

WYTHAM HALL

Annual Report 2012 - 2013



Breaking the cycle of street homelessness

*Front cover: reproduction of Caravaggio
by Michael Kearns*

Back cover: painting by James Gray

WYTHAM HALL ANNUAL REPORT

1st April 2012 – 31st March 2013

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■ WYTHAM HALL - An Introduction

Wytham Hall was founded in 1984 by a group of doctors and medical students who were keen on exploring the dynamics of interpersonal relationships, particularly in the doctor-patient relationship. It seemed most appropriate to apply these principles to those who, because of their fragility and the precariousness of their circumstances, were most in need – the homeless and the deprived. At that time, Dr El Kabir had, for several years, been running a medical centre for homeless people in Soho, Great Chapel Street Medical Centre, www.greatchapelst.org.uk. This seemed an ideal starting point for the project.

A house was acquired through donations and benefactions and Wytham Hall took life. Wytham Hall Recovery Unit was opened in 1984 as a unique and innovative project providing residential care to homeless patients with medical and psychiatric illnesses.

Its aims were to offer help, space, treatment and respite to those in need of it, and to help them lead a more fulfilling life. It has an extensive educational role, welcoming students from the UK, the USA, Hungary, the Czech Republic, the Slovak Republic, Ukraine, Uzbekistan and Israel. Its members have undertaken research on various aspects of homelessness, resulting in a number of publications.

Wytham Hall functioned as a recovery unit with fourteen beds and sixteen beds in move-on accommodation, which included a superb house donated by (what was then) Glaxo plc. We have been able to create small

communities for people to run their own lives in these premises. In 2007 we changed to supported housing with 25 beds in total. The emphasis has shifted from acute treatment and stabilisation towards the longer-term recovery not only of physical but also psychological health. This has involved a re-evaluation of the way staff and resident members relate to residents. We take pains at our weekly staff meetings to learn from the interactions of the last week and to search for the growth points. In this way we aim to enhance the process of evolution and understanding that is part of all our journeys

through life and help our residents towards an integration of their personalities. Our residents are involved in Balint and French groups, which work towards the same goal.

We have, in 30 years, admitted some 2500 individuals. We tried to care for each of them as individuals with specific needs and capacities. We

tried to give them some of the dignity they needed to look after themselves. Needless to say, we have not always succeeded. However, most of them have been able to gain some benefit from us. Some have indeed managed to reconstitute their lives.

Wytham Hall is a charity supervised by a board of Trustees with day-to-day management in the hands of an employed staff team supported by the voluntary input of resident members.

(Great Chapel Street Annual Report available upon request)



■ CHAIRMAN

Sir John Birch KCVO, CMG, MA (Cantab), former British Ambassador to Hungary and to the United Nations and Vice - Chair of the Council of UCL

■ BOARD OF TRUSTEES

Peter Barry, MBA (Cass), FCCA, Dip.M, I.M.I.S. FloD
Finance Director, Meiko UK Limited

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

Gideon Dabby-Joory, LI.B. (Reading), LI.M. (L.S.E) Partner, Fladgate LLP

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

Lt-General Sir Scott Grant, K.C.B., M.A. (Cantab)
Formerly Quartermaster-General to the Army, Chief Royal Engineer

Sir Brian Jarman, O.B.E., M.A. (Cantab), Ph.D., M.B., B.S. (London), F.R.C.P., F.R.C.G.P.,
F.F.P.H.M., F.Med.Sci.
Emeritus Professor, Imperial College, Faculty of Medicine

Professor Ray Jones BSc(Hons), MSc. PhD, CQSW, RSW, AcSS, FCMI, FRSA,
Professor of Social Work, Kingston University and St George's, University of London.

Dr Richard Lancaster, M.B., B.Chir. (Cantab), Ph.D (London), F.R.C.P.
Consultant Physician, Emeritus, St Mary's Hospital

Chris Littmoden, C.B.E., C.A.

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., General
Practitioner, (Vice-Principal)

Dr David Alexander Sturgeon, Consultant Psychiatrist at the UCL Psychological Therapies
Service; formerly Consultant Liaison Psychiatrist at UCL Hospitals.

