

WYTHAM HALL

Annual Report 2007 - 2008



Breaking the cycle of street homelessness

“Rien ne s’explique, rien ne se discute, tout se voit”

CIORAN

Le Crepuscule des Pensees, PARIS 1938

WYTHAM HALL ANNUAL REPORT
1st April 2007 – 31st March 2008

CONTENTS

Wytham Hall - An Introduction	2
Benefactors of Wytham Hall	3
Council of Management	4
Members of Wytham Hall	5
Chairman's Report	7
Doctors' Report	8
Supported Housing Report	10
Case Reports	13
Resident's Report	15
Events of 2007-2008	16
Patient Services Report	17
Statistics	19
Income and Expenditure Account and Cash Flow Statement	21
Visitors to Wytham Hall	23
Publications	23

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■ WYTHAM HALL - An Introduction

Wytham Hall Recovery Unit was opened in 1984 as a unique and innovative project providing residential care to homeless patients with medical and psychiatric illness. Dr David El Kabir, the then Physician-in-charge of Great Chapel Street Medical Centre (website www.greatchapelst.org.uk), and a group of medical students set up the project. At Great Chapel Street, a walk-in surgery for the homeless in Central London, many patients were seen, who were having difficulty coping on the streets due to ill health. Wytham Hall was established to provide an alternative to hospital admission for these people. Its other aims were to research the causes and consequences of homelessness and to provide medical education.

Until 2007 Wytham Hall functioned as a recovery unit with fourteen beds, run by a

team of care-workers and doctors. During a patient's stay medical problems were addressed in parallel with social and housing needs. A period of illness therefore gave people a valuable opportunity to reconsider their options.

Wytham Hall also owns a shared house and two flats. These have a total of sixteen beds where patients may be housed, providing continued care and rehabilitation. In November 2007 the sick bay at Wytham Hall was converted into five independent flats to provide supported housing for people with medium to low support needs and this system is now up and running. There are plans to create four additional flats in 2008.

(Great Chapel Street Annual Report available on request)



Residents' Barbecue

■ **BENEFACTORS OF WYTHAM HALL**

We would like to thank the following organisations and individuals, as well as those that wish to remain anonymous, for their kind donations and gifts.

FINANCIAL YEAR 2007-2008

Trusts and Statutory Bodies:	Individuals:	
The Sidbury Trust	Mrs B. Banham	Mrs C. B. Tubb
Priority Trust	Lord Brooke of Sutton Mandeville	Dr. M. Hickey & Dr O'Reilly
	Mr D. Derk	Dr J. Crown
	Ms M. Gleave	Dr D. El Kabir
	Mr and Mrs Jupp	Mr C. Littmoden
	Ms Darbyshire	Sir J. Birch
	Ms S. Wilsson	Sir Patrick Nairne
	Duchess of Rutland	Lady Limerick
		Mr John Streets

We would also like to thank the following organisations with whom we regularly cooperate:

ABT Photocopiers; Alcohol Recovery Project; Alcohol Resource Centre; Alcoholics Anonymous; Angel Recruitment Agency; Andrews Computers; Atis Real Weatheralls Surveyors; Atlas Boilers; The Benefits Agency; Birthday Bakers; Broadway; Browns Chemist 195 Shirland Road; Camden & Islington Health Authority; Camden Substance Misuse Team; CARA; Central CAT Team; Central North West London CMHT; Chubb; The Commission for Social Care Inspection; The Connection at St. Martin's; The Core Trust; Dental Surgery 392 Edgware Road; E K Mechanicals; Eurogard; Flexicare; The Gordon Hospital; Great Chapel Street Medical Centre; Guy's Hospital; Harringey Social Services; Health Support Team; Homeless Link; Homeless Persons Unit, Westminster; Housing 21; Hungerford Drug Project; JAG Plumbing; Joint Homelessness Team; Kensington & Chelsea Primary Care Trust; Lancaster Day Centre; Lisson Grove Health Centre; MAC Electrical Services; The Metropolitan Police; MIND; Narcotics Anonymous; Paddington Churches Housing Association; Paddington Drug Treatment Centre; The Passage Day Centre; The Paterson Centre; Portugal Prints; Ronald Brown Optician 393 Harrow Road; SEC; St Charles Hospital; St George's Hospital; SRAC; St Margaret's Drop-In Centre; St Mary's Hospital; St Mungo's Outreach; Salvation Army; Shroton Street Hostel; Supporting People; Thames Reach Bondway; The Terrace Day Centre; WAMH; West End CMHT; West London Day Centre; Western Eye Hospital; Westminster Drug Project; Westminster Housing Benefit; Westminster Social Services; Westminster Transport Department; Westminster Volunteer Bureau; Wharfside Clinic; Westminster Adult Education Service; Woodfield Road Health Centre.

■ PRESIDENT

Belinda Banham, C.B.E, J.P. (supplemental list), B.Sc. (Hons Econ) Dip Philosophy of Medicine (Society of Apothecaries) R.G.N. President of Wytham Hall Sick Bay. Independent Assessor in the Office of the Commission on Public Appointments.

