



Royal Hospital for Neuro-disability

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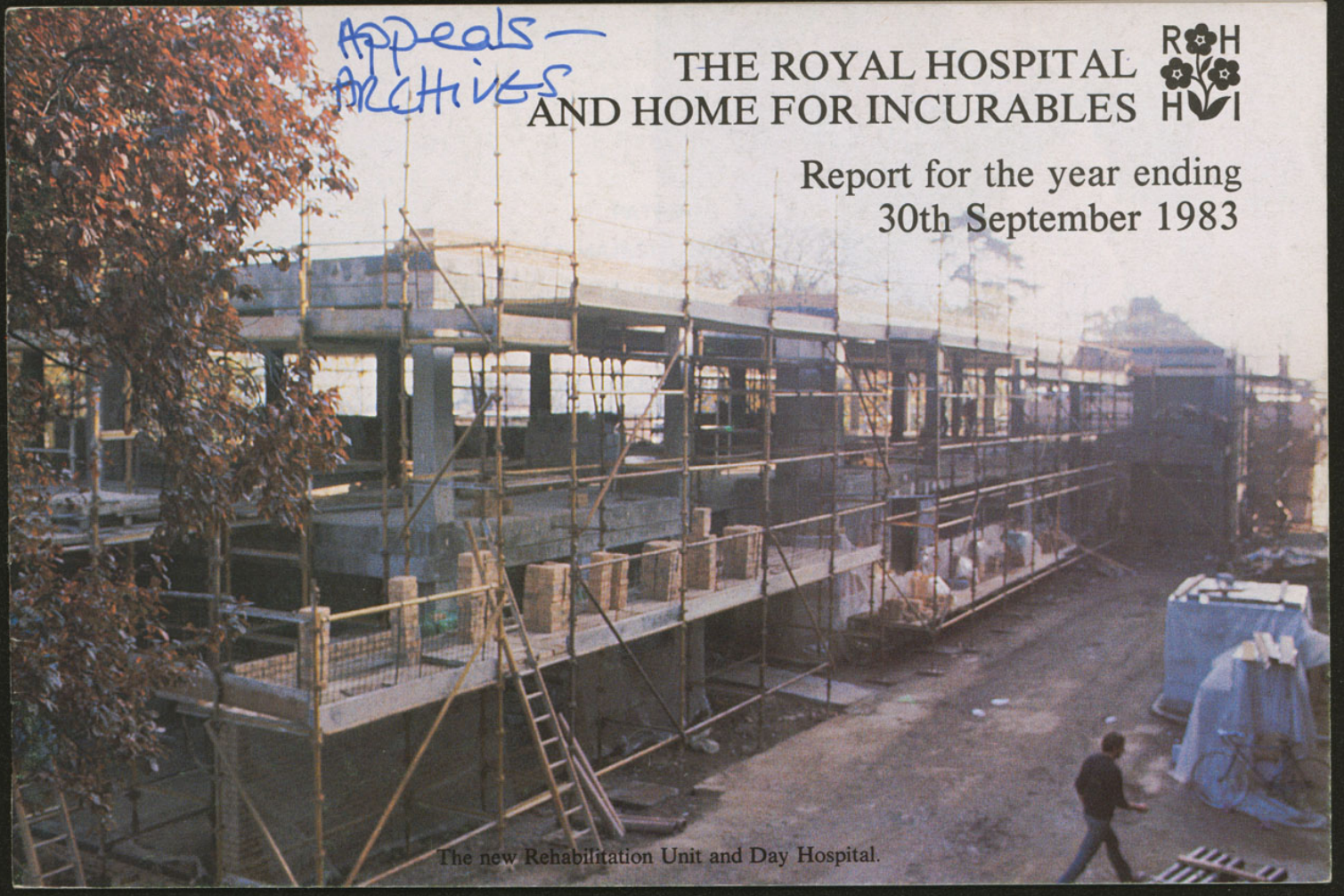
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THE ROYAL HOSPITAL  
AND HOME FOR INCURABLES



Report for the year ending  
30th September 1983

The new Rehabilitation Unit and Day Hospital.





Her Majesty Queen Elizabeth The Queen Mother has been a Royal Patron of the RHHI for over sixty years.

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The Main Hospital viewed from the West.