Michael Frank Woods, M.A. Dip. Arch. (Cantab), A.R.I.B.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., General
Practitioner, (Vice-Principal)

Solicitors: Dibb Lupton Alsop, 125 London Wall, London EC2Y 5AE

Auditors: PKF (UK) LLP, 20 Farringdon Road, London EC1M 3AP

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

■ MEMBERS OF WYTHAM HALL

■ RESIDENT MEMBERS

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

Dr Nad'a Horakova, M.D. (Prague),
House Officer (FY1) Bedford Hospital

Dr David El Kabir, M.B.E., M.A., D.M.
(Oxon), M.B., B.Chir. (Cantab),
F.R.C.G.P. (Principal)

Dr Alzbeta Karlikova, M.D. (Prague),
CertHE in Psychodynamic Counselling
and Organisational Dynamics,
Supported Housing Worker

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., General Practitioner,
(Vice-Principal)

■ NON-RESIDENT MEMBERS

Bridget McCarthy, Cert. Therapeutic
Counselling
Service Leader

Andrew Keck, B.A. Hons., Supported
Housing Worker

Dave Lambe, B.Sc., Supported Housing
Worker

Dr Petr Valasek, M.D., Ph.D (Prague),
Reader in Anatomy at First Medical Faculty,
Charles University, Prague, Trainee GP
Crewe General Hospital

Danylo Yershov, Medical Student and
Demonstrator in Anatomy First Medical
Faculty, Charles University, Prague

■ VISITING MEMBERS

Dr Desiree El-Kabir MA, MBBChir, MD (Lond), MRCP (Lond). Speciality Doctor, Sue
Ryder Hospice, Nettlebed and Medical Member, First Tier Tribunal (Social Entitlement
Chamber)

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, Honorary Senior Lecturer in Surgery, Imperial College

Dr Daniel Lasserson MA, MBBS (Hons), MD (Cantab), MRCP (UK), MRCPE, MRCGP.
Senior Clinical Researcher, Department of Primary Care Health Sciences, University of
Oxford

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

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

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

Lenka Zakova-Cassidy, B.A. (Hons)

■ CHAIRMAN'S REPORT

For those of us who have a warm bed, clean clothes and somewhere to wash, it is hard to imagine what it must be like to be living on the street. It is not just the physical discomfort but also the sense of failure and abandonment that blights the lives of those who have nowhere they can call home. For 30 years we have worked with the street homeless to try to bring some order, dignity and purpose to the lives of those who have come to live with us at Wytham Hall. The cycle of life for the street homeless is a vicious one. Often it begins with a family, financial or mental breakdown with nowhere but shelters or the street to sleep at night. This invariably leads to ill health, a visit to A and E, a patch up and back on the street. Wytham Hall aims to break this cycle. The hope is that with help and advice, often with medical problems, our residents can move on to independent living in permanent accommodation. It is a shocking statistic that the life expectancy of the regular street homeless is barely over half that of the rest of the population.



In the current economic situation, and with the migration of young job seekers from southern to northern Europe, the numbers of homeless may well grow. The Evening Standard carried a headline in June that the number of rough sleepers in London had doubled in the last 5 years to over six thousand. There will always be people who suffer misfortune and find themselves on the street. But we can reduce the period of misfortune and get people back on their feet. Wytham Hall's contribution is tiny - we have only 25 residents and the length of stay varies from a few months to a few years but we believe we set an example of a humane and understanding approach to homelessness.

This has been a good year for Wytham Hall. Our financial situation is healthy and we have worked well with our funders and sister organisations and with Great Chapel Street, the drop-in medical centre which refers many people to us. I took over as Chair of the Trustees from Dr David El Kabir this year. He was the founder of Wytham Hall and its inspiration. We are enormously fortunate that his wisdom and compassion will continue to be available to us as a Trustee and as the Principal of Wytham Hall. We are fortunate also to have a dedicated team of doctors and staff as part of our community. Finally, I should like to thank our benefactors, whose generous contributions demonstrate their faith in the work of Wytham Hall.

John Birch

■ PRINCIPAL'S REPORT

Our new chairman, Sir John Birch, has given a clear account of the main developments of the past year. In this, my first report as Principal, I will restrict myself to an outline of what has been going on within the community of Wytham Hall over the past year.

The variety of talents that we harbor under our roof is reflected by the reports of some of our residents. Despite this it should not be assumed that life is a bed of roses for our residents, nor, for that matter, for ourselves. We constantly have to juggle with our approach to the admission and the aftercare of individuals. This is not always an easy process: the limitations of what is possible is no doubt an expression of the extensive damage that life has inflicted on some of our residents but also by the awareness that our own wish to be effective as carers may actually colour our interpretation of the dynamics involved.

We continue to explore the dynamics of interpersonal relationships between the different members of our community. This is done, as always, with a great deal of depth. It is a tribute to our members they have constantly proved their strength of character by enduring the hardships that this process entails. I am deeply grateful to Bridget McCarthy, Andrew Keck and to Alzbeta Karlikova in helping us to achieve the ideals of Wytham Hall.

We congratulate Alzbeta on her admission to the MSc in Psychotherapy at Birkbeck College, Dr Nad'a Horakova for her success in pursuing her medical training and Danylo Yershov for being appointed a lector of Anatomy at Charles University in Prague, and becoming both student and teacher at the same time.

