

WYTHAM HALL

Annual Report 2003 - 2004



Breaking the cycle of street homelessness

*La vie de la plupart des hommes est un chemin mort
et ne mène à rien. Mais d'autres savent dès l'enfance
qu'ils vont vers une mer inconnue.*

*(The life of most people is a dead end which leads
nowhere. But some know since childhood that
they are going towards an unknown sea.)*

François Mauriac

Les chemins de la mer.

WYTHAM HALL ANNUAL REPORT

1st April 2003 – 31st March 2004

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Wytham Hall
117 Sutherland Avenue
Maida Vale
London W9 2QJ

(Registered Office at this address)
Company Registration No: 1777775
Charities No: 289328

Tel: 020 7289 1978
Fax: 020 7266 1518

e-mail: enquiries@wythamhall.co.uk
website: www.wythamhall.co.uk

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Wytham Hall is a Charitable Company Limited by Guarantee.

■ 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 <http://business.virgin.net/gcs.medical/index.htm>), 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.

The recovery unit has fourteen beds and is run by a team of care-workers and doctors. During a patient's stay, medical problems are addressed in parallel with social and housing needs. A period of illness may give 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.

(Great Chapel Street Annual Report available on request).



■ 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 2003-2004

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Mrs J Jupp, Miss A Kapisovska, Mr G Lyon,
Mr A I MacMillan, Mr D Samyn, Mrs C B
Tubb, Mrs S Willson

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

Alcohol Recovery Project; Alcohol Resource Centre; Alcoholics Anonymous; ASSERT Advocacy Service; Atlas Boilers; The Benefits Agency; Brent Social Services; Broadway; Browns Chemist 195 Shirland Road; Camden & Islington Health Authority; Camden Substance Misuse Team; CARA; Carr-Gomm; Central CAT Team; Central North West London CMHT; Circle 33; The Core Trust; Dental Surgery 392 Edgware Road; District Nursing Service, Woodfield Road; Ealing Social Services; Eurogard; Gordon Hospital and Paterson Centre for Mental Health; 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; Kairos; Kensington & Chelsea Primary Care Trust; Lancaster Day Centre; Leonard Cheshire Foundation; Lisson

Grove Health Centre; MAC Electrical Services; The Metropolitan Police; Narcotics Anonymous; National Care Standards Commission; Paddington Churches Housing Association; Paddington Drug Treatment Centre; The Passage Day Centre; Portugal Prints; Ronald Brown Optician 393 Harrow Road; St Charles Hospital; St George's Hospital; St Margaret's Drop-In Centre; St Mary's Hospital; St Mungo's Outreach; Salvation Army; Soho Centre; Spectrum Centre; Start Team; 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

■ COUNCIL OF MANAGEMENT

Bernard Adams, M.Sc., M.B., F.R.C.P., F.R.C.Psych., D.P.M.
Honorary Consultant Psychiatrist and Honorary Senior Lecturer, University College Hospital

Terry Bamford, O.B.E., M.A. (Oxon), Dip. Soc. Admin.
Chairman, Kensington & Chelsea Primary Care Trust
Research Fellow, Social Services Research and Development Unit, Oxford Brookes University

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Finance Director, Meiko UK Limited

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Director, British Association for Central and Eastern Europe

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

Geoffrey Dart, C.B.E., F.C.A., C.I.Mgt., F.R.S.A. (until June 2003)
Group Chief Executive of the Oxford Group

David El Kabir, M.B.E., M.A., D.M. (Oxon), M.B., B.Chir. (Cantab), F.R.C.G.P.
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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.
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Fellow of St. Anthony's College, Oxford

Company Secretary: 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

Solicitors: Dibb Lupton Alsop, Shelley House, Noble Street, London EC2
Auditors: PKF, New Garden House, 78 Hatton Garden, London EC1N 8JA
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

Petr Valasek, M.D. (Prague)
Wellcome Trust Fellow, Department of Veterinary Basic Sciences, The Royal Veterinary
College London, and Institute of Anatomy, First Medical Faculty, Charles University, Prague

■ NON-RESIDENT MEMBERS

Hannah Blunden, B.Sc. (Hons) Tourism, Management & Social Science
Supported Housing Worker

Julie Gaudion, PGCE Health & Social Services Management
Registered Care Home Manager

Gougsa Gebru, B.A.(Hons) Education (Ethiopia)
Support Worker (until August 2003)

Sau Yee Lee, B.Sc. (Hons) Computing
Administrator / Systems Manager

Bridget McCarthy
Project Worker

Catherine Parsai, State Diploma of Social
Worker (France)
Senior Project Worker (until March 2004)

Myrna Ricona
Cleaner

Alfred Roibal, B.A.(Hons) Social Sciences
Weekend Project Worker

Wendy Sutton, B.A.(Hons) Social Policy and
Administration
Weekend Project Worker



Bridget McCarthy, Project Worker

■ VISITING MEMBERS

Desiree El Kabir, M.A., M.B., B.Chir. (Cantab), M.R.C.P.
Locum Consultant Physician, St Thomas' Hospital

Jeremy El Kabir, M.B.,B.S. (Lond), F.R.C.S. F.R.C.S.(Urol)
Consultant Urological Surgeon, Northwick Park Hospital; Honorary Consultant Surgeon, St. Mark's Hospital

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



Myrna Ricona



Wytham Hall staff

■ CHAIRMAN'S REPORT

There are few changes to report in the past year. The staff, members and trustees remain as they were. The area of activity has been in what matters most – the care of our patients, and the attempts to secure funding for them. The case reports give the reader a taste of the work we do, and the magnitude of the daily tasks faced, with fortitude and grace, by our staff, members and trustees. There is a labour of love, of competence and of humanity. I am deeply grateful to be accorded the privilege of such a rewarding old age. The success of Wytham Hall is built on the daily stresses of dealing with difficult situations of one sort or another, and trying to get our work properly funded.

From the point of view of our financial viability, we are, after twenty years of service to the most deprived people in society, pretty much where we have always been – we need the equivalent of the annual salary of a middle range manager to assure our future. It is, I think, a fairly modest goal. We have, as yet, been unable to achieve this degree of stability, despite the Herculean efforts of our members and staff. Although our achievements and the very substantial benefits and savings to the community provided by our services are generally recognised, this does not seem to be enough to overcome the difficulties authorities face in paying for some of our services. I will, for the record, and as an affirmation of what we are and do, recapitulate some of those:

We have admitted over 2000 patients to the sick bay. Of these, 145 have been accommodated in our supported housing.

We operated a mobile surgery for the homeless for 3 years. There is now, thanks to the better understanding of the problems no longer a need for such a service.