### Our Role

A Charity must constantly review its functions in a changing world. This is particularly true at the present time when we need to reassess the position of residential care in an environment which is giving increasing emphasis to community care and the integration of disabled people into the normal living of the community. Many of the disabled people who used to be admitted to the RHHI are now supported at home or in small units, but residential care continues to be an overriding need for the very severely disabled, particularly for those with multiple problems involving not only physical but also sensory disabement and speech difficulties, and for the increasing number of people with combined brain damage and physical impairment. Their long term care continues to be the principal role of the RHHI. Our aim for such residents is to modify the hospital environment and to provide a human, secure, and relaxed home, with the provision of numerous inside and outside interests. At the same time we provide specialised resources of Remedial Therapy to prevent deterioration in physical condition and for psychological and educational programmes.

We are convinced, however, that a static concept of care is not enough. Disabement and the relationship

of the disabled person to the world is not static. Disability fluctuates, remits, and relapses. Handicap relates to the individual's environment and needs, whilst age, housing, work, relatives, and a host of other factors, influence need and are not constant.

### A Dynamic Approach

The International Year of Disabled People emphasised the need to integrate disabled people into the community, and the European Economic Community's Bureau for Action in Favour of Disabled People has promoted a number of special studies in the wake of the International Year. We are involved in these discussions and particularly with the concept of "The Dynamic Role of Residential Institutions in an Integrating Society". Our view of residential care is that there should be fluidity of movement between long term care, remedial care on a shorter term basis, day hospital care, and community care. This dynamic concept of care has determined the direction both of our plans for the future and of our progress this year.



The Rehabilitation Unit in Peacock Ward.

### The Development Trust for the Young Disabled

The Development Trust, under the chairmanship of Mr Jack van Zwanenberg, has underwritten not only our new building projects, but also many of our research programmes. Since the Trust's inception, it has been responsible for raising over £2 million for these projects. This has been a notable achievement, which has enabled the Board of Management to move quickly in the implementation of its objectives. The results have been impressive:

- Building of Chatsworth Wing 1976**  
Independent Living Unit for young disabled people.
- Upgrading of the Main Hospital 1977**  
Refurbishment of the Hospital wards.
- Building of Alexandra Wing 1980**  
Rehabilitation, research and teaching.
- Refurbishment of Occupational Therapy accommodation and a new Pharmacy 1981**  
Modernisation and expansion of facilities with teaching potential.
- Extensions to John Howard House at Brighton 1982**  
Facilities for rehabilitation and day hospital care.

The average time from conception to commissioning of these projects has been as little as two years.

Our latest project, which was discussed at the AGM last year, is now well on the way to completion, and there can be no better example of the marvellous support we continue to receive from the Development Trust.

### New Rehabilitation Unit

Our concept of care has been crystalized in this new project, which will provide five functions in one building.

#### In-Patient Medium Term Remedial Therapy

A special area for in-patient remedial therapy has been shown to be a requirement by pilot studies in our present accommodation. A rehabilitation programme has been carried out for the last nine months using part of the present accommodation in Chatsworth Wing with the enthusiastic consent of one of the major donors. It has shown the viability and need for such a programme, but it has been at the expense of present and much needed resources. The new building will contain a twenty bed in-patient Remedial Therapy Unit for short and medium term stay, adjacent to the present extensive rehabilitation facilities in Alexandra Wing.



Printing in the Occupational Therapy Department.



Occupational Therapy in the Communications Room.

#### Day Hospital

Day Hospital facilities have been available on a limited scale for several years at the Main Hospital and more recently at John Howard House. These have proved their worth, but, again, they require specialised facilities. The new building will contain a Day Hospital with the capacity to take a hundred day attendances a week.

#### Rehabilitation Engineering

Considerable developments, particularly in wheelchair design, have taken place in our Rehabilitation Engineering Department since Alexandra Wing was opened at the end of 1980, and a service is provided for both in-patients and out-patients on a national basis. However, we have been limited by lack of space; the new building will fill this gap by providing a suitable area for Rehabilitation Engineering and Assessment.

#### Gymnasium

The present Gymnasium doubles as a Lecture Theatre. The rapid expansion of rehabilitation services and the teaching programmes has caused a conflict of priorities. This problem will be solved by the provision of a Remedial Gymnasium, which can also be used by disabled people for sports and games.

#### Functional Assessment Unit

The intermediate stage — the transition from hospital to community care — is always difficult. The Functional Assessment Unit in the new building will provide an independent living flat with a bedroom, living room, kitchen, and bathroom so that a disabled person, or couple, can be assessed and given practice in home conditions, if necessary on a short term residential basis.

