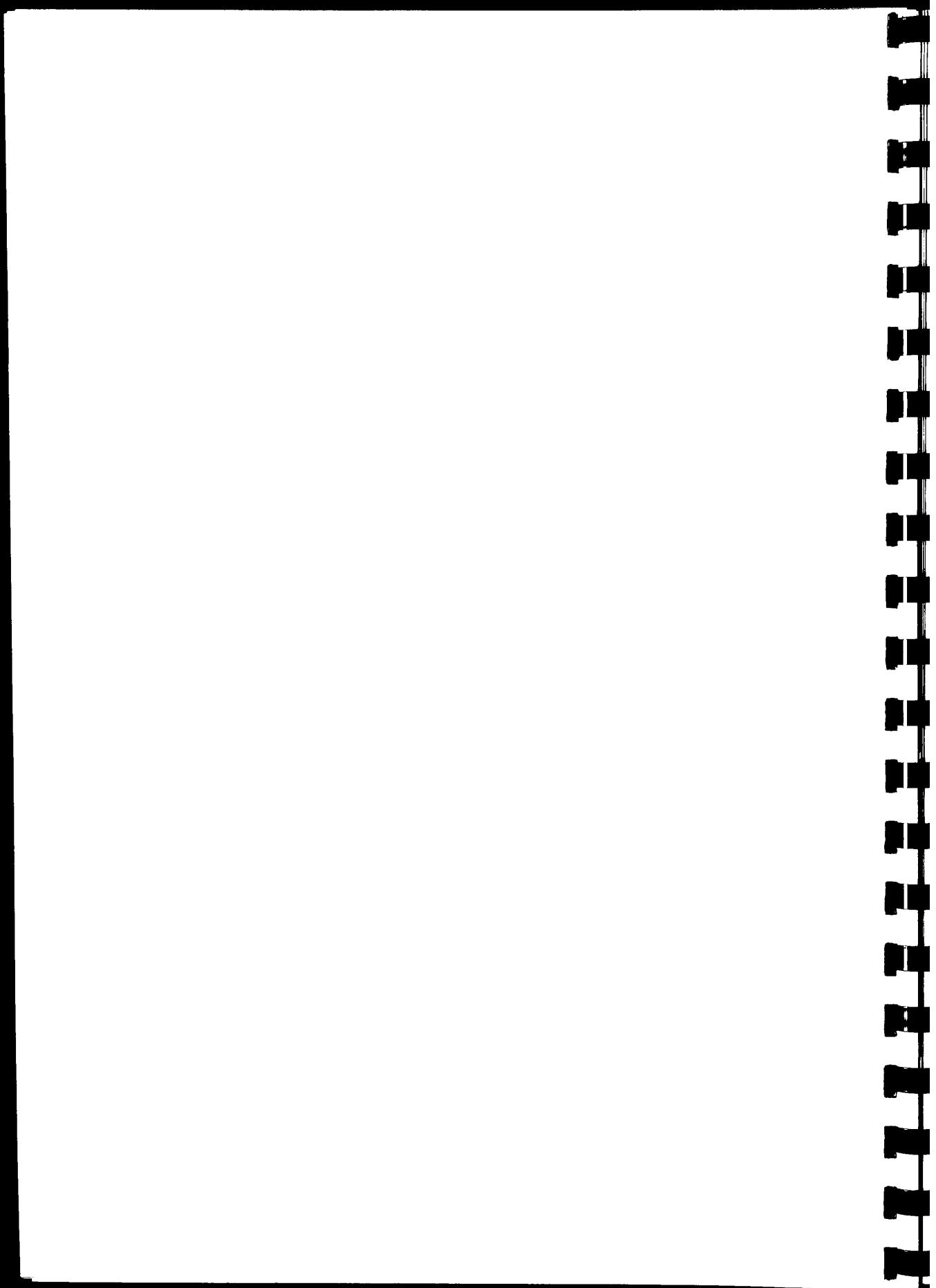
1. Which geographical areas are of interest to you ?

	Area you are working in	Area not working in but of interest
A) European Community	<input type="checkbox"/>	<input type="checkbox"/>
B) Central and Eastern Europe (e.g. Poland)	<input type="checkbox"/>	<input type="checkbox"/>
C) Other European countries (e.g. Sweden)	<input type="checkbox"/>	<input type="checkbox"/>

Please specify country/ies
of particular interest.