The approach of Wytham Hall to the problems of the homeless has inevitably lead us to observe some very serious deficiencies in the structure and in the services of many of the organizations we have to deal with. Some have indeed acknowledged the legitimacy of our criticisms. However, much



remains to be done to make these acknowledgments rather more than simply an evolutionary dead end and make sure that in fact public money is not wasted and the needs for continuance of care for the homeless does not merely result in a revolving door phenomenon. We intend to pursue what seems to us to be a source of financial waste and of lost opportunities.

I regret to have to inform you of the death of the great benefactor, Dr Joshua Sherman. It was the Conanima Foundation, with which he was associated, that was responsible for founding scholarships which enabled dozens of medical students from all over the world to spend time in Wytham Hall. I do feel that his influence on the careers of the majority of these students will have been incalculable.

Dr David El Kabir

■ REPORT OF THE RESIDENT MEMBERS 2012-13

Wytham Hall continues to be special in having resident members as part of the community. We have been joined by Dr Alzbeta Karlikova, who is part of the staff team, whilst also studying psychotherapy at Birkbeck, as well as Dr Nadezda Horakova, who is a junior doctor in Bedford. I believe that our presence in the project helps to provide a sense of continuity, stability and direction along with mutual respect that helps our residents. From our point of view although the effect of our presence is significant, the burden of emergency work is light and far



more often concerned with broken machinery than problems of acute illness, disorder or violence. In many ways our residents contribute to the community with, for example, one resident in particular tending all the plants and another cooking excellent meals for our Board meetings.

Not only do we meet our residents in passing but also more formally at Balint Groups, which are opportunities to discuss any topics and through that to understand ourselves and each other better. These occasions can be challenging and enthusiasm for them varies. Nevertheless, for those that have attended, the group must represent change with new ideas and challenges to received ideas.

David El Kabir interviews potential residents when they apply to come to Wytham Hall as part of the admission process. In this way he is able

to understand their motivation and potential from the start. He can then see them as needed for review during their stay.

Staff and resident members meet every Tuesday evening to discuss all the residents with a view to focussing on those areas where we all might be able to promote change. Here lies the most valuable part of living in a therapeutic community. We are not simply providing housing and basic support with benefits, life skills and training but also trying to help residents develop their self-understanding and resilience in the wider community. For all of us these meetings can be painful as we realise that in the daily round of meetings and encounters we miss nuances of meaning and opportunities to say something that can help develop the relationship.

For their medical care, many of the residents are registered with me in the Great Chapel Street or Notting Hill surgeries and where mental health services are needed we use the local service based off Harrow Road or the Joint Homeless Team. Thus most of their medical problems are addressed off site. Residents are generally stable in health but still have to deal with chronic physical complaints such as cancer, arthritis, lung problems and chronic mental conditions such as depression and psychosis.

We continue to welcome medical students since the initial programme started in 1989 by Dr Joshua Sherman through the Conanima Foundation. We were sad to learn of Dr Sherman's death in early 2013. Students come from Imperial and Oxford universities and University College Hospital on special study modules or day visits. Most of their clinical experience is based at Great Chapel Street Medical Centre, whereas Wytham Hall offers them the chance to spend more time with individuals; to understand their history, personality and perhaps why they became homeless and what it meant to them.

Dr Philip Reid

■ SUPPORTED HOUSING REPORT

Wytham Hall, as an organisation, provides housing and support for 25 formerly homeless residents over four sites. Wytham Hall, as a building, houses nine residents (five of whom come from the Rough Sleepers' Team in line with our contract and four are our own rooms). All other residents are housed at either Lanhill Road (established with a grant from Glaxo Wellcome in 1994) or in our two Charfield Court flats (established in 1996 and 1997 with a grant from the National Lottery Charities Board and a substantial donation from The Henry Smith Charity). Wytham Hall is an abstinence-based organisation with the aim of providing a safe environment for people that are committed to not drinking or using illegal drugs and who wish to look at where life has led them and make some changes. All residents have the support of a team of workers including a Manager, a Service Leader, and three Supported Housing Workers and also, and perhaps most crucially, the support of each other.

Admission to our accommodation is via referrals from outside agencies. This provides as detailed a history of the resident as is available (personal, medical, housing history etc.). Suitable referrals are then assessed (typically by Dr David El-Kabir (Principal), Bridget McCarthy (Service Leader) and Dr Alzbeta Karlikova (Supported Housing Worker)).

The length of stay within our accommodation is variable and depends on need. We do not have access to our own move on accommodation, however we offer support to residents to access accommodation appropriate to their needs. Wytham Hall recognises that this transition can be difficult and therefore Wytham Hall staff remain available for input and advice, or indeed just provide a familiar environment where ex-residents can come to chat about their progress.