#### A Full Spectrum of Care

The new building was conceived in 1982, work started on site in April 1983, and it will be in full operation by the end of 1984. It will have cost us £1.3 million, but the RHHI will then have the resources to provide a much more complete spectrum of care for physically disabled people.

This report has emphasised the future and our plans to meet the changing needs for residential care; we now turn to progress during this year.

## Staff and Patients

The staff have risen magnificently to the challenge of the additional work load which has been caused by a record bed occupancy and our new concept of care. Seventeen additional trained nurses have been appointed during the year to match the heavy demands on the nursing services. The number of day patient attendances at Putney and Brighton has also increased, as have the patient attendances in the remedial therapy departments which now average two thousand each week.

At the same time patients' activities have expanded, both in and outside the Hospital, and particular attention has been given to the latter; examples are groups for riding, swimming and archery. Innovations within the Hospital include the appointment of a music therapist and drama classes, which are proving most successful.

The provision for disabled children as out-patients has been a happy development. They have access to the Haslemere Hydrotherapy Pool at Putney, and wheelchair and assessment advice is provided nationally for children with the close co-operation of the Handicapped Children's Aid Committee.

The Board warmly congratulates Mr John Doherty, our Foreman Painter, on his award of the British Empire Medal in the Birthday Honours List in recognition of his 27 years' devoted service to the Hospital.

## Teaching

Our new concept of care has stimulated considerable interest. We have had visits from a wide range of people and disciplines, which provide useful reactions to and information about the validity of our ideas. Teaching is a regular feature in all departments both for our own staff and for external students. Seminars on a national scale are well attended. We are taking part in a post-graduate course with the Royal Society of Medicine Section of Rehabilitation. Members of our staff have numerous publications and papers to their credit and three have received special commendations from the Institution of Electrical Engineers in a prize competition.

Two further courses approved by the English National Board Nurse Further Education Department have been run by the Hospital. Two members of the nursing staff have received travelling scholarships awarded by BP; one carried out a project to set up a holiday exchange of patients with similar hospitals in Holland, and the other spent 3 months working in hospitals in Israel. One member of the physiotherapy staff has completed a sabbatical year at Surrey University to obtain her MSc degree.



Some keen members of the Gardening Club.

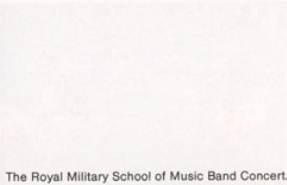
A sunny day on the South Terrace.







A Case Conference in the Library.



The Royal Military School of Music Band Concert.



Speech Therapy in the Hydrotherapy Pool.

The Haslemere Hydrotherapy Pool.





Rehabilitation patients.

### Research

The research programmes are well established. A copy of the International Journal of Man-Machine Studies was devoted to Automated Psychological Testing.

The Rehabilitation Engineering Department has a wide range of activities. In addition to meeting the needs of our own patients, who almost all use wheelchairs, the Department has made an increasing number of special chairs for the Handicapped Children's Aid Committee, the DHSS and other outside requests. Three projects deserve special mention: an elevating seat unit to raise a disabled person from a sitting to a standing position, an improved version of the "Easy Rider" scooter, and a patient trolley for general hospital use.

A research project on nurse/patient dependency and multi-disciplinary education has been started. This could have important implications on staffing, quality of care, and resource allocation in residential homes and hospitals for disabled people.

Emphasis has been given to liaison with outside authorities and organisations. We have joint programmes

with the Roehampton Institute of Higher Education, ILEA and the Queen Elizabeth Foundation. A student from Brunel University is taking part in our Psychological Research and a student from the Engineering Department of Imperial College is working on a wheelchair development project. We have received considerable support from the British Technology Group in the engineering projects.

### Board of Management

We are very sad to report that two of our longest serving members died this year. Mrs G. I. Habershon had been a wonderful friend to the Hospital and had served it with distinction for 23 years, including over five years as Vice-Chairman of the Board. Mr J. F. Burrell had been our Solicitor for many years and had been an enthusiastic Board Member and Trustee of the Development Trust for the seven years since his retirement.



Two new types of vehicle introduced this year for patients' outings.



With great regret we have received the resignations of Miss U. A. Thomas and Mr Leo Seymour, who will both be much missed after their marvellous records of service to this Charity.

The Honourable John Astor and Mr T. P. Durie are welcome newcomers to the Board of Management, as are Dr Joan Slack and Dr R. E. Irvine to the Research Advisory Committee.