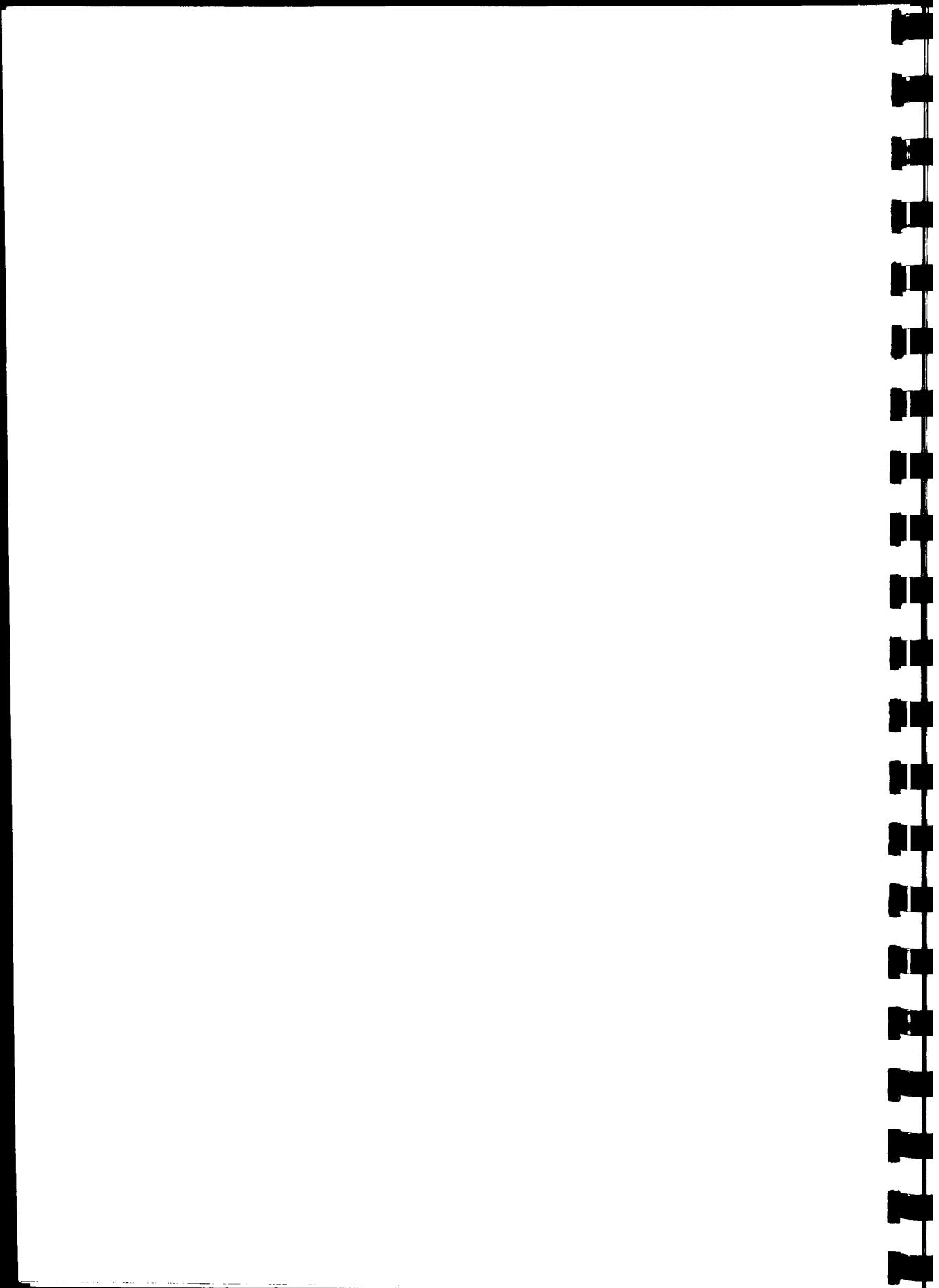
2. Given the European context, which areas are of interest to you ?