We have undertaken various research projects on homelessness, and published papers on tuberculosis, epilepsy, the mobile surgery and mental disorders amongst the homeless.

We have undertaken an extensive educational programme, both here and abroad. Some 130 students have attended from America, Israel,

Czech Republic, UK and Hungary.

We have tried to stimulate other projects to consider the benefits of our approach, both in this country and abroad, most particularly in Prague, Budapest, Paris and Bordeaux.

With the help of financial assistance from Glaxo plc, the National Lottery and the Tudor Trust, we have set up 3 community houses for our patients. These have proved a great success in helping them to regain a dignified approach to life.

Great Chapel Street Medical Centre was awarded Beacon Practice status by the Department of Health and publicised its activities for three years on the scheme.

(See 'Landmarks' – centre pages)

Notwithstanding all this, our future remains insecure. Perhaps we are fated to live in uncertainty. Perhaps we even thrive on it. This may not quite be in keeping with the spirit of the times, but we have no complaints about our destiny, which we face with equanimity. And what could be more consoling to us than to stumble on the quotation from François Mauriac that serves as a prologue to this year's report.

Whatever the harvest, we will have tried to do our bit of proper sowing. "The rest is not our business", said the poet.



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.

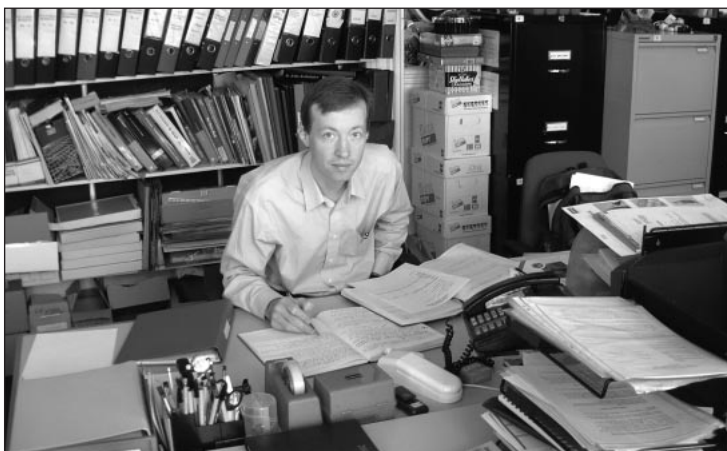
The presence of doctors who live on-site in a project like this is unusual and contributes to its special value as a place where people can receive a comprehensive assessment of physical and mental health combined with social care. As our own experience, statistics and case reports reveal, homeless people 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 junior hospital doctor. We have our normal day jobs and provide the medical care at Wytham Hall on a voluntary basis. One of us will assess new patients on the evening of their first day and design a treatment plan. This is then monitored and modified at the weekly meetings attended by all staff. Medication is prescribed and dispensed daily or weekly to the patients and supervised by the doctors, allowing prompt adjustments of treatment when needed. The general practitioners have many years experience of working with homeless people both at Wytham Hall and at Great Chapel Street Medical Centre. We know the local medical services well and in particular use St. Mary's Hospital, Paddington, and the Paterson Centre for Mental Health for opinions or investigations. In turn they refer us patients for further care and rehabilitation.

Amongst the physical illnesses that we see, the consequences of alcohol and drug abuse are

now the most significant and common. Often patients have several chronic conditions and many have a mental disorder of a severe and enduring nature. All these conditions result in long-term illness and require a good relationship between carer and patient if any progress is to be made (see case histories and resident reports). The desire to understand our patients and respond to each one appropriately is one of the fascinations of the work and one of the main reasons for our involvement in the project.

The student elective programme at Wytham Hall, initiated and sponsored by the Conanima Foundation for an initial 5-year period, began in 1989. Over 110 students have each spent a month living at Wytham Hall. They have come mainly from Charles University in Prague and



Dr. Philip Reid

Semmelweis University in Budapest but have also come from Harvard, New York and Yale Universities and Middlebury College in America. More recently we have developed Special Study Modules for students from Oxford University and Imperial College. The attachment at Wytham Hall is an option as part of their medical course and about 15 students have attended for 2-3 week periods. Students of University College London also visit for a day early in their medical 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.

■ CASE REPORTS

Mr. A

This 60 year old man was admitted from Great Chapel St. He had sustained a relatively minor injury to his knee 2 weeks previously when he tripped over a paving stone but because he was NFA and was walking around all day he had no opportunity to rest. He presented with very swollen legs and blistered feet and was in considerable pain and walking with difficulty. He came directly into Wytham Hall from the doctor's surgery and spent 2 weeks here recuperating and healing. He was initially cagey about his history but it became apparent quite quickly that his homelessness and wandering lifestyle stretched back over 20 years and that for a number of years he had been suffering from paranoid delusions. This appears to be his first contact with homelessness services and he has no known history of involvement with mental health services. He is now in one of our supported houses and settling well. His delusions continue to be in evidence but are not bothering him at present and he is clearly relieved to be in a secure environment and no longer having to cope with the vagaries of life on the streets.

Mrs. B

This 55 yr old woman has severe osteoporosis and end stage renal failure. She was admitted to Wytham Hall from the street and subsequently hospitalised with frostbite and leg ulcers. She had been at Wytham Hall previously in 2002 and was discharged to hostel accommodation but only stayed for a month before returning to the streets. She has been NFA since but still managing to attend 3 times weekly for dialysis at Middlesex hospital. She is known to the JHT – mental health outreach – but has always been very reluctant to come off the streets and has only done so at this point because of the very severe deterioration in her health. She is a well educated and very intelligent woman who was married and has children, although she is not in touch with them. She is settled at Wytham Hall and recuperating well although the prognosis for her long term is poor and she is likely to need continued high care in the future. We are liaising closely with her social worker to identify accommodation that will meet her needs for care and where she can maintain her independence.



Mr. C

This 63-year-old gentleman was admitted to Wytham Hall following a long stay in the Gordon Hospital. This had been his first admission to the hospital and prior to that there was no clear record of a psychiatric history. This gentleman had functioned very well for several years.

He was diagnosed with paranoid schizophrenia and subsequently received medication for his condition.

On his arrival at Wytham Hall he found it very difficult to come to terms with living here. Previously he had been living in a hostel for a number of years and could not understand why he could not return there. This was not possible due to his recent diagnosis. He had no insight into his mental illness.

Given time he settled but had a tendency to isolate. He spent most of his day in bed. He was pleasant but could not be encouraged into any form of activity. He had a slight tremor of

the hands on admission. However, as time passed this was noted to become more severe, making it difficult for him to eat and drink. After assessment with a Consultant Neurologist at St Mary's Hospital he was diagnosed with Parkinson's disease.