#### **Authorised Visitors and Voluntary Helpers**

The Hospital owes an immense debt to all those who generously give their time to visiting patients, and to helping with the work of the Hospital.

#### **County Committees and Supporters**

The Garden Party at Putney raised a record sum and was much enjoyed by everyone. The Country Market at

John Howard House, which could not be held last year because of the building improvements there, was also a great success.

Funds have been raised this year in a great variety of ways: A Dance at Dryburgh House, a Fashion Show at the All England Club, Musical Evenings, Cookery Demonstrations, Car Boot Sales, Luncheons with Guest Speakers, Bridge Drives, Coffee Mornings and numerous sponsored events, including Parachute Jumps, Swims, Jogs, Cycle Rides, and Roller Skating. Donations have increased by over a quarter, which is remarkable in the present financial climate, and we are particularly grateful to all those who now subscribe by Deed of Covenant, which provides so much additional benefit to the Charity.

#### **Legacies**

Legacies this year have amounted to £356,562. They provide financial backing for our new developments and more will be needed over future years to meet the capital cost of the new Rehabilitation Unit and Day Hospital. All who read this Report can help by suggesting



Physiotherapy at John Howard House.



A barbecue at John Howard House.

to their friends that legacy gifts to a Registered Charity like the RHHI and the Development Trust for the Young Disabled need not affect their main personal beneficiaries. A legacy, coming as it does at the end of a life, will do so much to help others who are disabled and would help our patients to have a longer, happier and more active life.

#### Renewed Thanks

In concluding their Report to the Governors, the Board of Management express their sincere appreciation to all our staff and to all those who have helped the Royal Hospital and Home this year. No Charity can hope to flourish without such devotion and generosity. The marvellous support, which we continue to receive from every side, encourages and inspires us to redouble our efforts in advancing and increasing the Charity's work for those for whom at present there is no known cure.

#### Finance

Details of this year's income and expenditure and the balance sheet are set out at the end of this Report.

C G VAUGHAN-LEE  
Chairman of the Board of Management

All Governors of the RHHI are reminded that they are invited to attend the Annual General Meeting in the Conference Room in Alexandra Wing at the Hospital at 2.30 p.m. on Monday 19th March 1984. The meeting will be presided over by our President, His Grace The Duke of Devonshire.

**Income and Expenditure Account  
for the year ended 30 September 1983**

1982	NOTE	GENERAL FUND	RESEARCH FUND	OTHER FUNDS	TOTAL FUNDS
£		£	£	£	£
<b>INCOME</b>					
145,571		151,978	63,895	19,162	235,035
3,402,591		3,808,416			3,808,416
229,440	2	174,009	89,999	27,391	271,399
		15,088		(15,088)	
70,789		86,895	1,374		88,269
<u>3,848,391</u>		<u>4,226,386</u>	<u>135,268</u>	<u>31,465</u>	<u>4,403,119</u>
<b>EXPENDITURE</b>					
205,813		223,446			223,446
Cr. 56,170		Cr. 6,740			Cr. 6,740
500,722	4	317,950	18,200		336,150
2,830,008	4	3,029,203	64,439	5,902	3,099,542
126,683	4	146,584	39,501		191,987
126,498	4	133,808	4,079		137,887
208,237		262,107			262,107
99,999	4	120,105	9,049		129,154
512		1,618			1,618
6,892				7,109	7,109
<u>3,851,794</u>		<u>4,228,081</u>	<u>135,268</u>	<u>13,011</u>	<u>4,376,360</u>
( 3,403)		8,305		18,454	26,759