	Area you are working in	Area not working in but of interest
A) General areas in health care (including acute, community and social care)		
- Quality of care/service provision	<input type="checkbox"/>	<input type="checkbox"/>
- Service organisation	<input type="checkbox"/>	<input type="checkbox"/>
- Organisational development	<input type="checkbox"/>	<input type="checkbox"/>
- Management/planning	<input type="checkbox"/>	<input type="checkbox"/>
- Economics/finance/funding (including health insurance)	<input type="checkbox"/>	<input type="checkbox"/>
- Contracting	<input type="checkbox"/>	<input type="checkbox"/>
- Ethics	<input type="checkbox"/>	<input type="checkbox"/>
- Education of health professionals	<input type="checkbox"/>	<input type="checkbox"/>
- Movement of health professionals	<input type="checkbox"/>	<input type="checkbox"/>
- Health needs assessment	<input type="checkbox"/>	<input type="checkbox"/>
- Pharmaceuticals (e.g. costs/benifits)	<input type="checkbox"/>	<input type="checkbox"/>



SURVEY OF KING'S FUND STAFF INTEREST IN
EUROPEAN HEALTH CARE

	Area you are working in	Area not working in but of interest
- Public/environmental health	<input type="checkbox"/>	<input type="checkbox"/>
- Information systems for users	<input type="checkbox"/>	<input type="checkbox"/>
- Other: please specify	<input type="checkbox"/>	<input type="checkbox"/>
<hr/> <hr/>		
B) Acute care		
- Clinical/medical audit	<input type="checkbox"/>	<input type="checkbox"/>
- Outcome measurement	<input type="checkbox"/>	<input type="checkbox"/>
- Clinicians as managers	<input type="checkbox"/>	<input type="checkbox"/>
- Futures (e.g. Future of acute hospitals)	<input type="checkbox"/>	<input type="checkbox"/>
- Other: please specify	<input type="checkbox"/>	<input type="checkbox"/>
<hr/> <hr/>		
C) Private health care	<input type="checkbox"/>	<input type="checkbox"/>
D) Community and social care		
- Community practitioners (e.g. G.P's, professional carers)	<input type="checkbox"/>	<input type="checkbox"/>
- Intersectoral collaboration	<input type="checkbox"/>	<input type="checkbox"/>
- Residential care	<input type="checkbox"/>	<input type="checkbox"/>
- Domiciliary care	<input type="checkbox"/>	<input type="checkbox"/>
- Day care	<input type="checkbox"/>	<input type="checkbox"/>
- Respite care	<input type="checkbox"/>	<input type="checkbox"/>
- Independent living	<input type="checkbox"/>	<input type="checkbox"/>
- User involvement	<input type="checkbox"/>	<input type="checkbox"/>
- Other: please specify	<input type="checkbox"/>	<input type="checkbox"/>
<hr/> <hr/>		