He has lived at Wytham Hall now for many months and has progressed exceedingly well. He is very compliant in the taking of his prescribed medication. He no longer spends lengthy periods of time in bed. His daily routine has progressed. He interacts well with staff and other residents. He goes out daily for a short walk.

His wish would be to stay at Wytham Hall long term. Nevertheless, he accepts this is not possible, as we do not offer the long-term care that he will require.

He is presently awaiting a move on placement into a long term Registered Care Home where his medical and social needs can be met.



■ RESIDENTS' ACCOUNTS

- in their own words

Colin

Before I came to Wytham Hall I was drinking heavily, and was in a mess. I knew I needed help, but I didn't know where to turn. I ended up in St Mary's through drinking and I was really worried. I didn't know where I was going to end up, but I knew that I needed help. Then somebody arranged an interview at Wytham Hall for me, and from the moment I arrived I felt at home.

In the three weeks I have been here I have stopped feeling negative and started to feel a lot more positive. I actually feel hopeful about the future, where I never have before, not for the last ten years.

Because you are meeting other people with problems of their own, you stop being so selfish and become more caring. You start thinking about other people more, and stop being so me, me, me, and that gives you extra strength as well. Even though the staff work such long hours and work very hard, they always give you a smile.

Looking back I think arriving at Wytham Hall was a godsend for me because who knows where I might have ended up?

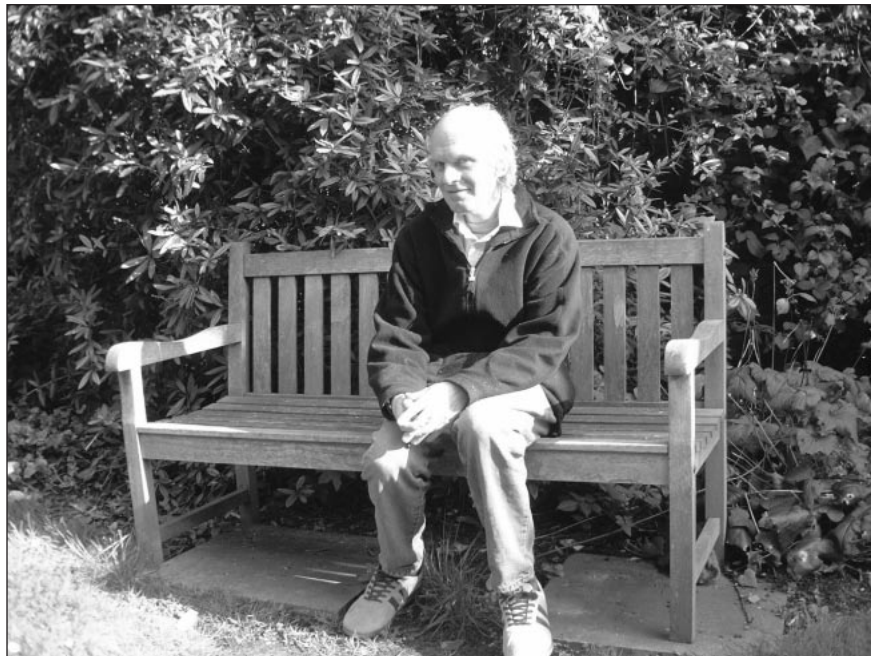
Bill

It all started last year when I had a break up in my relationship. I went to live with some relatives in Essex, and I started drinking heavily. I became seriously ill in January and ended up in hospital with a massive clot on the left lung and pneumonia. I was in hospital for four and a half weeks. I ended up back in

Essex with another relative and eventually back in a relationship with the same partner. I got into trouble with the police for a driving offence through alcohol. My relationship eventually broke down and I went back to live with a different relative, and ended up drinking heavily again. I returned to hospital with chest pains and spent five weeks there.

I then moved to Wytham Hall – this was organised through the discharge team at St Mary's. I came for an interview and thought it was brilliant. The staff were so friendly- I have never been in a place where people have been, but I have never been in a place like this before.

Four weeks ago I arrived here. Since I have been here I have been relaxed. I am still under heavy hospital treatment, which I go to every week. I have lived in this area, and know the area, and I have also got to know the staff.



They are very helpful, and helped me fill out loads of housing forms. I am always out and about, and like to keep my time busy.

My outlook now is to try and get my own place, but I know this will take some time and so will have to reconsider an offer made by Wytham Hall, and will hopefully move on to one of their houses.

Timmy

Before I came into Wytham Hall, I was sleeping rough on the streets of Victoria. I had an outreach worker who sees me every week, to see how I am keeping. I have been under the homeless unit for the past 21 years under Westminster City Council. They never helped me in getting any accommodation. I was classed as not vulnerable for housing as a single man.

Over the years I stayed with my twin brother and his family in Kent. They were very supportive even though we didn't get on as a result of my drinking. I can't blame them for that. Before I was on the street I had some successful jobs. I worked in the catering business, I was a confectioner and baker by trade, and did my apprenticeship as a chef.

I went into a few detoxes and rehabs, and could not handle it as it was too much. I also lost several members of my family.

Apparently I was in a bad way. I took a very bad turn, because I was withdrawing from alcohol, and the way I was living with no sleep, I thought people were trying to kill me. I was hallucinating, hearing voices in my head and it was all so real. On this occasion the police took me to St Mary's hospital and from there it was suggested that I come here.

I found that Wytham Hall has been very helpful to me. I think the staff are great people, they gave me the groundwork to stand on- to build from there. When I came here I was a complete wreck. I have had plenty of time to get my head together. I have got my health back, I have gained weight and I feel 100% better for the help that I got from this

project. I know I have got a long way to go but I have to keep reminding myself where I have come from and stick to this new lease of life.

I'm very happy that I have come here because I have been treated well and I thank everybody here for helping me to get on my feet. I feel a lot better in myself and am looking forward to the future in my new life.

Sean

I was found unconscious in the street, and I woke up in St Mary's. I had drunk two bottles of vodka and think I had been assaulted because I was covered in bruises. I was seen by a psychologist and convinced him that I wanted a detox. I was given a detox and referred here by the discharge team. I came here for an assessment and went back to hospital. I found out the next day that I had been accepted.



I arrived here from hospital. When I first came everything was a blur for a few days. After about a week I didn't think I would stay. I contemplated leaving. As the days went on I found the staff to be really helpful and friendly in every way. I had to go to court as the Housing Association were seeking possession of my flat. Dr Reid put me in touch with a

barrister to help me in the court case.

As time passed I stayed because the staff were very supportive. They have all been fantastic and I am still here in my 7th week. It has been hard many times because my craving for drink has been overwhelming sometimes. About four weeks ago I started to attend lunchtime AA meetings which I now go to on a regular basis attending seven meetings a week, and I find that very helpful. I have thought about drinking many times but knowing that I was coming back here and going to AA meetings has kept me off the drink.

