

# Cheshire Smile

The Quarterly Magazine of the Cheshire Homes Price 10p

Winter 1975/6



Greenacres Cheshire Home  
Sutton Coldfield



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The Quarterly Magazine of the Cheshire Homes

Vol. 21 No. 4 Winter 1975/76

*Acting Editors:* 'R.R.'

*Hon. Consultant Medical Editor:* Dr B. Kiernander

*Secretary:* Mrs E. M. Bosly

*Hon. Treasurer:* Mr W. G. Taylor

*Editorial and Business Office:* Cheshire Smile, Greenacres,  
39 Vesey Road, Sutton Coldfield, Warwicks B73 5NR. Tel. 021-355 4209

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represent the official view of the Cheshire Foundation, but it is

our aim to encourage free expression of ideas.

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**Cover:** Artist's impression of Greenacres Cheshire Home,  
Sutton Coldfield.



# The Chairman's Page

I have just returned from an intensive tour of the Homes in India, Bangladesh and Kenya (I hasten to add that it did not cost the Foundation anything but was sponsored by generous friends in industry). In just over five weeks I visited 15 out of the 16 occupied Homes in India; the new Dacca Home in Bangladesh; and three Homes in Kenya. It was hard work, involving 29 flights and a lot of surface travel in 36 days; but it was worth every minute, a most encouraging and interesting tour.

One of the things that immediately strikes one is that the overseas Homes are so similar in many ways to those in the U.K. and so dissimilar in many others. Among the similarities are that the primary theme is the same in all the Homes all over the world, i.e. the care of people who are physically or mentally handicapped to a greater or less degree, without consideration of race, nationality, age or means; and that that care is undertaken by local people for local people out of largely locally raised funds.

The dissimilarity that immediately strikes one is in the standard of material living. Of course this reflects the same difference existing between the standards prevalent among all the people of our Eastern and Central Regions not just the Cheshire residents and those we enjoy in this country, in spite of all our current difficulties. On my return I found that our Vice Chairman had already by coincidence made this the subject of the Chairman's page he wrote in my absence for the last issue of the *Smile*. But I make no apologies for reverting to it.

There is one particular statistic that really struck me forcibly. The cost of maintaining a resident in an Indian Cheshire Home for a year is exactly the same as that in a U.K. home for a week – yes, not a month, a week! It must make one wonder whether we cannot do more to help bridge the very small gap that divides their guaranteed survival from their financial collapse. Furthermore, the people in the Homes abroad are always alive with interest to know what goes on in Homes in the U.K., what sort of people live there, whether they have the same interests and problems and how they set about them.

The obvious answer lies in pairing of Homes between the U.K. and the Overseas Regions. The number in each is much the same, it would be a happy day if every U.K. Home had a twin abroad (I realise that quite a number already have but the



proportion is still small). It is not just a question of financial support, although this is always welcome. Just as valuable is correspondence, exchange of pictures and photographs and general sharing of human relationships and interests.

I leave it up to all of you. Maggie Toner, our Overseas Secretary, stands ready to hear from you. I wish you all a truly happy and peaceful New Year; perhaps you can help our overseas people to find one also.

Sincerely

Christopher Farley-Stones

Chairman.

## STOP PRESS

HEARTIEST CONGRATULATIONS TO THOSE MODERN BRINGERS OF PEACE AND BUILDERS OF CONCORDE, Mr HENRY MARKING, C.B.E., M.C., MANAGING DIRECTOR BRITISH AIRWAYS AND VICE-CHAIRMAN OF THE LEONARD CHESHIRE FOUNDATION, TOGETHER WITH ALL THOSE RESPONSIBLE FOR THE TREMENDOUS SUCCESS OF THE INAUGURAL FLIGHT OF CONCORDE TO BAHRAIN ON 21st JANUARY; ALSO TO OUR FOUNDER, GROUP CAPTAIN LEONARD CHESHIRE, V.C., ONE OF THE V.I.Ps. ON THAT FLIGHT, WHO SAID THAT HE WAS IN FAVOUR OF ALL TECHNOLOGICAL ADVANCE BECAUSE IN THE END THE BENEFITS ALWAYS OUTWEIGH THE DISADVANTAGES.



## Forward

Now more than at any time in the Foundation's history great changes are taking place and Homes and Management Committees are being asked and expected to comply with a growing flood of requirements not only from Headquarters but from Local and Central Government Departments as well.