■ COUNCIL OF MANAGEMENT

Terry Bamford, O.B.E., M.A. (Oxon), Dip. Soc. Admin.
Director, Social Perspectives Network

Peter Barry, M.B.A. (City), FCCA, DipM, I.M.I.S.
Finance Director, Meiko UK Limited

Sir John Birch, K.C.V.O., C.M.G., M.A.
Vice Chairman, Council of University College London

Jeremy Booth, M.B., F.R.C.S., F.F.A.E.M.
Director of Accident and Emergency Medicine, Chelsea and Westminster Hospital

Dr June Crown, C.B.E, M.Sc (London), M.A., M.B., B.Chir. (Cambridge), F.R.C.P., F.F.P.H.M.
Past President, Faculty of Public Health Medicine, Royal College of Physicians

Dr David El Kabir, M.B.E., M.A., D.M. (Oxon), M.B., B.Chir. (Cantab), F.R.C.G.P.
Chairman and Principal of Wytham Hall Sick Bay

His Honour Judge Andrew Geddes

Sir Brian Jarman, O.B.E., M.A., Ph.D., M.B., B.S., F.R.C.P., F.R.C.G.P., F.F.P.H.M.
Emeritus Professor of General Practice, St Mary's Hospital Medical School

Dr Richard Lancaster, Ph.D, F.R.C.P.
Consultant Physician Emeritus, St Mary's Hospital

Chris Littmoden, C.B.E., C.-A.
Chairman, New Medical Ltd
Non-executive Director, Low & Bonar plc

M.F. Woods, M.A. Dip. Arch. (Cantab), A.R.I.B.A., F.R.S.A.
Formerly Chairman, Association of Consultant Architects
Chartered Architect

Dr Theodore Zeldin, C.B.E., F.B.A., F.R.S.L., F.R.HisC.S., M.A., D.Phil. (Oxon)
Fellow of St. Anthony's College, Oxford

Company Secretary: Dr Philip Reid, B.A. (Oxon), M.B., B.S. (Lond), M.R.C.P., M.R.C.G.P.,
D.R.C.O.G.
(Vice-Principal), Principal in General Practice

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Bankers: HSBC, 196 Oxford Street, London W1A 1EZ

■ MEMBERS OF WYTHAM HALL

■ RESIDENT MEMBERS

Robert Bolus, B.Comm.(Cape Town)
(Bursar), Practice Manager, Great Chapel
Street Medical Centre

David El Kabir, M.B.E., M.A., D.M. (Oxon),
M.B., B.Chir. (Cantab), F.R.C.G.P. (Principal)
Chairman and Principal of Wytham Hall
Sick-Bay

Philip Reid, B.A. (Oxon), M.B., B.S. (Lond),
M.R.C.P., M.R.C.G.P., D.R.C.O.G.
(Vice-Principal and Secretary), General
Practitioner

Dr. Petr Valasek, M.D., Ph.D (Prague)
Senior Research Fellow, Wellcome Trust,
Royal Veterinary College, London and
University of Reading; Locum Senior House
Officer at Accident and Emergency, King's
College, London



Dr. Petr Valasek

■ NON-RESIDENT MEMBERS

Julie Gaudion, PGCE Health & Social
Services Management
Registered Care Home Manager (until
September 2007)

Bridget McCarthy, Cert. Therapeutic
Counselling
Senior Project Worker

Rashpal Panesar, B.A. (Hons) International
Relations
Supported Housing Worker (until
September 2007)

Jonathan Tiffin
Project Worker

Katherine Vial-Montero,
PgDip Solution-Focused Brief Therapy
Administrator



Katherine Vial-Montero – Administrator

■ VISITING MEMBERS

Desiree El Kabir, M.A., M.B., B.Chir. (Cantab), M.D. (Lond), M.R.C.P.

Jeremy El Kabir, M.B.,B.S. (Lond), F.R.C.S. F.R.C.S.(Urol)
Head of the Department of Urological Surgery, Northwick Park Hospital;
Honorary Consultant Surgeon, St. Mark's Hospital;
Honorary Senior Lecturer in Surgery, Imperial College;
Medical Director, Assura Diagnostics

Philip Joseph, B.Sc., M.D. (Lond),
M.R.C.Psych.
Senior Lecturer & Honorary Consultant
in Forensic Psychiatry, St Mary's
Hospital, London; Honorary Senior
Lecturer in Forensic Psychiatry,
Institute of Psychiatry, London

George Osborne, F.C.C.A.
Accountant



Bridget McCarthy – Senior Project Worker



Jonathan Tiffin – Project Worker

■ CHAIRMAN'S REPORT

This last year has once again demonstrated the ability of Wytham Hall to redefine and recreate itself.

In face of our increasing difficulties in maintaining and financing as a registered care home, the Trustees decided to renounce this status and to admit people, directly or indirectly, as and when appropriate, without depending on contracts. The soundness of that decision has been amply demonstrated: we have managed to turn a deficit of over £50,000 into a modest loss of £7000. We have every prospect of making a comfortable profit next year. We have, for the past two months, been running at an occupancy rate of 100%. The conversion of the first floor is now complete, and we are ready to admit the new residents.

We will, I am afraid, still be financially vulnerable: in the absence of an endowment, we will not be in a position to undertake any major repairs or reconstruction. We will no doubt have, at some stage, to confront this situation when it arises, but nothing looms ominously in the immediate future.

There have been some notable additions to the Board of Management. Judge Andrew Geddes, will bring with him a formidable talent for sorting the chaff from the wheat, in areas where there has been much chaff and little wheat. Dr Richard Lancaster has taught Dr Reid and both my children at St Mary's. When I told my daughter that he was going to join us, she exclaimed: "He is my hero!" It is already obvious to us that she was not given to hyperbole.

Our staff have yet again demonstrated their commitment and good sense in accommodating to the changes. Thanks to them and to our members, the place generally feels freer and more relaxed. When I think that I am now well into my eighth decade, and ask myself when I



should fade gently into the background, I am reminded of how much, how very much, my friends and colleagues contribute to the well-being of the Hall, and how much, how very much of a pleasure it is to work with them, then the answer must surely be: "not yet, not just yet".

Dr. David El Kabir – Chairman

■ DOCTORS' REPORT

Wytham Hall was founded by doctors and medical students. In all some 20 medical students and doctors have resided here and helped with the medical and social care of our patients since 1984.