I am now waiting to see from Social Services if I will be funded for a rehab. The last few years have been horrendous, I had never heard of this place before. Since I have been here I have got stronger and stronger every day. The help I get here has just been wonderful.

Ben

I left Northampton this year in desperation for help. I suffer from depression and headaches and migraines. I saw Dr Reid at Great Chapel Street and he offered me a place at Wytham Hall. I told him that I don't like being in buildings because I am used to being outside. Then I went to St Martin's and spoke to a Mental Health worker. I showed him the pamphlet for Wytham Hall and asked him to look into it for me. Then we filled out some paperwork and then I came here, but I only lasted for four days before I left and went back on the streets because I felt trapped.

I stayed on the streets again for a few weeks before seeing the mental health worker again. I got him to ring Wytham Hall to see if they would take me back and they said that they would so I moved back in.

The people are nice, and the other residents are nice to talk to. We are living in a building where everyone's got their own problems, and they seem to be getting on with their lives better. I find it difficult being here, trying to tolerate being in a building, but I have managed to stay longer than last time.

Alan

During a short period of homelessness I visited Great Chapel Street Surgery where tests were carried out for TB. Following confirmation that I was suffering from TB I was offered accommodation at Wytham Hall where medication and rest were provided.

The help and support I received from the project staff and doctors at Wytham Hall was very beneficial and allowed me to recover sufficiently to be offered a room in the Wytham Hall shared house at Lanhill Road. I am currently living there now with seven others and am finding it ideal for someone in my position.

Marcus

Before coming to Wytham Hall I had spent five years sleeping rough and suffering from mental illness. I used to get paranoid if I stayed in one town for more than a few weeks and because of this I was always on the move.

I came to Wytham Hall from St Mary's hospital where I had been sectioned. My illness was diagnosed and I was prescribed medication for the first time and this helped the paranoia. From Wytham Hall I moved on to Lanhill Road Supported Housing. Whilst at Lanhill I became ill again. My keyworker at Wytham Hall had noticed I wasn't looking after myself properly and as a result my medication was changed and I became better again.

I now live at Charfield Court Supported Housing which I regard as my permanent home. Wytham Hall has provided me with housing security and the security that comes from having people around me. Both of these are important, especially living in London.

Landmarks in the Development Of Wytham Hall

1984–2004

- 1978** Opening of the Great Chapel Street Medical Centre, a drop in clinic for homeless people in Central London. Dr El Kabir appointed physician in charge.
- 1979** Recognition of the need for a sickbay to provide shelter and medical care for the homeless in cases where hospital admission is inappropriate or unwelcome
- 1981** Publication of the Acheson Report on Primary Healthcare in Inner London. This recognised the extent and severity of disease amongst the homeless, their reluctance to use general practitioners and the demand they make on emergency services and hospital beds as a result
- 1983** Medical sessions begin at the day centre in St Martins-in-the-Field Social Care Unit

Wytham Hall registered as a charity

- 1984** Transfer of lease of 117 Sutherland Avenue from Paddington and North Kensington Health Authority to Wytham Hall.

Admission of the first patient.

- 1985** Purchase by the Council of Management of the freehold of 117 Sutherland Avenue.
- 1986** Registration as a Residential Care Home for 10 residents
- 1987-1991** Operation of the **Mobile Surgery** for the homeless
- 1989** Dr Joseph employed through Wytham Hall as a full time psychiatrist for the homeless based at Great Chapel Street Medical Centre

First elective students come to Wytham Hall funded by the Conanima Foundation.

Registration to admit women

- July 1990** Registration for 14 residents

- Jan 1991** Outreach clinics run at cold weather shelters

- 1992** Bail bed project at Wytham Hall as part of a court diversion scheme for mentally disordered offenders
- 1000th Admission to Wytham Hall
- An anthropological view of Wytham Hall
- 1993** London Implementation Group grant to promote the timely discharge of homeless patients from hospital to Wytham Hall
- 1994** Opening of the Wytham Hall Glaxo Community Care Home
- 1995** Involvement in the Eurhope Network (Europe - Health of the poor and excluded)
- Purchase of second move-on property (four bedroom flat in Charfield Court) and contract to take homeless patients from St Mary's Hospital
- Great Chapel Street moves to new premises
- 1996** Contract with Paterson Centre to take homeless mentally ill patients from St Mary's Hospital.
- Purchase of third move-on property (four bedroom flat in Charfield Court)
- 1998** 100th Elective Student attends Wytham Hall
- 1999** Great Chapel Street awarded NHS Beacon Status for three years
- 2000** Special study module at Wytham Hall for students from Oxford University and Imperial College London. University College London students attend on day placements.
- 2001** Contract with the Gordon Hospital to take psychiatric patients on discharge
- 2000th Admission to Wytham Hall
- 2003** Contract with Kensington and Chelsea Primary Care Trust to take patients from Chelsea and Westminster Hospital.
- Funding for the move-on houses moves to 'Supporting People'
- 100th admission to supported housing
- 2004** 20th Anniversary

■ EVENTS OF 2003-2004

Recovery Unit Conversion Works

Following the relaxation of the recommendations of The National Minimum Care Standards for Adults our plans to carry out major room conversion and refurbishment works of the Recovery Unit have been postponed until further notice. Bed screens for residents' privacy have been installed in the bedrooms of the Recovery Unit to comply with the Standards.

Fundraising

The fundraising initiative for the conversion works of the Recovery Unit has been suspended following the decision to postpone the conversion until further notice. We have received a generous donation of £25,000 from Marks & Spencer's for otherwise unfunded admissions.

National Minimum Care Standards

Inspection under National Minimum Care Standards took place in November 2003 and its recommendations reflected the relaxation of the Standards for care homes established prior to April 2003. All the recommendations and requirements stipulated by the inspection have been implemented.

Maintenance

Internal redecoration of the Recovery Unit has been completed by a former resident.

Computers

Wytham Hall website has been improved and updated with Case Reports and a Supported Housing Referral Form to attract potential referrals and funders.

External Relations

A new funding agreement has been established with the Kensington & Chelsea PCT to fund patients discharged from the Chelsea & Westminster Hospital.

Staffing

The staffing arrangements have changed slightly with the departures of the Senior Project Worker and the Support Worker and the appointment of the Assistant Manager.

Supporting People

Supporting people contracts for Lanhill and Charfield are in place and monitoring returns for the year have been completed. All relevant policies and procedures have been updated to meet the standards of the Quality Assessment Framework. There is a new referral form in use and a new support plan and review form.