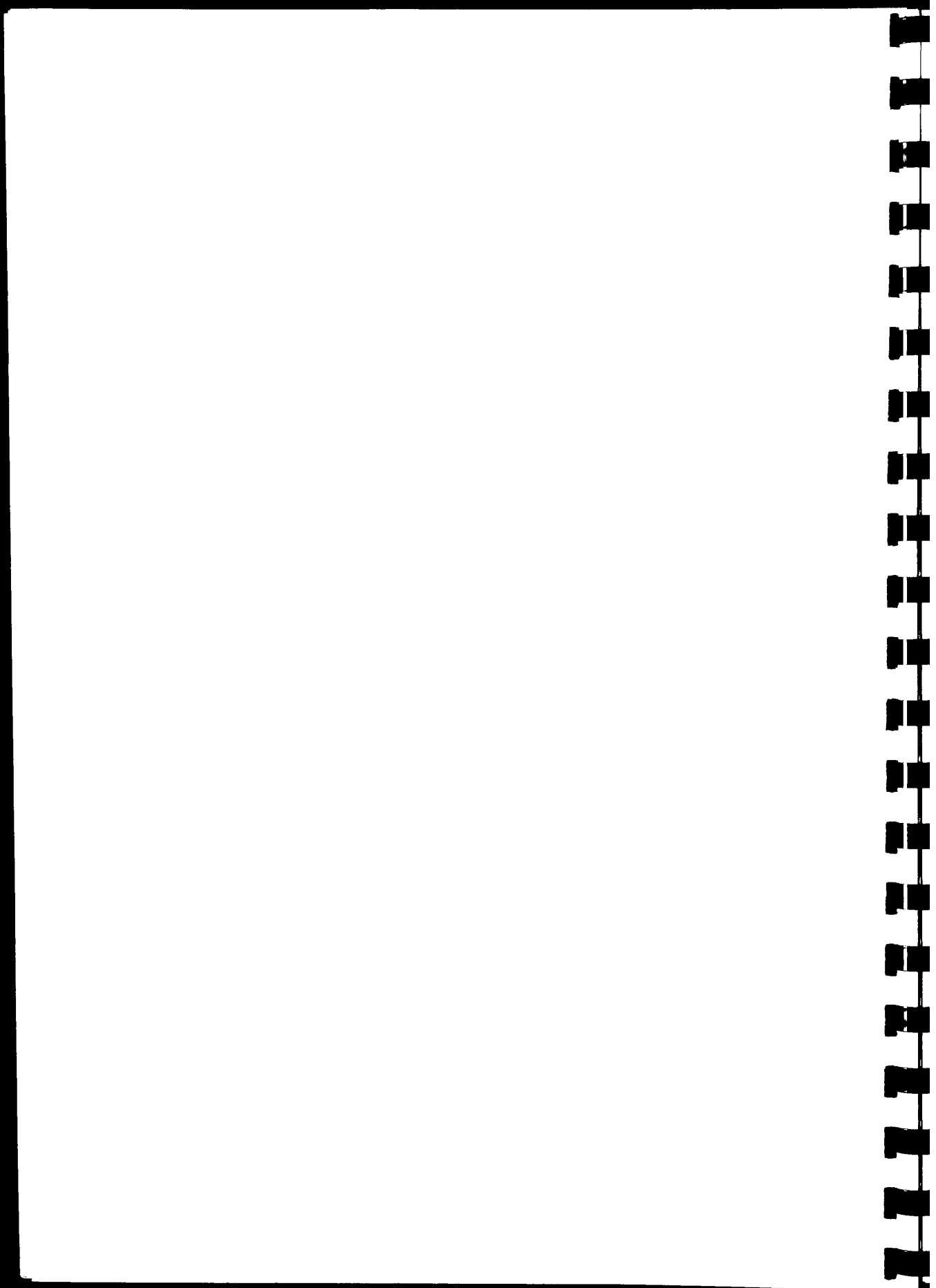


SURVEY OF KING'S FUND STAFF INTEREST IN
EUROPEAN HEALTH CARE

	Area you are working in	Area not working in but of interest
E) Voluntary organisations	[]	[]
F) Special client groups		
- Homeless people	[]	[]
- Elderly people	[]	[]
- People with physical disabilities	[]	[]
- People with learning difficulties	[]	[]
- People with mental health problems	[]	[]
- Black populations	[]	[]
- Patients with a terminal illness	[]	[]
- People with Acquired Immune Deficiency Syndrome and H.I.V. infections	[]	[]
- Informal carers	[]	[]
- Pregnant women	[]	[]
- Other: please specify	[]	[]

G) Other European areas of interest not mentioned above:
please specify

H) Please list the major pieces of European work in which you are
currently involved or expect to be involved in the near future.