The presence of doctors who live on-site in a project like this is unusual and contributes to its special value as a place where people can receive a comprehensive assessment of physical and mental health combined with social care. As our own experience, statistics and case reports reveal, homeless people usually have a combination of problems, which are not easily addressed in a piecemeal fashion and certainly with great difficulty if they are homeless. (see Great Chapel Street Medical Centre Annual Report)

The three doctors currently involved with the care of the patients at Wytham Hall and its move-on houses live on site. Two are general practitioners (one retired) and the other is a medical researcher. We have our normal day jobs and provide the medical care at Wytham Hall on a voluntary basis.

The last year has been one of transition as we changed from running a residential care home to running supported housing. As their titles suggest care is a more intensive process that has involved frequent contact with our residents to assess their medical condition and adjust their treatment as necessary. For the first half of the year we did that as for the previous 24 years. The residents came from local hospitals, in particular St Mary's in Paddington and from social services, drug and alcohol teams and from Great Chapel Street Medical Centre. The conditions we came across amongst our last 19 residents were varied, as were their backgrounds. Many were from our



Dr. Philip Reid

traditional group of people with a history of rough sleeping but others were homeless for different reasons but nonetheless very vulnerable. Their conditions included drug and alcohol abuse and its consequences, mental health problems, physical problems including leg ulcers, heart failure, lung disease and cancer. We managed to find appropriate move-on for all residents by the end of October when we closed and two have remained with us in the supported housing.

Under the care home one of us would assess new patients on the evening of their first day and design a treatment plan, which was monitored and modified at the weekly meetings attended by all staff. Medication was prescribed and dispensed daily or weekly to the patients and supervised by the doctors, allowing prompt adjustments of treatment when needed.

For the second half of the year we have provided supported housing only. We have done this for many years at our three move-on properties and we carried out the conversion to the Wytham Hall premises to make individual rooms for 9 people. As doctors our role is less medical and more as providers of support to both the residents and the staff who run the service during the daytime. We still aim to admit people with a background of medical problems and to ensure that any ongoing problems are addressed through local services. Support thus involves ensuring registration with a GP, reminding residents about attendance at medical appointments, helping with medication and looking out for any deterioration in symptoms that might need medical review. We plan to work more closely with the Rough Sleepers Team at Westminster City Council to admit those people who have been more difficult to place

elsewhere and where our particular experience and background may help.

The student elective programme at Wytham Hall, initiated and sponsored by the Conanima Foundation for an initial 5-year period, began in 1989. Since 2000, rather than taking students from abroad we have medical students on Special Study Modules from Imperial College and Oxford. UCLH students also attend for a day early in their course. The attachment here gives a fascinating opportunity to meet a range of homeless people in different environments and to witness and understand their lives in depth. It also shows how a difference can be made to the damaged lives of this group of people. Students also attend the Great Chapel Street and the Notting Hill surgery and can see the contrasting problems of the different populations and the fundamental similarities in the approach to care. Students' reports make interesting reading.



■ SUPPORTED HOUSING REPORT

Lanhill Road (established with a grant from Glaxo Wellcome in 1994) and Charfield Court (established 1996 and 1997 with a grant from the National Lottery Charities Board and a substantial donation from Henry Smith Charity) are supported housing units close to Wytham Hall. They were established to allow formerly homeless people to continue the relationships they had developed with the staff and other residents while rehabilitating in Wytham Hall sick bay, and encourage a supportive community spirit. These properties offer sixteen individual rooms, which are available to people who are ready and able to live a more independent lifestyle. The house and flats are dry environments, which offer a safe place for people who are committed to not drinking or using illegal drugs. Residents have the support of a team of workers including a Manager, a Supported Housing Worker, a Senior Project Worker and a part time Administrator.

In the past a number of residents were referred to the supported housing units from the registered care home at Wytham Hall. Residents who had been referred by other agencies would have a two week stay at the Wytham Hall sick bay for an assessment period before moving into the Supported Housing at Lanhill and Charfield. This would give the staff team the opportunity to build a rapport with the resident and identify any specific needs.

In November 2007 Wytham Hall was deregistered as a care home and has been functioning as supported housing units itself, which has required a change in the admissions procedure for all the Supported

Housing properties. People are now considered for places following assessment with a supported housing worker and on a case by case basis. As of November 2007 five individual supported housing units were available within Wytham Hall, with another four rooms under construction for use from mid 2008.

Residents have the opportunity to express their views and opinions about issues arising in their own homes at weekly house meetings, which they often do with enthusiasm. Additionally, in 2007 quarterly forum meetings were introduced as a way of bringing together all of the staff and residents from each of the different supported housing units. These meetings were introduced to offer supported housing residents an opportunity to contribute their ideas about how the staff at Wytham Hall might improve their service in the future. On these occasions residents meet each other in a relaxed setting; food is provided (either in the form of sandwiches and nibbles or a Barbeque held at one of the properties). Individual support plans are developed with each resident giving them the opportunity to look over the progress of the last month and to make plans for the next month and discuss any issues with their support worker. Residents from the supported housing units are encouraged to drop in to Wytham Hall at any time they wish to speak to a staff member.

Cleaning of communal areas in the supported housing is co-ordinated by the residents themselves and weekly inspections are made by the supported housing worker. These inspections ensure



Bridget with Thomas

that the house/flats are kept clean and tidy, and that there are no health and safety issues. Residents are responsible for cleaning their own rooms and communal areas and also for reporting any maintenance issues to staff at Wytham Hall. The majority of residents living in the supported housing units are in receipt of Housing Benefit and other types of benefits. Staff at Wytham Hall devote a considerable amount of time chasing up claims and ensuring that residents are getting their full entitlements. Each resident pays a small rent contribution with the utility bills and council tax being paid by Wytham Hall.

Staff recognise that it is imperative to develop strong working relationships with other services and organisations involved in the welfare of supported housing residents. Staff are in regular contact with Social

Workers, Community Psychiatric Nurses, Drug and Alcohol Workers, Day Centre Teams, and Outreach Workers. To enable continuity of medical care, all supported housing residents are given the option of registering with Dr. Reid at either Notting Hill Gate or Great Chapel Street Surgery.