Standards of care are continually being improved, as well they should. Qualified Residential Care Officers will very soon be the norm in all Homes, and the recommendations made by the Personal Social Services Committee in its report 'Living and Working in Residential Homes' referred to on another page of this issue, are indicative of what is to come.

At the same time Homes in the U.K. and the residents in them should think of themselves perhaps more as a part of the whole, and when one reads the words of our Chairman in this issue, and those of the Vice Chairman, Henry Marking in the last one, one wonders how we can be so complacent and so demanding for ourselves.

So few of the U.K. Homes have an active, close and continuing involvement with an Overseas Home, that a 'twinning' programme would appear to be an excellent and opportune exercise for 1976.

To the Overseas Home we would make an earnest plea to encourage such links by replying when overtures are made by U.K. Homes, and keep *The Smile* informed about what is happening in their Homes.

The series of frontcover pen sketches of Cheshire Homes is being extended to cover the overseas Homes and items for this pleasant 'rogues gallery' are required from each of these. Ideally they should be accompanied by a short description of the history and development of the Home, and notes upon life in it as seen by a resident and by a member of the management team. It is not surprising that these sometimes form naturally contrasting themes, and highlight differences in outlook and in the needs of day to day living, and draw pictures that have something to say to us all.

*The Smile* exists to highlight such differences, as well as forming part of the tenuous link between Homes, and to inform – and hopefully sometimes entertain – members of the family no less than the wider world. Above all it should reflect the hopes and passions and often indomitable spirit of so many Residents.

It is now nearly three years since the present honorary editors, 'R.R.' stepped in to bridge what was thought at the time would be a short gap. The gap has widened. It is important that it does not widen also to become a gap in understanding, and *The Smile* badly needs a Resident editor. It is a demanding task, exciting too, happily appropriate to the physically disabled, and one which our experience suggests is infinitely worth while; surely a challenge that no literate, compassionate resident who wants also to be effective – some would say dedicated – can fail to meet.

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## B.R. provides special travel facilities for the disabled

British Rail's new Mk III first class coaches incorporate at the end of each saloon a removable seat and table which, when removed, allow the position to be occupied by a disabled passenger in a wheelchair. The position is close to the entrance vestibule and toilet.

The facility has been incorporated in first class saloons due to limited space in second class coaches, so British Rail are charging second class ordinary single fares for each journey made for both the disabled passenger and accompanying attendant.

The new Mk. III coaches have already been introduced on some London (Euston Station)–Liverpool/Manchester services and will go into service on the Euston-Glasgow route later this year.

For a disabled passenger and accompanying attendant who will still have to travel in the guard's van, British Rail now offer tickets at child/half rate of second class ordinary single fare for each journey made.

Disabled passengers planning to travel in either the new Mk. III coaches or in guards' vans are advised to give the earliest possible advice – not less than 48 hours and 72 hours at weekends – to the Area Manager at the departure station. A permit must still be obtained from departure stations for travel in guards' vans.



# A Living Choice

Talk given by Eda Topliss at the Annual Conference

In the beginning there was family care for the disabled individual, or none at all. And in the harsher economic climate of previous centuries, many families could not survive even when all members were fit to work. Destitution broke up many families, reducing even the able-bodied to vagrants and beggars. In these times a disabled family member was an overwhelming burden and one which few families could shoulder. Small wonder that the early infirmaries attached to monasteries, and later the workhouses, the Poor Law and the local authority hospitals, should have been crowded with the frail, the old and the disabled, whose families simply could not care for them.

It was in this context that residential care for disabled individuals developed after the second world war. It was a tremendous advance. It offered many disabled people a better alternative. That was the vision of Le Court – to give disabled people the opportunity to live to a fuller capacity than was possible either as an over-burdensome member of a family struggling desperately to survive or as a forgotten case number in an infirmary.

However, since the 1940s, Britain has become much more prosperous despite successive economic crises. Families have greater security, thanks to better wages and the system of pensions and supplementary benefits, and they are better able than ever before to contain a disabled member. This has altered the relative attractiveness of residential care, which is increasingly seen only as a last resort for when family care for one reason or another, is not available. Families probably always did want to keep their disabled members within the home circle but often simply could not. Now, though seldom easy, it is possible and in the vast majority of cases disabled individuals remain with their families without the risk of the entire unit being destitute and destroyed.

The whole emphasis of modern thinking is towards community care, and not only for the disabled. Children without a family are nowadays fostered wherever possible rather than placed in Children's Homes. There are also fostering schemes for the elderly, and for ex-mental patients. For all these groups the economy of community care and the advantages, to the individuals concerned of being in their own homes rather than in residential care, are increasingly



stressed. We are increasingly ready to acknowledge that people who grow old, or become disabled, do not change their whole nature as a result, and they, like the rest of our society, see family life and independent private households as normal and desirable.