Upon admission and following a needs assessment, individual support plans are developed (these are reviewed quarterly and residents are free to invite who they wish to attend). A risk assessment is also carried out with the resident's involvement and key work

meetings take place every 4-6 weeks. All of the above paperwork can also, at its best, serve to provide not only a snapshot of where a resident is at, but in retrospect can serve as a useful tool for assessing progress and development. It should, however, be noted that the vast majority of contact between residents and staff is frequent and informal.

All Wytham Hall residents have the opportunity to express their opinions about issues arising in their own homes during monthly house meetings and/or through their regular contact with Wytham Hall staff. Our residents often develop an on-going relationship with our resident members and occasionally with our trustees and visiting guests.

The maintenance of a clean environment within our accommodation is co-ordinated by the residents themselves. Monthly inspections are made by the supported housing workers who identify issues to be resolved. Addressing them is typically a task that the residents take upon themselves. Staff also monitor Health & Safety concerns and advise residents where necessary.

The majority of residents living in the supported housing units are in receipt of a variety of benefits including Housing Benefit (which typically covers all rent bar a £7.35 weekly service charge, which covers council tax and all utilities). Staff at Wytham Hall devote a considerable amount of time to helping residents manage their benefits, advocating for them and lodging appeals when necessary. Developments in the benefits system have also led to much staff time being taken up with completing medical assessment questionnaires and accompanying residents to medical assessments.

Staff recognise that it is imperative to develop and maintain strong working relationships with other services and organisations involved in the welfare of supported housing residents. Staff are in regular contact with Care Managers, Psychiatrists, Community Psychiatric Nurses, Social Workers, Drug and Alcohol Workers, Day Centre Teams, Outreach Workers, Lawyers, Advisers and others and support residents by



attending appointments with all of the above if need be.

Many of our admissions have accessed medical support in the past via Great Chapel Street Medical Centre and as they are no longer technically homeless they are encouraged to register with Dr. Reid at his surgery in Notting Hill Gate. The doctors there have the background knowledge and experience to understand the difficulties of those who have been homeless.

LANHILL ROAD

Lanhill Road is a large house approximately ten 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 and colourful garden. Lanhill Road offers temporary supported housing for homeless people and residents typically stay for a period of up to two years, unless we deem a longer stay appropriate. Lanhill Road gives residents the opportunity to gain confidence in independent living with the support of Wytham Hall staff and each other.

Following their admission some residents take part in education, training and full and part-time employment. One resident maintains the garden (and indeed numerous gardens and other green spaces across London). The garden has become a place of relaxation and recovery for the Lanhill Road residents.

CHARFIELD COURT

We have two flats within Charfield Court, each with four bedrooms, a shared kitchen, lounge, balcony, bathroom and further cloakroom. They are located in a quiet area around the corner from Wytham Hall and are similar to Lanhill Road, but without the garden.

WYTHAM HALL

The Supported Housing at Wytham Hall comprises of nine rooms. Five of these units are currently occupied by people funded via our Rough Sleepers' contract. The five basement rooms benefit from a shared kitchen and access to a large garden. The four rooms located on the first floor of the property offer very spacious living areas and have a communal kitchen. Some of



these rooms overlook the large and tranquil gardens belonging to the property.

Since admission to Wytham Hall as a whole, many of the residents have been successful in moving forwards with their lives. Amongst these residents we have an actor, an exhibiting artist, a voluntary worker and some that have returned to education.

Wytham Hall supported housing continues to be a great success for residents and staff alike.

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 e-mail and telephone, and working together towards continuous improvement of our service. Wytham Hall staff members attend Supporting People Providers' forum which facilitates information sharing between providers within Westminster.

DEVELOPMENTS IN THE SERVICE IN THE LAST YEAR

Counselling

The approach to understanding residents' psychological problems and how their behaviour can be explored and managed to their advantage has continued to develop. This is led by Dr David El Kabir. The approach involves direct counselling of residents and also support for staff in managing problems.

A French group for those residents wishing to attend and facilitated by Dr David El Kabir continues to be held at Wytham Hall. Time is spent exploring French literature, poetry, theatre and cooking.

A Balint group continues to be held at Wytham Hall. This is an open forum for residents and staff members to speak on matters of their choice.

PLANS FOR THE NEXT YEAR

Engaging rough sleepers

In partnership with Great Chapel Street Medical Centre we are looking to continue to admit entrenched rough sleepers. We would use the same skills that have proven effective in engaging the residents at Wytham Hall.

Increasing resident involvement

One of our residents, who is a qualified chef, regularly caters for the Trustee's meetings that are held Wytham Hall. He produces a wonderful array of mouth-watering culinary delights.