Lanhill Road

Lanhill Road is a large house five minutes walk from Wytham Hall, providing accommodation for eight residents in single bedrooms. Residents share a spacious kitchen, a living room, three bathrooms, two shower rooms with toilets, a laundry room and a thriving, colourful garden. Lanhill Road offers temporary supported housing for homeless people where residents usually stay for a period of between six months and

two years. Lanhill Road gives residents the opportunity to gain confidence in independent living with the support of Wytham Hall staff. Residents spend their time participating in a number of activities such as training in plumbing, catering and computing, visiting places of interest, working on the garden and spending time with family. The residents currently living at Lanhill Road take great pride in their home and actively participate in ensuring that it remains a clean and safe living environment. This year the residents enjoyed giving the house a good spring clean.

Charfield Court

Charfield Court comprises of two flats, each with four individual bedrooms, a shared kitchen, lounge, balcony, bathroom and further cloakroom. They are located in a quiet area around the corner from Wytham Hall. Both flats function as permanent homes, and are often used as a move-on accommodation from Lanhill Road. Residents view their homes at Charfield Court as 'homes for life,' and take pride in keeping them clean and tidy. Residents here spend their time visiting places of interest, keeping fit, spending time with family, and one resident is currently working. The residents living at Charfield Court have a very strong and trusting relationship with Wytham Hall.

Wytham Hall

The Supported Housing at Wytham Hall comprises nine separate units; five of which were up and running as of November 2007 and another four units which were

completed in mid 2008. The Supported Housing at Wytham Hall is designed to accommodate people with medium to low support needs, and the five basement rooms benefit from a communal kitchen. The four flats located on the first floor of the property are newly refurbished and have a communal kitchen which is also newly fitted. Some of these rooms are lucky enough to overlook the large and tranquil gardens belonging to the property. Many of the residents at Wytham hall have returned to work since admission, and others are attending college courses.

In the short time Wytham Hall supported housing has been up and running it has proved a great success for staff and residents alike, with rooms having been filled quickly and residents thriving in their new accommodation.

Supporting People

Wytham Hall is continuing to self-assess working practice in six core areas, and has maintained its level 'B' status with Supporting People. Wytham Hall has a good working relationship with Supporting People, meeting at least quarterly, maintaining contact through email and telephone, and working together towards continuous improvement of service. Wytham Hall staff members attend Supporting People Providers' forums which facilitate information sharing between providers within Westminster.

■ CASE REPORTS

CASE STUDY A

This young gentleman in his mid twenties came to the UK after persecution in his own country, where he had been violently separated from the rest of his family. Initially he was placed in the Midlands but fled to London following racial harassment from local people. Since being moved into the new accommodation in our supported housing this quiet character has been attending college regularly to improve his English, and once his language skills are perfected he hopes to get a job in catering. In addition to encouraging the development of his language skills Wytham Hall staff are equipping him with other skills to live in the UK and a better understanding of the culture here.

CASE STUDY B

In his fifties this Italian man had had a varied career both in the Navy and as a chef. With a history of mental health problems, alcohol addiction and no entitlement to benefits he found himself homeless. He was admitted

to the original sick bay at Wytham Hall where he was assessed and linked in with local mental health services. After a successful spell in the sick bay he was moved on to permanent accommodation in the Wytham Hall supported housing. He remains free of alcohol and is now looking for work.

CASE STUDY C

After being kicked out of home by his father this young man ended up sleeping rough and having some difficulties with the police. When he came to Wytham Hall he had strong connections with his peer group from the streets and was easily led back to old haunts and temptations. However, these teething problems have been overcome with a fairly intensive level of support from Wytham Hall staff and he is now letting go of old attachments and settling well into a more stable environment. He is planning to participate in a well known choral project with other members of the ex-homeless community.

CASE STUDY D

This middle aged lady came to the sick bay





at Wytham Hall after the treatment she was receiving for cancer led to serious complications with her heart. Prior to her illness she had been sleeping at houses of friends and doing domestic work. Due to her immigration status she was not entitled to any benefits or official hospital treatment, and so she was initially admitted to Wytham Hall without funding. During her five month stay she was regularly in and out of the local hospital and when it became clear that her situation was not going to improve she was moved into a palliative care home. A staff member at Wytham Hall took the initiative to liaise with the IOM (International Organisation of Migration) and a solicitor in order to get funding for this lady to return home to be with her three children when she died. It was later discovered that she died on the plane going home.

CASE STUDY E

This gentleman was moved straight into long term supported housing with a view to his completing a structured methadone reduction programme. Prior to being homeless he was in the armed forces but became addicted to heroin and street homeless when his post ended. In the four months since he moved to Wytham Hall he has decreased his dose of methadone

dramatically. Simultaneously, he continues to attend a local community centre participating in a business course and other social activities run by the centre. He still suffers the punishing effects of drug withdrawal on a daily basis, but successfully manages this using the additional support offered by the staff at Wytham Hall and other specialist services.

CASE STUDY F

One of the older residents of the Wytham Hall sick bay, this man in his seventies came to Wytham Hall from hospital after being found collapsed in someone's garden. He had a long history of alcohol dependence as well as chronic leg ulcers. His stay at Wytham Hall was long and fruitful. During the years that he stayed in the sick bay he remained abstinent from alcohol, his legs healed, and he developed good relationships with staff and other residents. For staff he became a familiar and friendly face in his daily comings and goings from the building. When the sick bay closed down he moved into sheltered accommodation.

■ RESIDENT'S ACCOUNT

I am 37 years old and came to Wytham Hall in November 2007.

After leaving college in 1989 I joined the Royal Air Force and spent 10 years as a communications specialist at RAF, which involved me primarily in overseas operations and included several deployments on active service during the gulf war and on peacekeeping duties in Bosnia.