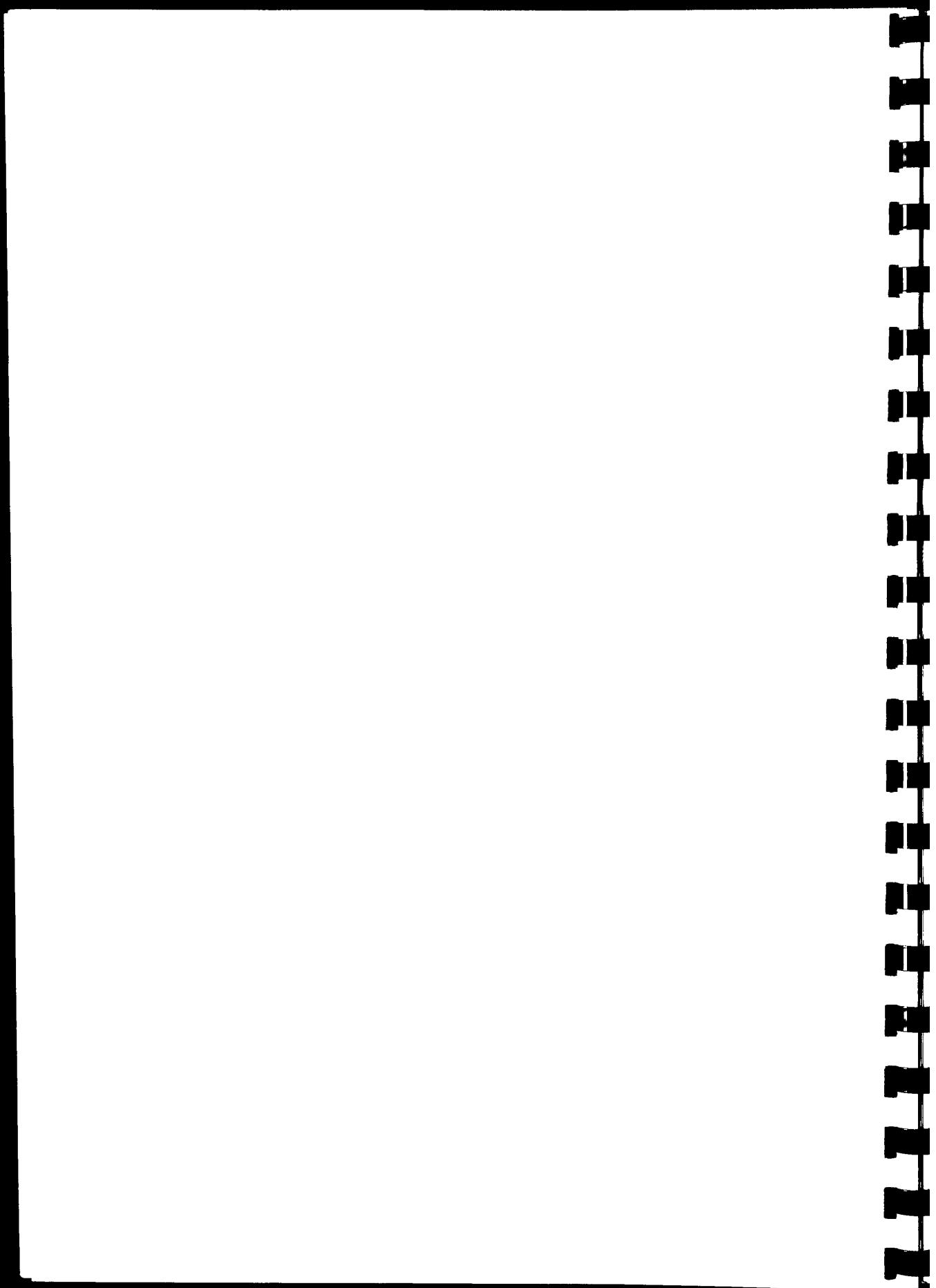
SURVEY OF KING'S FUND STAFF INTEREST IN
EUROPEAN HEALTH CARE

3. Please share with us information about non King's Fund European health care projects with which you have been involved.

4. What type of European literature would be of interest to you ?

A) Books

- Directories
- Conference proceedings
- Statistics
 - Official
 - Unofficial
- Government reports
- Government statutory documents
- Non-government reports
 - Health authorities
 - Voluntary organisations
 - Professional associations
 - University/Academic e.g. Centre for Health Economics
 - Student theses
 - Other: please specify



SURVEY OF KING'S FUND STAFF INTEREST IN
EUROPEAN HEALTH CAREB) Journals

If there are journals of particular interest please specify.