**Balance Sheet  
as at 30 September 1983**

1982	NOTE	GENERAL FUND	RESEARCH FUND	OTHER FUNDS	TOTAL FUNDS
£		£	£	£	£
<b>ASSETS EMPLOYED</b>					
18,895					27,760
<b>Fixed Assets</b>					
Motor Vehicles at cost less depreciation	1				27,760
Investments					
At cost Market Value (£2,981,050)	5	1,050,275	752,637	228,542	2,031,454
<b>Current Assets</b>					
Sundry Debtors		462,261	42,997		505,258
Stock of consumable stores		84,535			84,535
Cash on deposit		648,111	720	13,500	662,331
Cash at bank and on hand		74,300	117,638	9,907	197,845
<u>1,109,470</u>		<u>1,212,335</u>	<u>43,717</u>	<u>23,407</u>	<u>1,279,459</u>
<b>Current Liabilities</b>					
Sundry Creditors		636,286	26,089	20	662,395
Loans		3,000			3,000
<u>645,244</u>		<u>639,286</u>	<u>26,089</u>	<u>20</u>	<u>665,395</u>
<b>NET CURRENT ASSETS</b>		<b>573,049</b>	<b>17,628</b>	<b>23,387</b>	<b>614,064</b>
<u>2,320,662</u>		<u>1,821,084</u>	<u>770,265</u>	<u>251,929</u>	<u>2,643,278</u>
<b>FINANCED BY</b>					
Balances on Funds at 1.10.82		1,311,754	776,432	233,475	2,321,661
Legacies		358,562			358,562
Gifts of Capital - Development Trust	6	170,000			170,000
Gain (Loss) on sale or redemption of investments		119,729	1,118		120,847
<u>2,348,675</u>		<u>1,958,045</u>	<u>776,550</u>	<u>233,475</u>	<u>2,968,070</u>
( 324,613)		( 345,286)	( 6,285)		( 351,571)
Deduct: Capital Expenditure written off	7 & 8				
Surplus (deficit) for year transferred from Income and Expenditure		8,305		18,454	26,759
<u>2,320,662</u>		<u>1,821,084</u>	<u>770,265</u>	<u>251,929</u>	<u>2,643,278</u>

We have examined the above Balance Sheet dated 30 September 1983 and the attached Income and Expenditure Account for the year to that date with the books and vouchers relating thereto, which are in accordance therewith. We have verified the whole of the investments and bank balances as provided by Bye-Law 33 of the Royal Charter granted on 20 June 1919.

5 December 1983

HELMORE, HELMORE & CO., Chartered Accountants  
35/37 Grosvenor Gardens, London SW1 0BY

Notes on the Accounts

1. ACCOUNTING POLICIES:

- 1.1 Income is taken to the credit of the revenue account on an accruals basis.  
 1.2 Expenditure is charged to the revenue account on an accruals basis inclusive of VAT with the exception of expenditure on Dispensary, Hospital Shop, and Cafeteria which are charged net of VAT.  
 1.3 Amounts received from legacies are allocated to capital account.  
 1.4 Expenditure on buildings, furnishings and equipment is written off in the year in which the expenditure is incurred. The Balance Sheet therefore shows no value for hospital premises, land, nurses' homes, staff housing, furniture and equipment.  
 1.5 Donated equipment and supplies are included within the appropriate expenditure at full cost to the donor, and within donations.  
 1.6 Fixed Assets comprises ambulances and vans which are capitalised and depreciated straight-line over the estimated working life.

2. INVESTMENT INCOME

	1983	1982
	£	£
is shown after deducting investment Banker's fees as follows:		
General Fund	2,070	1,863
Research Fund	962	919
	<u>3,052</u>	<u>2,782</u>

3. DISPENSARY

Income for the year	276,532	277,352
Less: Cost of prescriptions	269,752	251,162
	<u>Cr. 6,740</u>	<u>Cr. 56,170</u>

4. SALARIES AND WAGES are included in other sections for the following:

Dispensary (under Dispensary)	74,244	60,101
Laundry (under Domestic)	71,487	66,137
Grounds Maintenance (under Miscellaneous)	12,559	11,871
Administration	113,718	106,738
Appeals and Publicity	48,576	41,990
	<u>325,642</u>	<u>288,437</u>

5. INVESTMENTS

	1983		1982	
	Book Value	Market Value	Book Value	Market Value
	£	£	£	£
General	1,020,275	1,708,688	938,292	1,423,976
Research	782,637	917,206	674,159	714,940
Endowment	88,992	113,459	88,882	94,313
Pensioners	91,724	146,210	88,272	117,728
Lopes	1,772	2,091	1,772	2,076
Robinson Trust	25,717	72,827	25,717	57,585
Patients' Amenities	5,062	5,997	5,062	5,943
Sr. John Howard Trust	15,385	16,974	15,385	16,843
	<u>2,001,454</u>	<u>2,981,050</u>	<u>1,837,541</u>	<u>2,432,906</u>

6. THE DEVELOPMENT TRUST FOR THE YOUNG DISABLED

The Development Trust for the Young Disabled has made the following gifts to the Royal Hospital and Home for incurables:

— Contribution towards the cost of construction of the Rehabilitation Unit and Day Hospital	170,000
— Donations to the General Fund	8,959
— Donations to the Research Fund	50,942
	<u>230,901</u>