After completing my service in the armed forces I was lucky enough to get involved within the television and media industry that I am thankfully now involved with again today.

In 2000 I emigrated to Australia with my wife to be, but during the first few years there we experienced difficulties in our relationship, and due to my visa status I found myself having to return to the UK alone in 2004. The emotional strain I was trying to deal with at the time caused me to start drinking heavily which in turn affected my ability and performance at work and I was unable to hold down secure employment for any length of time. Due to a lack of money I found myself bouncing between short stay hostel accommodation and low paid part-time jobs. I eventually ended up on the streets of London, homeless in October 2007.

I was referred to Wytham Hall by a Veterans agency offering support to ex-services individuals. This opportunity gave me the chance to address a lot of the issues I had carried around with me for the last three years. With a support program put in place by Wytham Hall staff, which linked me in to relevant services including the Alcohol Resource Centre to deal with my drinking issues, I gained the stability and support I

needed to start looking for active employment back in the Media industry.

Within four months I felt confident enough to start applying for jobs again, which saw me attend six interviews. I was offered three positions as a result of which as you can imagine was a fantastic boost for my confidence and self-esteem.

I started full time employment with Discovery Channel in April of this year!

I am still happily a resident at Wytham Hall, and I am not only thankful to all the staff and doctors for the initial support and advice in what was a big step back into society and an industry I love so much. But the support I am still getting today to manage the day to day re-building of a normal life. The next step in the process will be private accommodation which we will look at after completion of my probationary period at the Discovery Channel. One step at a time is the key to getting my life fully back on track and I know I can do it with the help of everyone here.

I have been abstinent from alcohol now for 10 months which I am rightly proud of, and proves anything is possible with determination and a little help from your friends!!

■ EVENTS OF 2007 - 2008

FUNDRAISING

A total of £14,231.00 has been received from personal and other donations.

MAINTENANCE

The sick bay rooms in the basement of Wytham Hall have been converted into single rooms and facilities, including additional fridges and cookers, have been added to improve the existing kitchen. Work on the four rooms on the first floor began in early 2008 and all the rooms are undergoing full refurbishment. A new kitchen is to be fitted on the first floor. General ad hoc redecoration and replacement of furniture and fittings has been undertaken in the Supported Housing units at Lanhill Road and Charfield Court.

COMPUTERS

The Wytham Hall computer system continues to run smoothly using a remote server Go-books which avoids the need for maintenance of our own server.

EXTERNAL RELATIONS

Wytham Hall's collaboration with the Supporting People Team continues to be a success. Students from Oxford University and Imperial College London have continued to visit Wytham Hall for short stays as part of their medical degrees and the feedback has been positive.

STAFFING

Staffing arrangements during this year have included an off-site Manager, Senior Project Worker, and Project Worker as Front Line staff. In addition Wytham Hall employs a part-time cleaner and a part-time Administrator.

SUPPORTED HOUSING SUPPORTING PEOPLE

The Supported Housing at Lanhill Road and Charfield Court continues to be funded by Supporting People, who have awarded a 'B' score overall for the services offered. The Supported Housing at Wytham Hall is currently funded through housing benefit payments.



■ PATIENTS' SERVICES REPORT

In November 2007 Wytham Hall underwent a change in status which required the staff team to change from one providing a service to people rehabilitating in the sick bay, to a Supported Housing team helping people maintain accommodation and consolidate their living skills in a dry environment, free from drug and alcohol use. This transition has been managed by Robert Bolus, whose team now consists of both a Senior Supported Housing Worker and a Project Worker.

Both of the workers are responsible for ensuring that support plans and risk assessments for the supported housing residents are carried out in accordance with the Supporting People guidelines. The Supported Housing Worker is there to offer practical and emotional support to residents living in the three move-on properties and in the supported housing units at Wytham Hall itself. The Supported Housing Worker also maintains all the necessary health and safety checks in the housing units.

In addition, there is a part-time administrator and a cleaner who help with the smooth running of Wytham Hall. The General Practitioner who lives on-site offers residents medical care via their daily surgeries at the Great Chapel Street Medical Centre and Pembridge Villas Surgery.

Support Provided by Wytham Hall

On admission to the accommodation at Wytham Hall, Lanhill Road or Charfield Court each resident is allocated a specific worker who acts as a point of contact for that person throughout their residency in the

supported housing. The resident and worker together draw up a Support Plan which includes the input of all the services involved in the resident's care. This plan is reviewed regularly with the client. Residents are assessed individually so that their needs can be addressed independently and connections with appropriate external services can be made. Arrangements are made as appropriate for counselling, physiotherapy, dental treatment, chiropody, and the optician. Substance dependent clients are linked up to local Drug and Alcohol agencies and also attend Alcohol Anonymous and Narcotics Anonymous meetings in the area. Wytham Hall staff members receive relevant training enabling them to provide a high standard of care and support to the residents.

Many residents currently attend college, volunteer or are in paid employment as a result of their housing and the support they receive from staff here.

Length of Stay

The supported housing at Wytham Hall currently offers residents a long term and stable housing solution. The accommodation at Lanhill Road is generally viewed as shorter term than Charfield Court, with residents staying at Lanhill Road for an average of 2 years before moving into permanent accommodation. This might include the option to move into Charfield Court, which residents view as a 'home for life' and are able to live in for as long as they wish.

Referrals & Admissions

In the six months prior to the deregistration of the Wytham Hall sick bay 18 patients were admitted who stayed for an average time of seven weeks.

These patients were admitted from St Mary's Hospital, St Thomas Hospital, St Charles Hospital, SSAFA, Westminster Social Services, the Corporation of London and Westminster Substance Misuse Team.