Another resident is involved in welcoming new residents to Wytham Hall. He spends time introducing them to fellow residents, helping them to get to know the local area and in general making them feel at home.

Resident involvement continues to evolve quite naturally. The degree of trust that exists between staff and most residents is such that they often feel very comfortable in approaching staff to raise their concerns regarding the emotional well-being of fellow residents. They often take their concerns further and offer practical help and

emotional support to their peers.

Conclusions

We have been able to attract and stabilise a number of rough sleepers of widely varying backgrounds, who need the special and unique environment that Wytham Hall offers. That environment is physical and psychological. We continue to make interesting and useful developments and plan more for the next year. As our cohort of residents progresses we look forward to being able to report on those successes as well as the admission of more rough sleepers at the entrenched end of the spectrum. We know we can engage them and offer them something special.

Bridget McCarthy, Service Leader

■ CONTRIBUTIONS FROM OUR RESIDENTS

CRANACHAN

Ingredients:

25g Oatmeal toasted until nutty
500ml Double Cream
400g Fresh Raspberries
50ml Heather Honey
75ml Whisky

Instructions:

- 1** – Drizzle half of the honey and whisky over 200g of raspberries and chill for 1 hour, then drain and reserve the liquid.
- 2** – Whip the cream to form very soft peaks, add 6 teaspoons of reserved liquid and add marinated raspberries.
- 3** – Alternate layers of fresh raspberries and cream mix, randomly adding a teaspoon of honey then whisky, finish with raspberries and chill
- 4** – To serve drizzle 2 teaspoons of reserved liquid over raspberries and top with toasted oatmeal.
- 5** – Finally, drink what is left of the whisky

■ CASE STUDIES

Case study A

This 48 year old eastern European gentleman was admitted to Wytham Hall after several months spent in hospital for alcohol-related conditions, which almost cost him his life. He was admitted to Wytham Hall on the understanding that he would remain abstinent with regular testing. In the early days, despite his poor English language skills, he appeared to respond well to his new environment. The keywork sessions were carried out with the help of an interpreter and we worked closely with Westminster Drug Project (WDP) who also knew him well. After Christmas he relapsed but, with WDP, a prompt detoxification was arranged and he continued his residence with Wytham Hall. After a few more weeks and following the death of a friend, he relapsed and was found drunk and unconscious on the underground. Following a brief hospital admission, he returned to Wytham Hall, where it was decided that he could no longer be managed. After three weeks he moved to new accommodation and was seen twice afterwards but both times he was drunk.

Case study B

This gentleman lived at Wytham Hall for a couple of years having been street homeless for some 3 years before. He had developed skin and joint problems that related to his homeless lifestyle and for which he was receiving treatment at Great Chapel Street Medical Centre. These conditions, in the end, drove him to accept an offer of housing at Wytham Hall. Throughout his stay his manner and behaviour remained unchanged. He always presented himself well. He was articulate and often agreed to meet the visiting students but he remained quite discreet about his past, only letting a few facts emerge during keywork sessions or at the Balint Group meetings. We always felt there must have been some deeply traumatic event that had driven him to a life of destitution (despite him having adequate finances) but we still do not know what it was. He moved on to independent housing.

Case study C

Mr C was a young bright man, who came from a very difficult and destructive family background. He had largely brought up his younger siblings and his young life has been full of suffering, trauma, self-harm, suicide attempts, drug addiction and despair. After arriving at Wytham Hall he responded very well to his new environment. He took part in various activities and even tried to help a new and very vulnerable resident. He began to cultivate some of his many talents and began to think about gaining further education and starting some volunteering. Then there followed a period when he started to quarrel with his fellow residents and the complaints (both from and about him) arose on a regular basis. Through attending weekly meetings with staff and the Principal of Wytham Hall, it soon became apparent that there was another side to this young man. He then stopped attending the meetings offering various excuses or re-arranging the dates. His fellow residents raised several concerns about him using cannabis; he stopped paying his service charge and did not respond to phone calls or letters. Several warning letters were issued until it became clear that he had abandoned the property. For several weeks after his departure, various men kept coming to seek him, claiming he owed them a lot of money.

■ GREAT CHAPEL STREET REPORT 2013

The Great Chapel Street Medical Centre has been associated with Wytham Hall through shared staff and many of the homeless people who have been admitted to Wytham Hall were first encountered at Great Chapel Street. Indeed the original concept of Wytham Hall had been driven by the needs of the homeless patients seen at the Medical Centre. Dr Philip Reid and Mr Robert Bolus continue to provide that continuity in staffing.