■ PATIENT SERVICES REPORT

Julie Gaudion – Registered Project Manager

Last year this report began with the newly formed National Care Standards Commission inspection and the excellent report they gave Wytham Hall. This year has seen the amalgamation of the commission with the Social Services Inspectorate and the SSI/Audit Commission Joint Review Team. We are now inspected by the Commission for Social Care Inspection who have a remit greater than anything seen before in social care, allowing a more rational, integrated system of social care inspection and regulation! Our first announced inspection took place on the 5th July 2004 and the report can be seen on the CSCI website.



Staff in a ward round

Support Provided by Wytham Hall

In addition to the Registered Manager the current staff team consists of a Supported Housing Worker who supports the residents in the move on properties and is responsible for maintenance and Health and Safety, a full time Project Worker, a full time Support Worker, two weekend Project Workers, a full time Administrator/Systems Manager, a Chef Manager and our Cleaner. The team of volunteer doctors are living on site and provide medical care and on-call cover over night.

Length of Stay

Wytham Hall's residents stay with us for an average of just under seven weeks. This can vary considerably depending on how long it takes for suitable move-on accommodation to be agreed and then become available. Residents have stayed at Wytham Hall in the past for over a year to ensure that their resettlement is appropriate and fitting to their needs.

There are various options open for residents when they move from Wytham Hall including our own supported accommodation of a total of sixteen beds in the shared house in Lanhill Road and the two shared flats at Charfield Court. Other options would be independent accommodation through different housing associations and alternative accommodation providers, residential rehabilitation units and dry houses and some residents will return to family or their own flats or be admitted to residential care homes.

Social Services often have input with regard to where residents are placed following their stay at Wytham Hall and carry out the necessary referrals. Care packages can be arranged by social

workers to enable people to remain independently in the community for longer by receiving help with shopping, cleaning and cooking etc.

Emergency accommodation is available at the Homeless Persons Unit for those residents not deemed vulnerable enough for admission to specialist projects.

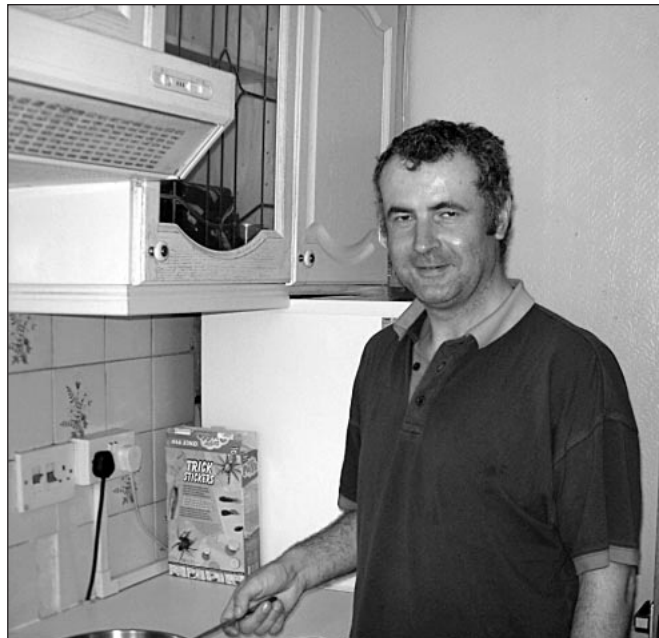
Referrals & Admissions

In the last year Wytham Hall admitted 49 patients who stayed for an average time of six to seven weeks. These patients were admitted from St Mary's Hospital, the Gordon Hospital, The Paterson Centre, various social services teams including the Corporation of London and outreach teams from several organisations. 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 Person's Unit for bed and breakfast accommodation to be provided.

Referral Sources/Services Provided

Social Services Departments such as Community Mental Health, Substance Misuse, Physical Disability and Elderly Teams frequently refer patients and accounted for 23% of the total admissions last year. Drug and Alcohol Assessment Outreach Teams refer patients to Wytham Hall and now have their own budgets provided by the Homelessness Directorate which simplifies the funding process for clients admitted from the street via this source. 22% of total admissions to Wytham Hall were from Great Chapel Street Surgery on an emergency basis and are unfunded, at least in the first instance until the appropriate team has assessed the need and may recommend funding for a six week period.

A contract has been established between Wytham Hall and the Gordon Hospital within the last year and so together with the Paterson Centre and St. Mary's hospital admissions from these sources brought us 51% of our total patients. Patients continue to be referred from various other hospitals for early discharge thus vacating valuable hospital beds for new admissions.



Public Relations

Medical students came to Wytham Hall from Oxford and Imperial for electives and have written very positive reports about their experiences with us and at Great Chapel Street Surgery where they always spend some of their time. University College London medical students attended

Wytham Hall for three hour placements on studies for Homelessness and Health modules.

Visitors to Wytham Hall to discuss current and future funding contracts included Gwyn Morris (Kensington & Chelsea PCT), Vivienne Broadhurst (Social Services Team Leader at Chelsea & Westminster Hospital) and Rebecca Campbell (Acting Team Manager, St Mary's Hospital Discharge

team). Other visitors included Lorraine Baker the Supporting People Contracts Manager, Greg Roberts the Supporting People and Homelessness Strategy Manager, Councillor Barbara Schmeling, Kate Thompson (Alcohol Arrest Referral Worker from St Mungo's), Nicholas Vial, Social Worker from Great Chapel Street.



Future Plans

We are thrilled to have planned a celebration for the 20th anniversary of Wytham Hall to be held at The Royal Society of Medicine in November 2004

Further funding contracts are always being sought through our links with hospital discharge teams and liaison with the Commissioning Managers of local Primary Care Trusts. In addition we are keen to secure funding for the patients we admit from Great Chapel Street and various other teams who work with homeless men and women who are not linked in to funding sources.