These residents were discharged to Wytham Hall Supported Housing, residential rehabilitation centres, housing association and other agency supported accommodation, independent accommodation and in a few cases, referrals were made to the Homeless Persons Unit for bed and breakfast accommodation to be provided.

Public Relations

Oxford and Imperial Medical students continue to carry out their electives at Wytham Hall and write interesting and enthusiastic reports about their time spent with us and at Great Chapel Street Surgery where they spend days gaining experience with the team of GPs: Dr Reid, Dr Ramsden and Dr Sharma; the psychiatrist, the legal advisor, the clinical nurse specialist, and other staff who work there. Homelessness and Health modules including Drugs and Alcohol, Circulation and Breathing, and Working with Vulnerable Individuals are still attended by University College Hospital 2nd year students and the final year students attend modules about Alcohol and Drugs Misuse following their time spent at Great Chapel Street Surgery.

Visitors to Wytham Hall to discuss joint working included Shelley McLennan (Substance Misuse Floating Support Worker, Cardinal Hume Centre); Adrian Brown

(Alcohol Worker, St Mary's Hospital); Brendan Eldridge (EF Group); Greg Roberts (Supporting People); Richard Cunningham (Street Population Services Co-ordinator, Lambeth Council); Paul Lawford & Katherine Tentumi (Housing Options); Diane Goodkind (Lead Counsellor, Westminster PCT); Sissi Mylona (Specialist Placement Manager, Kensington & Chelsea PCT).

Future Plans

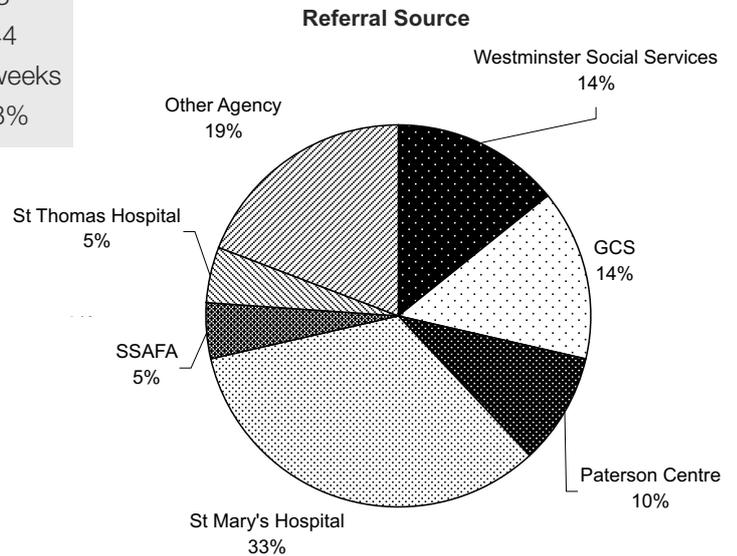
Staff and residents have adapted to the changes in the structure of Wytham Hall with ease and good humour. There is both unity and optimism about the direction of the company as new rooms are filled as soon as they become available, and new residents flourish in their homes. Many current residents of Wytham Hall have taken great steps forward in their lives since moving into the Supported Housing; for example by finding employment or renewing their contact with family for the first time since becoming homeless.

Future plans as ever remain at the forefront of discussions between the Trustees and staff at Wytham Hall with aims for the company being clarified and focused on an ongoing basis.

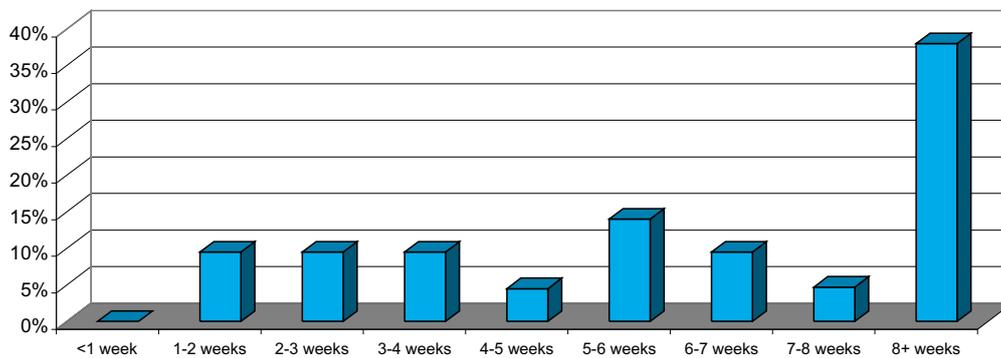
■ STATISTICS ON ADMISSIONS TO WYTHAM HALL

April 1st 2007 – October 31st 2007

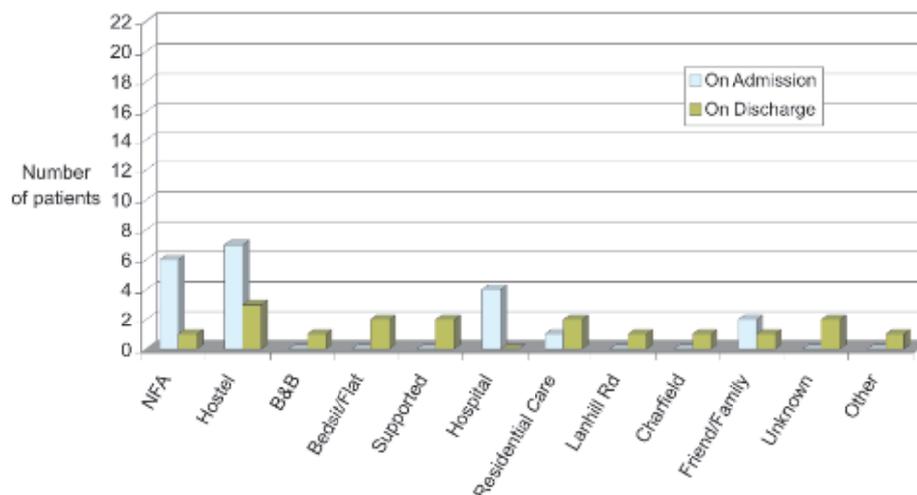
	This year	Last year
Total number of residents:	21	40
Total number of admissions:	18	38
of admissions were male	14	35
were female	4	3
Average age:	46	44
Average length of stay:	7 weeks	5.9 weeks
Figure of overall occupancy:	40%	38%