Great Chapel Street continues to provide the core services of: General practitioner, practice nurse, mental health and drug assessment and advice by a community psychiatric nurse with two support sessions by a consultant psychiatrist. In addition we offer counselling, dentistry and podiatry as well as advice on housing, benefits and immigration. Services are largely offered on a no-appointment basis to maximise accessibility and we are open to all homeless people although will only register permanently Westminster-connected people. We work closely with other medical services for homeless people in Westminster.

It is noticeable that the profile of our patients has changed such that 2/3rds of new registrations are now non-UK nationals and the commonest interpreting service we use is Romanian.

The main developments to the service in the last year have been:

Joining the local Clinical Commissioning Group (CCG), which has led to more focus on provision of care to homeless people, particularly as they are high users of services and have greater needs. We have had to look closely at the frequent A&E attenders and try to help them find solutions to their problems in other more appropriate ways. We meet with

the A&E staff at St Thomas' regularly about the frequent attenders.

We run weekly multidisciplinary meetings with all members of the team and we are joined by colleagues from other services to discuss and coordinate the care of the more complex patients.

We have developed our outreach service, which is mainly led by one nurse, who accompanies the outreach teams to the most vulnerable clients. This is difficult work as the individuals can remain very attached to their highly dangerous lifestyles but it has led to some relative successes through dogged networking and pursuit of those who determine funding for longer term care, rehabilitation etc. Two staff also increased the outreach during the winter and attended a number of cold weather shelters and temporary night shelters to assess the clients as well as support the staff.

We have begun a once monthly clinic for patients with HIV and hepatitis C who don't manage to regularly attend the mainstream services. The goal is to be able to assess and treat these individuals without them needing to go to hospital at all.

It has always been difficult to get our patients to successfully attend outpatients at hospital or indeed any appointment anywhere. Our statistics show that regularly less than 50% attend their booked appointments. The CCG has funded the organisation, Groundswell, to train ex-homeless people to act as mentors and engage our patients and take them to appointments. This is in its early stage but is promising.

Dr Philip Reid

■ STUDENT FEEDBACK

Wytham Hall: Student Selected Component (SSC)

Student Feedback 2012/13

Year 1 (5 students)

Organisation: 4* Very Good, 1* Good

Learning Experience: 5* Very Good

COMMENTS:

Wytham Hall had organised for 2 clients to come and speak to us about their experiences of homelessness but unfortunately only one of these clients arrived. I didn't feel that this was a problem at all because we had longer to speak to the one client and also Bridget, the manager of the service, spent a lot of time telling us about the service, and also answering any questions that we had. We also had the opportunity to speak to Dr El-Kabir, who discussed with us how important communication skills are, and with us explored the different insights that you can gain into a person's situation by really listening to what they say and the manner in which someone speaks. We also talked about the fact that treating the material nature of homelessness is not the best method because people will just fall back into the same circle of events.

It was very well organised. They had lined up 2 service users for us to interview (although unfortunately one didn't turn up) and then we were able to discuss our thoughts with the founder of the organisation, Dr El-Kabir. He was one of the most insightful people I've met, and talking to him made me think about the reasons for homelessness in a completely new way.

This was an absolutely amazing service. The venue was incredible, and the staff were kind although busy, but the whole time was incredibly well organised. I was able to speak to two very different and interesting service users, and also had a long talk with the founder, which turned into quite a philosophical debate and went on long past 5! If there was only one improvement I would have liked to have seen one of the accommodations, but this is minor.

During this visit, I was given an introduction about Wytham Hall by Andrew, our community visit coordinator. Thereafter, before I met with the clients, I was given a tour around the residence. After the introduction and short tour, we had the opportunity to meet with two clients. (This student went on to write in detail about how much s/he learnt from the visit).

On arrival at the place, the receptionist on duty spoke to us about the history of Wytham Hall, brought us on a tour around the entire facility and along the way, explained to us how Wytham Hall aims to provide shelter for homeless people and rebuild their confidence, thus enabling them to get back on track with their lives. Afterwards, he arranged for us to interview two of the residents at Wytham Hall. This visit deeply impacted me in that I was fully acquainted with homeless people for the first time and got to know about how difficult and miserable it is lacking a proper shelter to rest in. I have also realised how the existence of services such as Wytham Hall will drastically improve the lives of these homeless people, as by giving them a safe and comfortable residence, it provides a starting point for them to move on to a brighter future.

I enjoyed my visit to Wytham Hall the most, as it was such an incredible place to go to with really amazing people to speak to, and it is something I wouldn't have been able to do otherwise ... please never lose that placement!

Student Report - Harriet Ball

In February 2013 I came to Wytham Hall for a 2 week placement as an optional part of my final year medical studies. I wasn't sure quite what to expect, but it turned out to be amongst the most rewarding of my experiences as a student. My aims were to find out about homelessness services, and how doctors can contribute to these, and to understand a little more about the factors that can lead to homelessness.