7. CAPITAL EXPENDITURE WRITTEN OFF

	General Fund	Research Fund
	£	£
Construction of Alexandre Wing		6,285
Construction of the Rehabilitation Unit and Day Hospital	345,266	

8. CAPITAL COMMITMENT

The estimated amount outstanding, including consultants' fees, on the contract for the construction and equipping of the Rehabilitation Unit and Day Hospital

	1,005,634
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9. OTHER FUNDS

	Endowment	Pensioners	Lopes Chaplain's Stipend Endowment	Robinson Trust	Patients Amenities	Sr. John Howard Trust	Total
	£	£	£	£	£	£	£
<b>ASSETS EMPLOYED</b>							
Investments at cost	88,882	91,724	1,772	25,717	5,062	15,385	228,542
Current Assets							
Cash on Deposit					13,500		13,500
Cash at Bank and on Hand	5,000	3,247					9,907
	<u>5,000</u>	<u>3,247</u>			<u>15,160</u>		<u>23,407</u>
Current Liabilities							
Sundry Creditors					20		20
					<u>20</u>		<u>20</u>
Net Current Assets	5,000	3,247			15,140		23,387
	<u>93,882</u>	<u>94,971</u>	<u>1,772</u>	<u>25,717</u>	<u>20,202</u>	<u>15,385</u>	<u>251,929</u>
<b>FINANCED BY</b>							
Balances on Funds at 1.10.1982	93,882	91,857	1,772	25,717	5,062	15,385	233,475
Surplus (deficit) for year transferred							18,454
	<u>93,882</u>	<u>94,971</u>	<u>1,772</u>	<u>25,717</u>	<u>20,202</u>	<u>15,385</u>	<u>251,929</u>
<b>INCOME</b>							
Donations						19,162	19,162
Investment Income	7,837	11,423	237	5,144	880	1,870	27,391
— Transferred to General Fund	(7,837)			(5,144)		(1,870)	(15,051)
		<u>11,423</u>			<u>20,042</u>		<u>31,465</u>
<b>EXPENDITURE</b>							
Miscellaneous expenses			1,000			4,902	5,902
Pensioners and Grants to Patients living at home			7,109				7,109
		<u>8,109</u>				<u>4,902</u>	<u>13,011</u>
Surplus (deficit) for year transferred		3,314			15,140		18,454



Occupational Therapists fitting a splint.



Lunchtime in Coombs Ward.



Choir Practice in the Assembly Room.

**CODICIL FOR EXISTING WILL**

There have been many changes in Personal Estate Duty and you may care to add a Codicil to your Existing Will so that the Royal Hospital and Home for Incurables can benefit without affecting the other beneficiaries. Through your help we will be able to further our aim of the well-being, independence, and medical care for severely disabled people. Please consult your Solicitor (or we will be happy to do this for you) and consider this typical Codicil.

I ..... of .....  
 ..... a .....

**HEREBY DECLARE** this to be the ..... Codicil to my Will which bears date the ..... day of ..... One thousand nine hundred and .....

1. **I GIVE** to the Royal Hospital and Home for Incurables, West Hill, Putney, London, SW15 3SW the sum of (in words) ..... (£ .....) free of duty **AND I DECLARE** that the receipt of the Treasurer or his Representative shall be a good and sufficient discharge for the same.

2. **IN** all other respects **I CONFIRM** my said Will.

**IN WITNESS** whereof I have hereunto set my hand this ..... day of ..... One thousand nine hundred and .....

**SIGNED** by the said ..... as the )  
 ..... Codicil to his/her Will which bears date the ..... )  
 day of ..... 19 ..... in the presence of us both together )  
 who at his/her request in his/her presence and in the presence )  
 of each other have hereunto subscribed our names as )  
 witnesses.

Signature of First Witness ..... Signature of Second Witness .....  
 Address ..... Address .....  
 Occupation ..... Occupation .....

**Legacy**

"I give to THE ROYAL HOSPITAL AND HOME FOR INCURABLES, WEST HILL, PUTNEY, LONDON SW15 3SW the sum of £ ..... free of duty. And I direct that the receipt of the Treasurer of his Representative shall be a good and sufficient discharge to my Executors."

**Residue**

"I give all my property not otherwise disposed of by this my Will subject to and after payment of my funeral and testamentary expenses to THE ROYAL HOSPITAL AND HOME FOR INCURABLES, WEST HILL, PUTNEY, LONDON, SW15 3SW, and I direct etc. (as above)."



John Howard House, our Hospital at Brighton for thirty-four long stay and rehabilitation patients.