At the moment, however, the emphasis on community care is still more of an ambition than a reality, because it is not, for the most part, *community* care but *family* care. Adequate community support for the family with a disabled, or elderly member, has not been developed possibly because, if it really was adequate, it would cease to be a cheap alternative to institutional provision. For a disabled individual, the choice is still too often only that between heavy dependence on his family or residential care. There is practically nothing in between.

The Home Help service, good though it is in many respects, is concentrated on the elderly person who lives alone. The family that has the care of an old or handicapped member is left to cope unaided in most cases, as surveys have shown, because there aren't enough Home Helps to meet the need. Day centres or occupational centres for the disabled are far too few to accommodate even the minority who, when interviewed, expressed a wish to attend, and very few disabled individuals have a holiday arranged for them by the Local Authority, which could in theory enlarge the horizons of the disabled person and give his family a rest from care. Much more community support is needed for families caring for disabled members if this way of



life is to be satisfactory for all concerned and not a heavy burden which finally exhausts the stamina of the family. It is easy to reproach local authorities for not expanding their services to meet their obligations under the Chronically Sick and Disabled Persons Act 1970, but in fact the financial constraints have made such expansion impossible without denuding other services. Moreover, local authorities have had their resources increasingly pre-empted in making good the income inadequacies of the needy in their area by rate relief and rent rebates, leaving less money available to expand the personal social services.

In any case, perhaps we think too readily of providing standardized services to meet the needs of people who have very individual requirements. Wouldn't it be better to concentrate instead on ensuring a really adequate disablement income? This would leave with the disabled person and his family the choice as to how he will meet his needs and the priority he attaches to satisfying them. To expand the personal social services would force disabled people to accept a priority of needs decided for them, and a form of meeting them over which they have no control: in other words, it deprives them of areas of choice in the matter of living. Their disability denies them many choices which we take for granted, such as whether to walk, or swim or go upstairs in a bus, so community concern should surely be expressed as concern to preserve as many areas of choice as possible for the disabled person.

One great source of difficulty for physically disabled people is lack of suitable accommodation, and although the Department of the Environment encourages local housing authorities to build homes designed for disabled occupants, progress has been minimal. There is still virtually no sheltered accommodation for disabled, providing a flat or a bungalow in a complex which includes a warden. Many people look admiringly at provision in other countries such as the Swedish Fokus system, or the Dutch village of Het Dorp, or the Danish Collective Houses. It must be remembered, however, that these other countries only accommodate a minority of their disabled citizens in such purpose-built dwellings. Even in Britain, some disabled people live in special village communities, or purpose-built flats modelled on the Fokus system, or, with the development in South London in which the Cheshire Foundation collaborated, in something akin to the Collective House. There is room for more of all these types of provision. No one system of accommodation can meet the needs of all disabled people but each has its points. The village community for example has been described unfavourably as a ghetto, but it does enable the environment, not just the individual dwelling, to be planned carefully to suit severely disabled. It also facilitates the

provision of personal help to those who need it, because of their geographical concentration. But it limits employment opportunities because the surrounding firms can absorb only a small proportion of the disabled, and the village communities in both Holland and Britain have found themselves unable to cope with the very severely disabled person who needs a lot of attention. The Collective House, with its fully staffed care unit incorporated, can cope with heavily disabled people, but this very fact means there is rather more emphasis on disabilities than capabilities, which is discouraging and unhelpful for other rather lesser handicapped people. The Fokus system offers a high degree of integration of disabled with able-bodied people, but in Sweden 70% of the accommodation was designed to take single people, and those with static disabilities predominated throughout the accommodation. The family with a disabled member, particularly one with a progressive disease, was not really catered for.