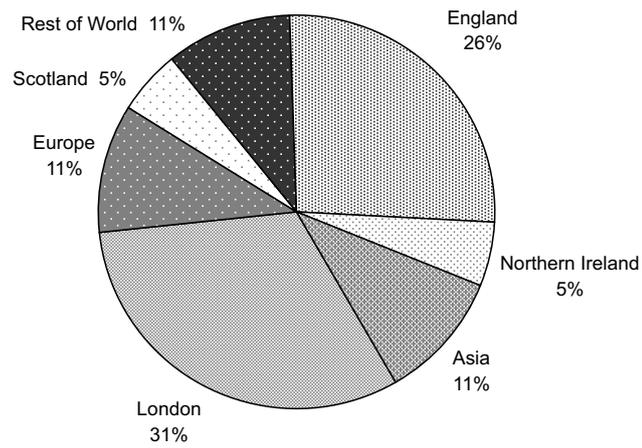
Length of stay



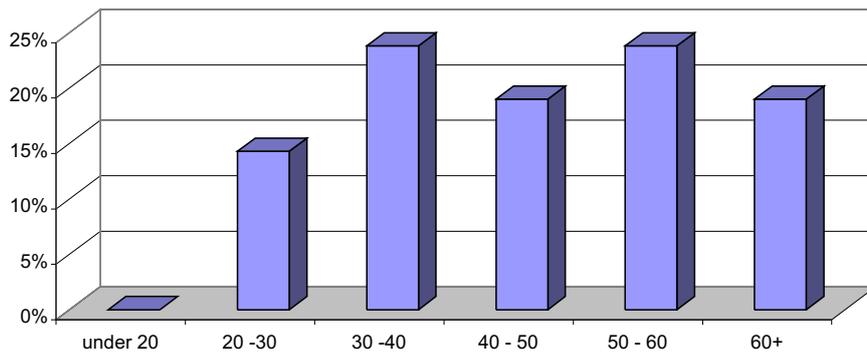
Accommodation on Admission / Discharge



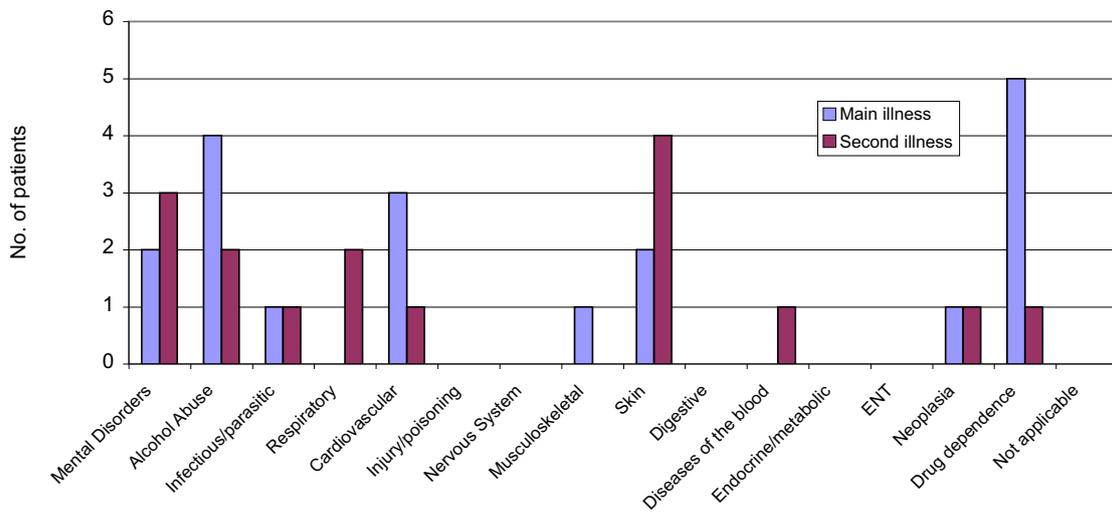
Place of Birth



Age



Illnesses of Patients



CASH FLOW STATEMENT YEAR ENDED 31st MARCH 2008

	<u>2008</u>		<u>2007</u>	
	£	£	£	£
Net Cash (outflow)/inflow from operating activities		(25,782)		(38,122)
Returns on investments and servicing of finance				
Interest received	9,205		7,796	
Interest paid	-		-	
	_____		_____	
Net cash inflow from returns on investments and servicing of finance		9,205		7,796
Investing activities				
Payments to acquire tangible fixed assets	(3,517)		(2,949)	
	_____		_____	
Net cash inflow/(outflow) from investing activities		(3,517)		(2,949)
Net cash (outflow) /inflow before financing		(20,094)		(33,275)
Financing				
Donations received	14,231		6,597	
	_____		_____	
Net cash inflow from financing		14,231		6,597
Increase/(Decrease) in cash and cash equivalents		(5,863)		(26,678)
		-----		-----

Full accounts are available on request

INCOME AND EXPENDITURE ACCOUNT YEAR ENDED 31st MARCH 2008

	<u>2008</u>		<u>2007</u>	
	£	£	£	£
Income		247,881		265,397
Direct and administrative expenses		295,450		329,771
		-----		-----
Operating (loss)/surplus		(47,569)		(64,374)
Interest receivable	9,205		7,796	
Interest payable	-		-	
	-----		-----	
		9,205		7,796
		-----		-----
(Deficit)/surplus of income over expenditure for the year		(38,364)		(56,578)
Donations	14,231			6,597
Capital donations	-		-	
Transferred to reserves	-----		-----	
		14,231		6,597
		-----		-----
Surplus/(Deficit) for the financial year		(24,133)		(49,981)
		-----		-----