I was warmly welcomed into Wytham Hall and learned about services and support provided both there and at Great Chapel St GP surgery. I felt privileged to gain an insight into so many people's lives and struggles over such a short space of time. I was able to meet and talk with residents at Wytham Hall, and work with a diverse range of professionals at GCS (including a podiatrist and a dentist as well as GPs), and I particularly enjoyed participating in a night outreach project. I realised how crucial it was that these services be well co-ordinated, enabling staff and service users to focus on addressing the key problems in hand, rather than passing the buck (and the patient) to separate services run in other locations by different organisations - with further access barriers to be overcome.

Overall, I gained a great deal from my placement. I would highly recommend it to others who have an interest in the social contributions to disease, and the links between mental health and other aspects of health.



■ 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 2012 - 2013

Trusts and Statutory Bodies: Individuals:

The Sidbury Trust

Mr. D. Derx

Mrs. A. Hougie

Lord Brooke of Sutton Mandeville Dr. J. Crown

Mr. and Mrs. E. Jupp

Dr. D. El Kabir

Mr. B. Guastella

Mr. C. Littmoden

Ms. S. Willson

C. Tubb

Her Grace Frances,
Duchess of Rutland

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

CIT Photocopiers; Andrews Computers;
Atis Real Weatheralls Surveyors; The
Benefits Agency; Broadway; Browns
Chemist 195 Shirland Road; Citizens
Advice Bureau; Central North West
London CMHT; Chubb; The Connection at
St. Martin's; E K Mechanicals; Eurogard;
Foundations Great Chapel Street Medical
Centre; Homeless Persons Unit
Westminster, House of St Barnabas;
Hungerford Drug Project; Joint
Homelessness Team; Kensington &
Chelsea Primary Care Trust; Central
London Law Centre; MAC Electrical
Services; The Metropolitan Police; MIND;
The Passage Day Centre; St Mary's
Hospital; St Mungo's Outreach;
Paddington Law Centre; The Rough

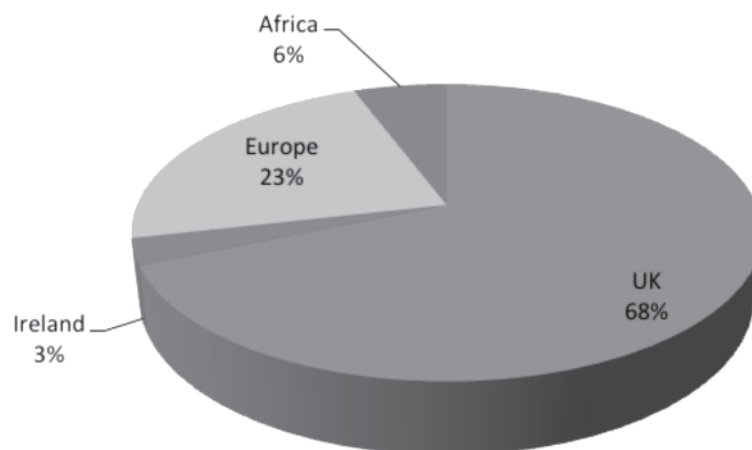
Sleeping Team; Two Step; Salvation Army;
Supporting People; Turning Point; WAMH;
Waterview Centre; West End CMHT; West
London Day Centre; Westminster Drug &
Alcohol Project; Westminster Housing
Benefit; Westminster Social Services;
Westminster Transport Department;
Westminster Volunteer Bureau; Wharfside
Clinic; Westminster Adult Education
Service; Woodfield Road Health Centre;
West London Day Centre; Lookahead
(Bayswater Hostel); North Westminster
Assessment and Brief Treatment Team;
Mind (Support 4 Volunteering); Central
London County Courts