Perhaps the big disadvantage of all these schemes is that they involve rented accommodation when nearly everyone in Britain who can possibly manage it, prefers owner occupation. The reasons are obvious in these inflationary days, and disabled people are often reluctant to sell their house, however unsuitable, to take a rented dwelling. After all, a house offers some measure of security to surviving dependents. A rented home offers only a continuing financial obligation. Moreover, in the case of accommodation purpose-built for disabled people, evicting the able-bodied surviving family members would cause them tremendous hardship but leaving the tenancy with them means the accommodation is no longer available to disabled people. All these schemes, therefore, valuable as they are, will not have great appeal to families in owner occupation who have a disabled member. For these people, there needs to be some provision to enable ownership rights to be preserved – perhaps by a form of local authority "requisitioning" of the property which they could use to house people on their housing list, returning the property in good order to the able-bodied survivors when required. Side by side with some such scheme as above, more help is needed for owner occupiers with disability in the family to make the necessary adaptation to their dwelling. At the moment the bulk of local authority expenditure on adaptations goes in installing electric or gas fires in place of open grates, and handrails by baths or up staircases. These are quite minor adjustments which can help a large number of slightly disabled people but can do little to help the seriously disabled. Major adaptations can be very expensive, and are not readily undertaken by local authorities since the property can be sold by the owner on the open market and lost completely as far as use by disabled persons is concerned.



It might be possible to introduce low interest loans for major adaptations, or grants financing the necessary work only on condition that the property when sold is offered first, at current market prices, to the agency financing the alterations. This agency, in effect, is often likely to be the local authority, so such measures would inevitably raise the political issue of whether it is desirable to increase the stock of municipal housing.

Expanding the range of accommodation provision for disabled people in some or all the ways mentioned would enable them to choose, from a variety of possibilities, the particular form of accommodation and support which best met their needs. There is a corollary to this which must be faced. Those disabled by progressive diseases would probably find their increasing physical dependence involved a progression through the forms of accommodation, from being in an unsupported private household, to some sort of special housing, then on to a housing complex offering some help with personal care, and possibly ultimately to residential care such as the Cheshire Homes were originally developed to provide. Every move through the accommodation range would be a sad recognition of increasing disability, but at least at each stage and for as long as possible, such disabled people would be able to preserve as much independence as possible choosing when and in what degree they would change their living conditions. Disablement is a tragedy. Making good accommodation provision can only avoid adding to it, but cannot completely overcome it.

The aim of future accommodation provision for disabled people should be to create a variety of forms of dwellings offering differing degrees of care and service. It is the disabled person and his family who best know the sort of home which will do most to enable him to use his residual capabilities to the utmost. Ideally, he and his family would consider carefully the range of accommodation provision available and select that type of dwelling unit which best suited his current individual circumstances.

It is the ideal, and it is nowhere near actualization. Voluntary agencies, such as the Cheshire Homes, the Multiple Sclerosis Society and Habinteg Housing Association are already playing their part, in collaboration with housing authorities, in developing some pioneer schemes across this range of accommodation provision. One hopes that these projects will flourish and expand, increasing enormously the opportunities for disabled people to choose their living conditions. But for the present, and, given the present economic climate, one suspects, for some years to come, the only real choice for many disabled people will continue to be that between

living with the family with minimal or no community help, and residential care.

*It is therefore important to ensure that life in residential care affords residents a maximum of choice and independence. This is very easy to say and to accept wholeheartedly in principle, but very difficult in practice. Affording people choice and independence means affording them the opportunities to make mistakes, to harm themselves and to be disruptive.*

This dilemma exists in much wider settings than that of residential care. The problem of democracy, for example, is to reconcile freedom of participative choice in policy making with effective government. We still haven't found the perfect answer to this dilemma and perhaps we never shall, but as a nation we have remained unimpressed, to say the least, by the various alternatives to democratic rule tried out by other nations, and we continue doggedly to adjust, and compromise, and improvise, in order to reconcile individual freedom with efficient organization of society.

Residential care in this country exists within the democratic framework of Britain. People entering it do so with expectations developed in the context of the wider society. They may have little choice at the moment but to accept residential care, when the family can no longer cope, but they do not therefore expect to give up all choice about their way of life – even to the most charitable and benign of heads of Homes or Management Committees. They do not, in other words, seek total care from the institutions they enter, even if they are almost totally dependent physically on others for their bodily needs.

This means that residents want to retain the choice, for example, of when to get up and when to go to bed. For those who can attend to this function unaided, this ought to present no problems. True, if a person gets up so late that the prepared breakfast has been served and cleared away, the late riser will go without. He may choose to do so. He may also choose to equip himself with an electric kettle, some instant coffee, powdered milk and biscuits to make good the deficiency. He may be unsteady with the kettle and run the risk of scalding himself, but he may choose to do it none the less, just as he would in his own home. From those who need personal assistance in getting up or going to bed, their freedom of choice will be limited by the availability of the necessary staff. The availability of staff for this purpose will be conditioned by their numbers, and also by the priority attached to their various duties – bathing residents, preparing an evening drink, tidying up and checking the linen. These priorities should be a matter for decision by the residents, who may choose to forego some aspect of care in order to make staff



available for some other function that the residents value more.