■ VISITORS TO WYTHAM HALL APRIL 2007-MARCH 2008

Sissi Mylona, Specialist Placement Manager, Kensington & Chelsea PCT

Carina Sheridan, Westminster Discharge & Placement Manager, Kensington & Chelsea PCT

Michelle Draper, Service Manager, Kensington & Chelsea PCT

Richard Gittings, Houses in Multiple Occupation, Westminster Council

Greg Roberts, Supporting People & Homeless Strategy Manager, Supporting People

Patrick Walsh, Supporting People & Homeless Strategy Manager, Supporting People

Jennifer Samuels, Supporting People & Homeless Strategy Manager, Supporting People

Michael Ferguson, Housing Assessment Worker, Passage Day Centre

Dr and Mrs Richard Lancaster, Consultant Physician

■ PUBLICATIONS ON HOMELESSNESS

Great Chapel Street Medical Centre
El Kabir D J.
British Medical Journal, 1982; 284:480-1.

Tuberculosis among the central London
single homeless
Ramsden S S, Baur S, El Kabir D J.
Journal of the Royal College of Physicians
of London, 1988; 22:16-17.

Medical care of the homeless
Ramsden S S.
Royal College of General Practitioners
Members' Reference Book, 1989; 362-4.

A mobile surgery for single homeless
people in London
Ramsden S S, Nyiri P, Bridgewater J, El
Kabir D J.
British Medical Journal, 1989; 298:372-4.

St. Peter's and the Homeless
El Kabir D J.
St. Peter's College Record, 1990.

Mentally disordered homeless offenders -
diversion from custody
Joseph P L A, Potter M.
Health Trends, 1990; 22:51-5.

A psychiatric clinic for the single homeless
in a primary care setting in Inner London
Joseph P L A, Bridgewater J, Ramsden S
S, El Kabir D J.
Psychiatric Bulletin, 1990; 14:270-1.

Approaches to medical care of homeless
people in central London
Ramsden S S.
In: Smith S J, Knill-Jones R and McGuckin
A, Eds. 'Housing for Health', 1991.
UK: Longman Group.

Electives at a sick bay for the homeless
El Kabir D J.
Community Based Teaching, Sharing Ideas
1, King's Fund Centre, 1992

Homelessness, Doctors, le Grand Siecle
and St. Catharine's
El Kabir D J.
St. Catharine's College Society Magazine,
1992.

Book Review 'Homelessness: A national
perspective' Ed. Robertson M J., Joseph P.
British Medical Journal, 1992; 305:658.

Diversion revisited
Joseph P.
Journal of Forensic Psychiatry, 1992; 3:219.

Non-custodial treatment: can psychopaths be treated in the community?
Joseph P.
Criminal Behaviour and Mental Health, 1992; 2:192-200.

Diversion from Custody. I: Psychiatric Assessment at the Magistrates' Court
Joseph P, Potter M.
British Journal of Psychiatry, 1993;162:325-330.

Diversion from Custody. II: Effect on Hospital and and Prison Resources
Joseph P, Potter M.
British Journal of Psychiatry, 1993;162:330-334.

Psychiatric assessment at the Magistrate's Court
Joseph P.
Report commissioned by the Home Office, 1992.
London: Home Office and the Department of Health.
British Journal of Psychiatry, 1994; 164: 722-4

Psychiatric court clinics in the United States
Joseph P.
Psychiatric Bulletin, 1992; 16:557-560.

The perception of emotion by schizophrenic patients
Joseph P, Sturgeon D, Leff J.
British Journal of Psychiatry, 1992; 161:603-609.

Psychiatric morbidity and substance abuse among residents of a cold weather shelter
Reed A, Ramsden S, Marshall J, Ball J, O'Brien J, Flynn A, Elton N, El Kabir D, Joseph P.
British Medical Journal, 1992; 304:1028-9.

Quelques observations sur les sans-abris
El Kabir D J
Paris, Les Temps Modernes, 1993: 567
A pragmatic approach to the health care

of the single homeless: its implications in terms of human resources
El Kabir D J, Ramsden S S.
Dimensions of Community Mental Health Care, ed Weller M, and Muijen M,
London: W B Saunders: 1993

A psychiatric bail bed in a residential sick bay: a one year pilot study
Joseph P. and Ford J.
The Journal of Forensic Psychiatry, 1995; 6:209-217

On creating a culture of care for the homeless
El Kabir D
Journal of Interprofessional Care, 1996; 3: 267-272

Primary care of the single homeless
Homelessness and Mental Health
Ed. Bhugra, Cambridge University Press.1996
Dr D El Kabir & Dr S Ramsden

■ MEMBERS' OTHER PUBLICATIONS

Lymph heart in chick - somitic origin, development and embryonic oedema.
Development. 2007 Dec;134(24):4427-36.
Valasek P, Macharia R, Neuhuber WL, Wilting J, Becker DL, Patel K.

Skeletal muscle translocation in vertebrates.
Anat Embryol (Berl). 2006 Dec;211 Suppl 1:43-50. Review.
Valasek P, Evans DJ, Schmidt C, Patel K.

A dual fate of the hindlimb muscle mass: cloacal/perineal musculature develops from leg muscle cells.
Development. 2005 Feb;132(3):447-58.
Valasek P, Evans DJ, Maina F, Grim M, Patel K.

Copies of all papers and articles are available on request.



MAKING A REFERRAL

Contact: Project Workers to make an initial referral
Tel: 020-7289 1978

Support Provided:

Medium to long-term housing under Supporting People scheme or through housing benefit.

No alcohol or drugs permitted

How to find us