■ STATISTICS ON ADMISSIONS TO WYTHAM HALL

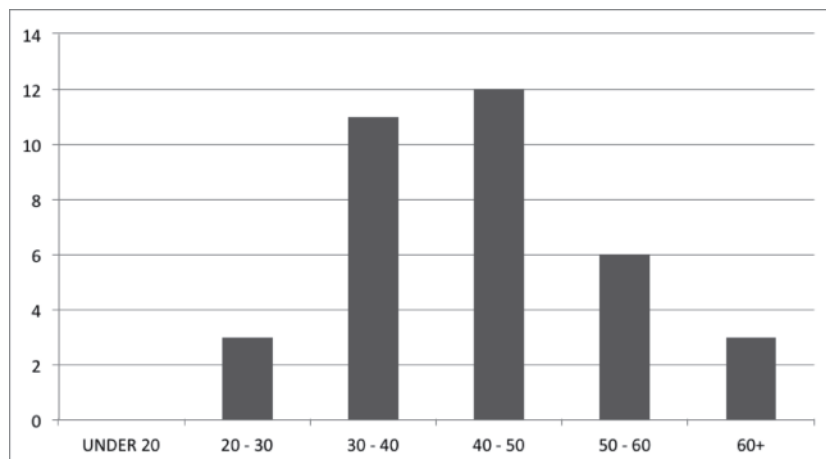
APRIL 1st 2010 - MARCH 31st 2013

| | 2010-2011 | 2011-2012 | 2012-2013 |
|------------------------------|-------------|-------------|-------------|
| Total number of residents: | 28 | 33 | 35 |
| Male: | 28 | 31 | 30 |
| Female: | 0 | 2 | 5 |
| Average age: | 41.64 years | 42.58 years | 43.40 years |
| Average length of stay: | 1026 days | 931 days | 843 days |
| Figure of overall occupancy: | 95% | 92% | 94% |

PLACE OF BIRTH



AGE



CASH FLOW STATEMENT YEAR ENDED 31st MARCH 2013

| | 2013 | | 2012 | |
|--|-------------|----------|-------------|---------|
| | £ | £ | £ | £ |
| Net Cash/inflow (outflow) from operating activities | | 14,828 | | 30,036 |
| Returns on investments and servicing of finance | | | | |
| Interest received | 5,552 | | 2,683 | |
| Interest paid | - | | - | |
| | <hr/> | | <hr/> | |
| Net cash inflow from returns on investments and servicing of finance | | 5,552 | | 2,683 |
| Investing activities | | | | |
| Payments to acquire tangible fixed assets | (20,229) | | (1,966) | |
| | <hr/> | | <hr/> | |
| Net cash inflow/(outflow) from investing activities | | (20,229) | | (1,966) |
| | | <hr/> | | <hr/> |
| Net cash inflow/ (outflow) before financing | | 151 | | 30,753 |
| Financing | | | | |
| Donations received | 6,990 | | 9,349 | |
| | <hr/> | | <hr/> | |
| Net cash inflow from financing | | 6,990 | | 9,349 |
| | | <hr/> | | <hr/> |
| Increase in cash and cash equivalents | | 7,141 | | 40,102 |
| | | <hr/> | | <hr/> |

Full accounts are available on request

INCOME AND EXPENDITURE ACCOUNT YEAR ENDED 31st MARCH 2013

| | 2013 | | 2012 | |
|---|-------|---------|-------|---------|
| | £ | £ | £ | £ |
| Income | | 273,783 | | 261,251 |
| Direct and administrative expenses | | 282,806 | | 261,308 |
| | | <hr/> | | <hr/> |
| Operating surplus/(loss) | | (9,023) | | (57) |
| Interest receivable | 5,552 | | 2683 | |
| Interest payable | - | | - | |
| | <hr/> | 5,552 | <hr/> | 2683 |
| | | <hr/> | | <hr/> |
| Surplus/(deficit) of income over expenditure for the year | | (3,471) | | 2626 |
| Donations | 6,990 | | 9349 | |
| Capital donations | - | | - | |
| Transferred to reserves | | | | |
| Profit on sale of fixed assets | - | | | |
| | <hr/> | 6,990 | <hr/> | 9,349 |
| | | <hr/> | | <hr/> |
| Surplus/(deficit) for the financial year | | 3,519 | | 11,973 |
| | | ===== | | ===== |

About suffering they were never wrong,
 The Old Masters: how well they understood
 Its human position; how it takes place
 While someone else is eating or opening a window or just walking dully along;
 How, when the aged are reverently, passionately waiting
 For the miraculous birth, there always must be
 Children who did not specially want it to happen, skating
 On a pond at the edge of the wood:
 They never forgot
 That even the dreadful martyrdom must run its course
 Anyhow in a corner, some untidy spot
 Where the dogs go on with their doggy life and the torturer's horse
 Scratches its innocent behind on a tree.
 In Breughel's Icarus, for instance: how everything turns away
 Quite leisurely from the disaster; the plowman may
 Have heard the splash, the forsaken cry,
 But for him it was not an important failure; the sun shone
 As it had to on the white legs disappearing into the green
 Water; and the expensive delicate ship that must have seen
 Something amazing, a boy falling out of the sky,
 Had somewhere to get to and sailed calmly on.

W.H. Auden
Musée des Beaux Arts (1940)



Landscape with the Fall of Icarus by Pieter Bruegel



MAKING A REFERRAL

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

We provide support and housing for people with a history of homelessness in Westminster, who are not actively using alcohol or drugs. Support may include counselling, educational courses, but also simply living in a more settled way with the support of staff and other residents.

Not for long term housing alone.

www.wythamhall.co.uk

How to find us