■ STATISTICS ON ADMISSIONS TO WYTHAM HALL

April 1st 2003 – March 31st 2004

Total number of residents: 58 (last year 66)

Total number of admissions = 49 (57)

84% of admissions were male (86%)

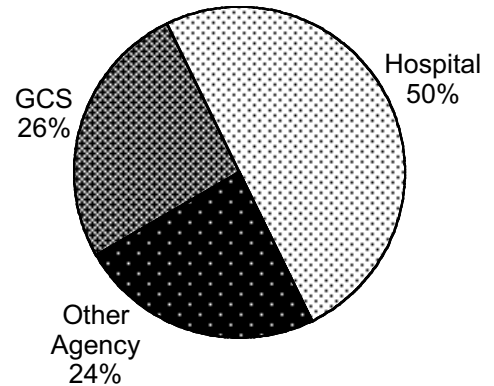
16% were female (14%)

Average age: 40-45

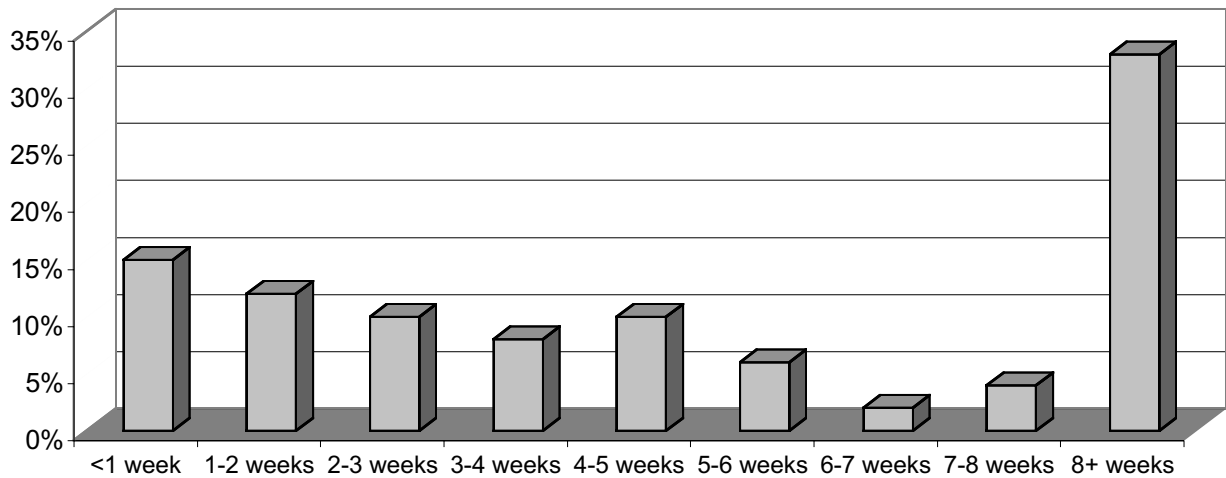
Average length of stay: 6.9 weeks (6.9)

Figure of overall occupancy: 68% (65%)