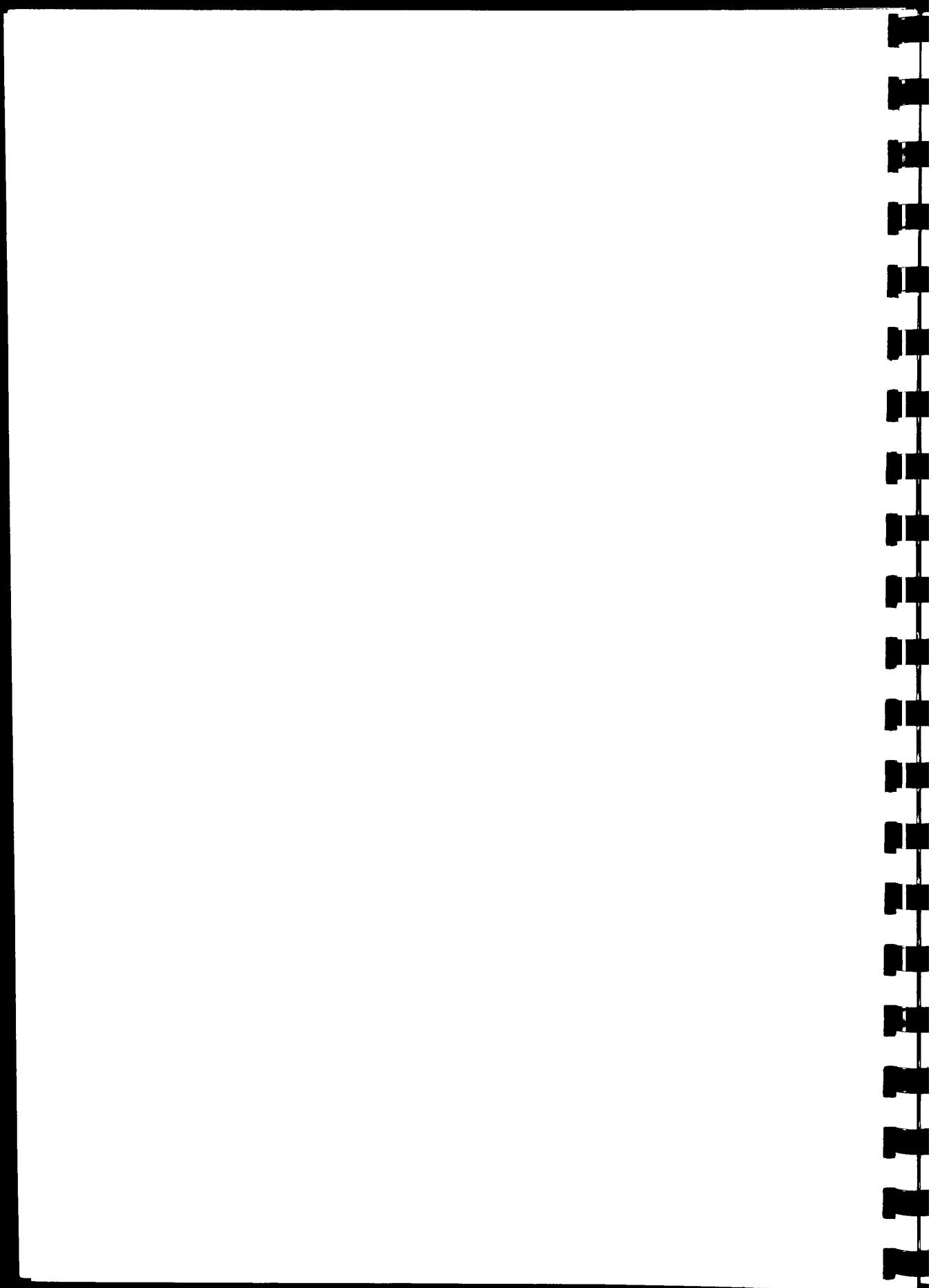
C) Grey literature

- Position papers
 - Pamphlets
 - Texts of conference speeches
 - Press clippings
 - Other: please specify
-
-

5. It is the policy of the King's Fund Centre Library to collect primarily English language documents. If we were to change this, what other languages would you like to see represented in our collection ? Please specify

6. What other European information would be of interest to you ?

- Contacts (people and organisations)
 - Research in progress
 - Other: please specify
-
-



SURVEY OF KING'S FUND STAFF INTEREST IN
EUROPEAN HEALTH CARE

Thank you for taking the time to complete this survey.