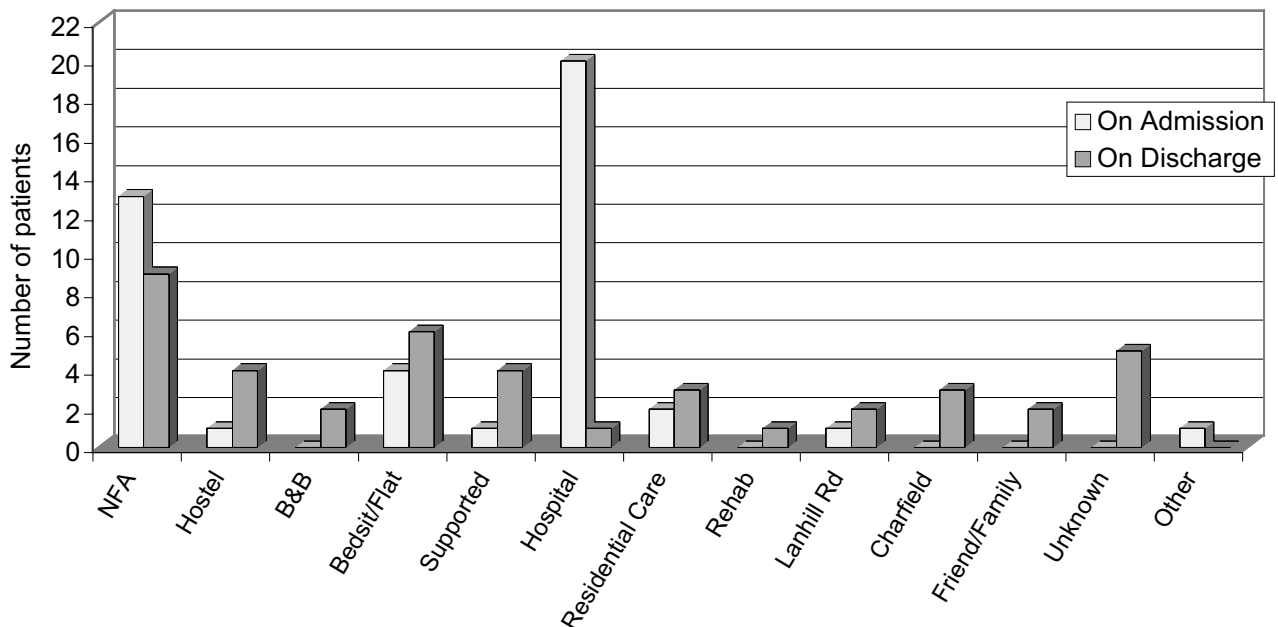
Referral Source

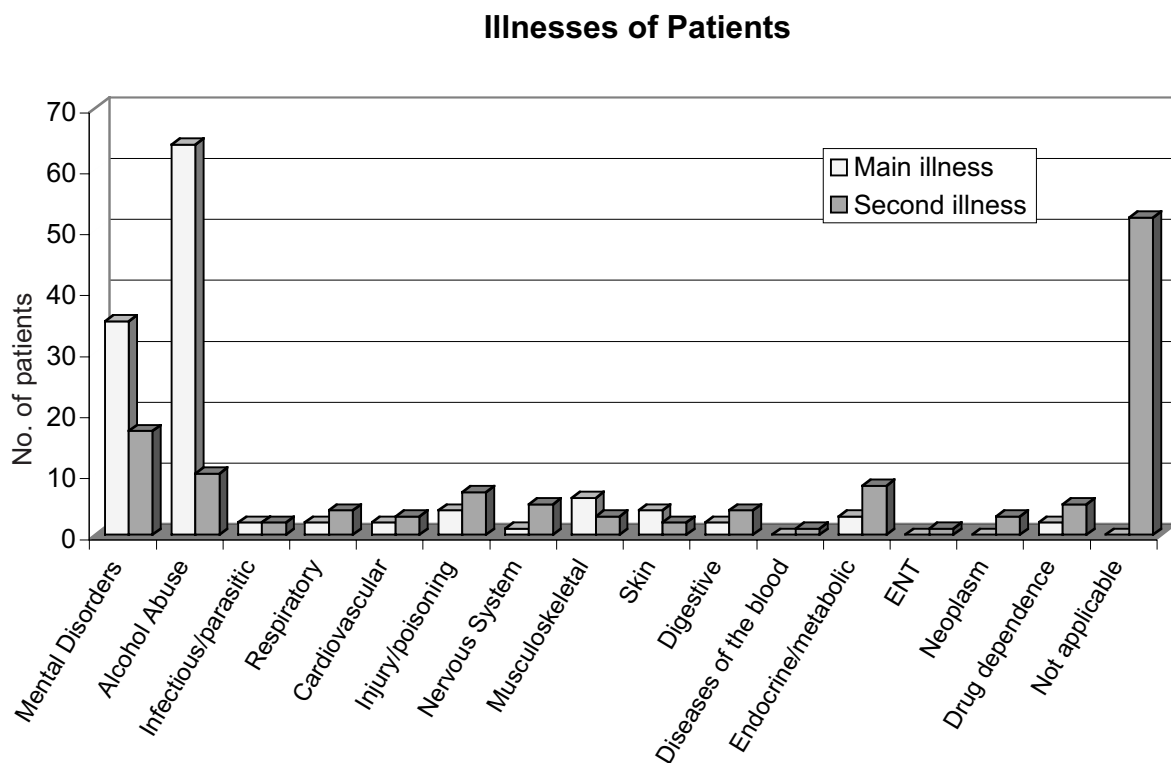
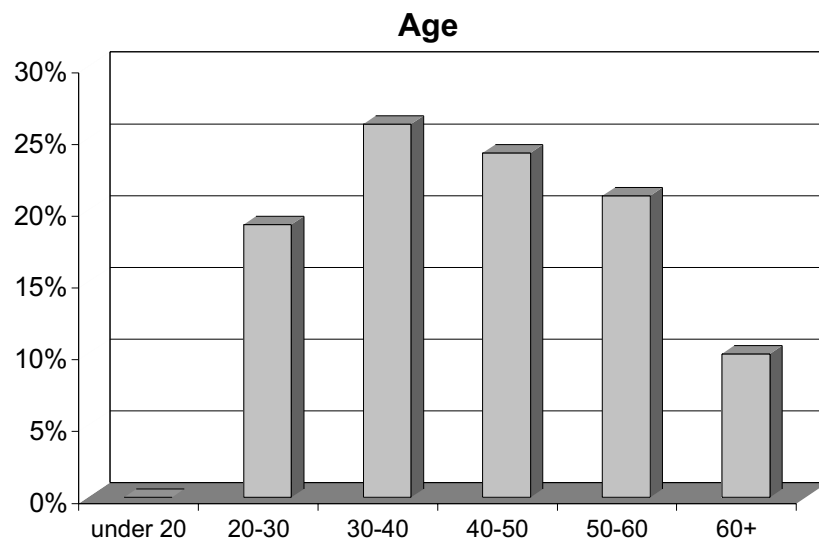
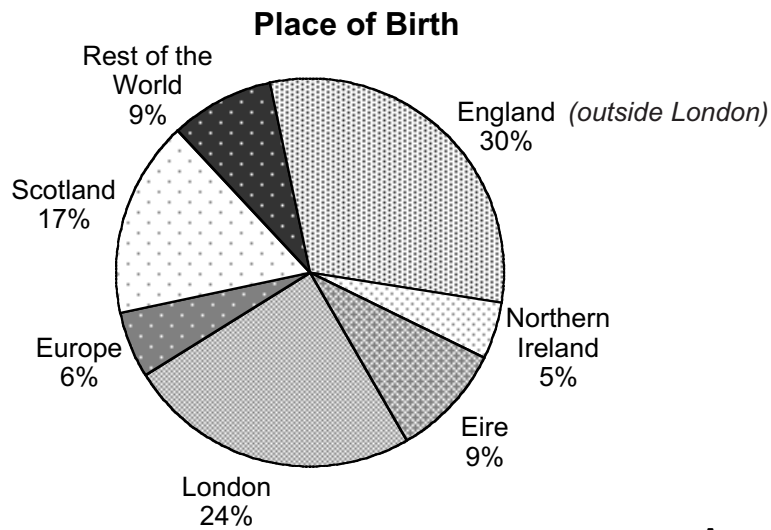


Length of stay



Accommodation on Admission / Discharge





■ SUPPORTED HOUSING REPORT

Lanhill Road and Charfield Court are supported housing units, located within a five minute walk from Wytham Hall. Sixteen individual rooms are available to people who are ready and able to live a more independent lifestyle. Residents have the support of a team of workers including a Supported Housing Worker, Project Worker, and a Support Worker. Residents from the supported housing units quite often come over to Wytham Hall to speak to staff and have a cup of tea downstairs. They also have the opportunity to express their

essential cleaning amongst themselves and weekly inspections are made by the supported housing worker. These inspections ensure 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 share the cleaning of communal areas on a rota basis. Residents also report any maintenance issues to staff at Wytham Hall.

The majority of residents living in the supported housing units are in receipt of Housing Benefits 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 weekly rent contribution of £6.50, with the utility bills and council tax being paid by Wytham Hall.

Staff also recognise that it is imperative to

be developing strong working relationships with other services/organisations involved in the welfare of our residents. We 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, both Lanhill and Charfield residents are given the option of registering with Dr. Reid at either Notting Hill Gate or Great Chapel Street Surgery.

Lanhill Road

Lanhill Road provides accommodation for eight residents in single bedrooms. This



Robert Bolus

views and opinions about issues arising in their own home at weekly house meetings. Individual support plans are developed with the residents and reviewed monthly. Before moving into supported accommodation, residents have a short-term stay at Wytham Hall. This gives our team of staff the opportunity to build a rapport with the resident and identify any specific needs.

Initially, residents will be offered a place at Lanhill Road, which is a medium-term accommodation, and then possibly a move to Charfield Court, which can be permanent if the resident wishes. The houses are dry environments, which offer a safe place for people who are committed to not drinking or using illegal drugs. Residents co-ordinate the

spacious house offers a shared kitchen, a living room, three bathrooms, two shower rooms with toilets, and a garden. Lanhill Road offers temporary supported housing for homeless people and residents usually stay for a period of up to 6 months to a year. Lanhill Road gives residents the opportunity to gain confidence in independent living, with the support of staff from Wytham Hall. 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 environment for people to live. It is interesting to note that the residents at Lanhill Road have varying abilities in terms of their independent living skills.

Charfield Court

Charfield Court comprises of two flats, each with four individual bedrooms. They are located in a quiet area around the corner from Wytham Hall. Both Charfield flats function as permanent homes, and are often used as a move-on accommodation from Lanhill Road. Residents view their homes in Charfield as 'Homes for life,' and take pride in keeping it clean and tidy. Many of the residents who live at Charfield Court have a very strong and trusting relationship with Wytham Hall.

Supporting People

In January 2005, the supported housing people will come and assess the quality of service we provide to residents living at Lanhill Road and Charfield Court. In the meantime, we will be carrying out a detailed self-assessment and making sure that all of our evidence is in place. By carrying out a detailed self-assessment we can keep on working towards continuous improvement. This in turn can only benefit the residents that we work so closely with. During the assessment we will be required to meet six core objectives, and at current self examination we are able to demonstrate good working practice. In order to meet supporting people requirements we are keeping an accurate record of support plans and making sure that we involve service users in this process.