Please assist us by completing the following (you may leave it blank if you wish):

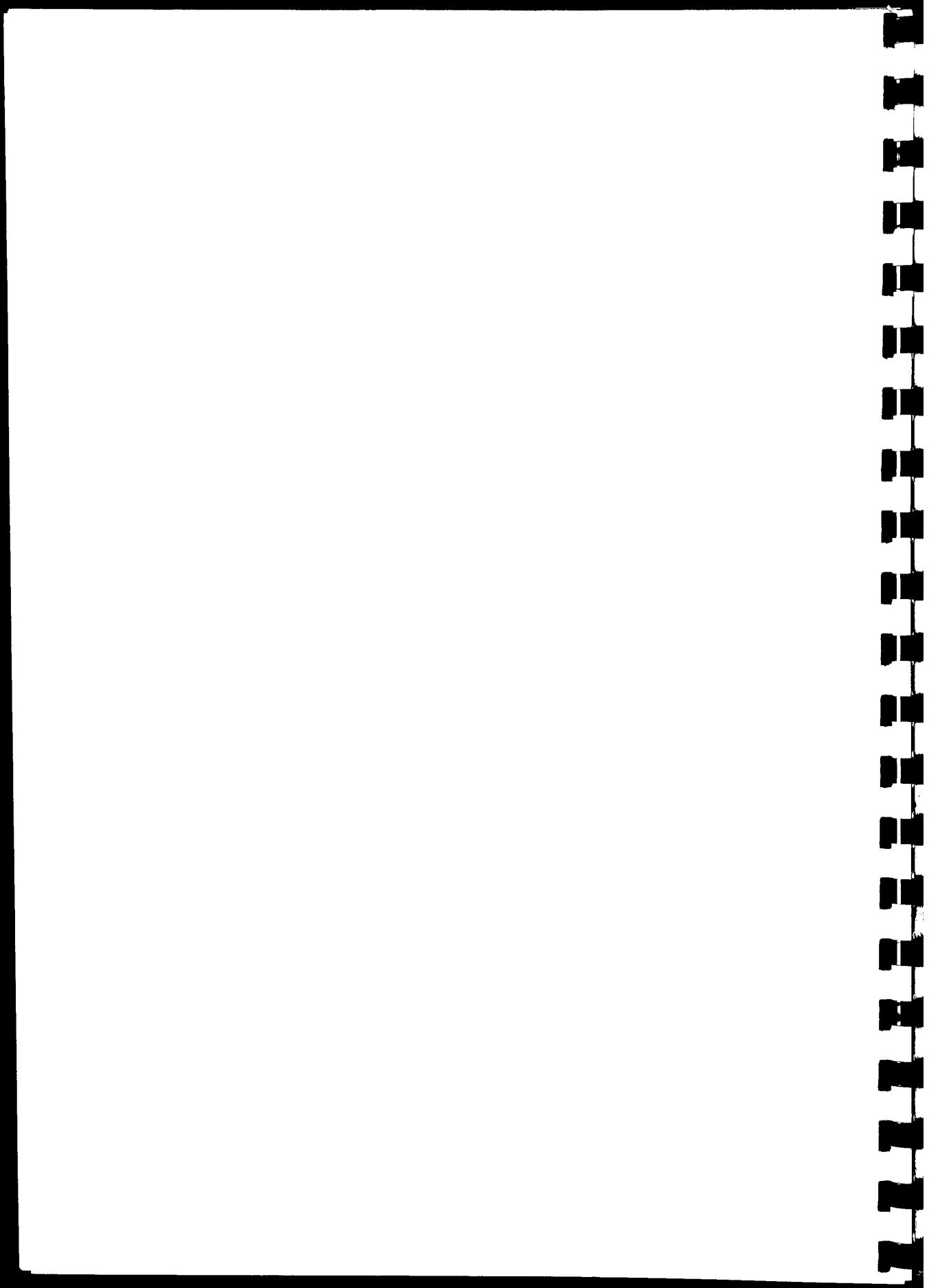
Your Name: _____

Department: _____

Ext.: _____

Please return the survey by December 9th 1991 to:

Mandy Gafour
Information Resources
King's Fund Centre



King's Fund



54001000189129