Staff in a ward round

INCOME AND EXPENDITURE ACCOUNT YEAR ENDED 31st MARCH 2004

	<u>2004</u>		<u>2003</u>	
	£	£	£	£
Income		280,062		249,096
Direct and administrative expenses		(312,111)		(282,773)
Operating (loss)/surplus		(32,049)		(33,677)
Interest receivable	6,033		6,108	
Interest payable	_____		_____	
		6,033		6,108
		_____		_____
(Deficit)/surplus of income over expenditure for the year		(26,016)		(27,569)
Donations	29,995		6,062	
Capital donations	----		----	
Transferred to reserves	_____		_____	
		29,995		6,062
		_____		_____
(Deficit)/surplus for the financial year		3,979		(21,507)
		=====		=====

CASH FLOW STATEMENT YEAR ENDED 31st MARCH 2004

	<u>2004</u>		<u>2003</u>	
	£	£	£	£
Net Cash (outflow)/inflow from operating activities		814		(14,724)
Returns on investments and servicing of finance				
Interest received	6,033		6,108	
Interest paid	----		----	
	_____		_____	
Net cash inflow from returns on investments and servicing of finance		6,033		6,108
Investing activities				
Payments to acquire tangible fixed assets	(2,917)		(21,799)	
	_____		_____	
Net cash inflow/(outflow) from investing activities		(2,917)		(21,799)
		_____		_____
Net cash (outflow) /inflow before financing		3,930		(30,415)
Financing				
Donations received	29,995		6,062	
	_____		_____	
Net cash inflow from financing		29,995		6,062
		_____		_____
(Decrease)/increase in cash and cash equivalents		33,925		(24,353)
		=====		=====

Full accounts are available on request

■ VISITORS TO WYTHAM HALL APRIL 2003 - MARCH 2004

Miriam Flynn, Health & Safety Inspector, Westminster City Council

Kate Thompson, Alcohol Arrest Referral Worker, St Mungo's

Lorraine Baker, Supporting People Contracts Manager, Supporting People

Greg Roberts, Supporting People and Homelessness Strategy Manager, Supporting People

Christina Godfredson, Brithe Peterson, Merethe Faaborg, and Christina Schultz, Danish Students

Dianne Goodkind, Counsellor, Great Chapel Street Medical Centre

Alan Brown, Architect, IID Architects

Tristan Oxenham, Imperial College Student

Sarah Mitchell, Network Coordinator, Homeless Link

Andy Jennings and Stephanie Johnson, Criminal Records Bureau

Barbara Schmeling, Councillor, Westminster City Council

Verity Bradley, Locum Social Worker, North Paddington CMHT

Mary Russell, Health Improvement Medical Practice

Neil Pillai, St Mungo's

Alice Prior, Social Worker, West End CMHT

Timo Dhliwayo, Student Nurse

Gwyn Morris, Commissioning Manager, Kensington & Chelsea PCT

Vivienne Broadhurst, Social Services Team Leader, Chelsea & Westminster Hospital

Rebecca Campbell, Acting Team Manager, St Mary's Hospital Discharge Team

■ PUBLICATIONS ON HOMELESSNESS

Great Chapel Street Medical Centre
El Kabir D J.
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Ramsden S S, Baur S, El Kabir D J.
Journal of Royal College of Physicians, 1988; 22:16-17.

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Ramsden S S, Nyiri P, Bridgewater J, El Kabir D J.
British Medical Journal, 1989; 298:372-4.

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St. Peter's College Record, 1990.

Mentally disordered homeless offenders - diversion from custody
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Health Trends, 1990; 22:51-5.

A psychiatric clinic for the homeless in a primary care setting in Inner London
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Electives at a sick bay for the homeless
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Report commissioned by the Home Office, 1992.

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Reed A, Ramsden S, Marshall J, Ball J, O'Brien J, Flynn A, Elton N, El Kabir D,

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British Medical Journal, 1992; 304:1028-9.

Quelques observations sur les sans-abris

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Paris, Les Temps Modernes, 1993: 567

A pragmatic approach to the care of the single homeless: its implications in terms of human resources

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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

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Dr D El Kabir & Dr S Ramsden

■ MEMBERS' OTHER PUBLICATIONS

Lectin histochemistry of microvascular endothelium in chick and quail musculature.

Anat Embryol (Berl) 2001 Nov;204(5):407-11

Nanka O, Peumans WJ, Van Damme EJ, Pfuller U, Valasek P, Halata Z, Schumacher U, Grim M

OPPORTUNITIES AT WYTHAM HALL FOR MEDICAL STUDENTS/JUNIOR DOCTORS

We would like to hear from medical students and junior doctors interested in spending time at Wytham Hall. We are an innovative project providing residential, social and medical care to the homeless in London.

Priority is given to students who attend on a special study module from a University with which we have an established link.

Successful applicants will be given an opportunity to spend time with residents of the recovery unit and of our three move-on properties in order to gain an increased understanding of the issues facing this vulnerable and complex group. They will also be expected to monitor the progress of individual patients, assist with admissions and take histories of new residents under the supervision of one of our resident doctors. Regular visits to the Great Chapel Street Medical Centre, a walk-in surgery for the homeless, are also part of the student programme.

On-site accommodation is available at a small cost and applicants are encouraged to be resident at Wytham Hall for the duration of their program in order to become fully involved in our community.

SHORT PLACEMENTS

To obtain basic understanding of the work we do at Wytham Hall a minimum stay of two weeks is advisable.

STUDENT ELECTIVES

Month-long residential placements enable the students and junior doctors to actively participate in our work with the residents of both Wytham Hall and our Supported Housing. Visiting other homeless agencies and undertaking an element of elective study or related research are also recommended.

LONGER TERM PLACEMENTS

The students or junior doctors who demonstrate a sincere commitment to the care of the homeless may be given an opportunity to play an active part of the community at Wytham Hall by spending an extended period of time with us whilst conducting their study, research or work.

Further details are available on our website at www.wythamhall.co.uk or on that of Great Chapel Street Surgery at <http://business.virgin.net/gcs.medical/index.htm>.

Please contact us if you are interested in any of the above opportunities.

**Tel: 020 7289 1978
e-mail: enquiries@wythamhall.co.uk**



MAKING A REFERRAL

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

Care Provided:

Short term housing to allow assessment and stabilisation of care for the single homeless.

Supervision of treatment for those who need some supported care.

Alcohol detoxification when necessary.

Not for long term housing alone.

Not for drug detoxification or alcohol detoxification alone.

How to find us