On a deeper level comes the matter of personal relationships. A disabled person in residential care may have many physical limitations but he still has his emotional needs and strengths. He still needs and can enjoy close personal relationships. The development of such relationships needs privacy – the courting couple monopolizing the parlour is a generally recognized phenomenon – and residential care should afford and respect opportunities for privacy. A “not to be disturbed” sign on a door should be accepted and obeyed, or a simple latch installed which can be fastened on the inside of a resident’s room. Of course there is a risk of a disabled person locking himself in, or labelling his room out of bounds, and then finding he needs help and cannot reach the alarm bell. It is a risk, but he may choose to take it in order to have privacy and he should be able to make that choice. Some of the attachments formed between people in residential care may be extra-marital, promiscuous, or homosexual. That is true of some relationships outside residential care, too. The disabled person who enters residential care does not thereby expect to surrender moral choice, nor is there any reason that he should do so. Married, and cohabitating couples, ought to be as accepted a part of the residential care scene as they are in society generally, where housing authorities, tax laws, and other financial provisions recognize common-law unions. In this connection, it is worth considering the policy of single rooms. These are undoubtedly welcomed by most residents, but if designed in such an inflexible way as to be unable to accommodate couples, they will at the same time reduce the opportunities for choice. If rooms can be built to serve either as a single bed-sitter or as a double bedroom with a second room as a double sitting room, there will be the flexibility necessary to adapt to residents’ needs, and it doesn’t sound an insuperable architectural problem.

One other issue that is highlighted by the development of units with single rooms (although it exists in other units as well) is that of holiday residents. One of the ways of helping the family still caring for a disabled member at home, is to take the disabled person into a Cheshire Home for a couple of weeks thus enabling his family to have a rest. As many Cheshire Homes have their full complement of residents, such holiday visitors can often only be accommodated if one of the permanent dwellers goes away for a time. Such a practice minimises the degree to which a resident can feel his single room is his home, since as soon as he is away, his little domain is taken over by a stranger, his possessions can be misused or accidentally damaged, or bundled up in the storeroom out of the way. Once again, this

would seem to be a policy decision which the residents should make: are they willing to sacrifice their sense of having a permanent base of their own for the sake of helping the unknown family of a disabled person in the community to have a holiday? They ought, in other words, to be able to choose the extent to which, and the ways in which, they will help other people, just as I have the choice whether, and on what terms, to make my home available for other people to use while I am away.

I have given here just a few concrete examples of areas of choice which can, and properly should, be preserved for disabled people entering residential care. There are many other areas that come easily to mind. Basically it must be recognized that these people do not need, and do not want, total care. They are not ill, anti-social or mentally incapable and they want only that minimum of essential physical attention which they cannot provide for themselves, while retaining the maximum freedom of choice in as many areas of living as possible. Their freedom will be constrained by the laws of the land, economics, and normal social considerations, as is true for all of us, and also by their physical limitations. They do not need to be further constrained by over-protective or intrusive institutional rules and procedures.

The ethos needed by staff in residential care is not so much that of caring for the total person, as in nursing, but rather that of support and informed advice on how to function independently as well as possible, as in social work. People who are sick are willing to surrender themselves totally to the doctor and nurse in return for being made whole again. The fit but disabled person can look for no such return and is unwilling to surrender any more of himself than he absolutely must to survive. He is, however, limited physically in what he can do, where he can go, the contacts he can make, and the facilities he can command. A good caring service in a residential unit would provide physical care as and when needed by residents, within the limits of available staff and resources and according to priorities agreed by residents; and an enabling service, suggesting possible services and facilities, and suggesting and making contacts at the request of residents. It is a tremendously demanding role for the staff – much more so than the total care pattern of nursing, which is physically tiring but unambiguous. A supportive enabling role will be just as physically tiring and fraught with uncertainty always and in every area as to whether the service offered is too intrusive, or not helpful enough. The consolations are that this uncertainty can be minimised if it is shared, both with other staff at the unit, with other units, and above all with the residents; and that the job well done is so very worth while.



# BOOK REVIEWS

## And The Morrow is Theirs



by Sue Ryder, O.B.E.

Here is the moving story, as seen through her own eyes, of Sue Ryder who throughout her life has had a deep concern and over-riding compassion for the under-privileged. As she herself says, she feels she was born with a sixth sense giving her an instinctive sense to atmosphere.

As a child she recalls visiting the slums of Leeds where the poverty and deprivation made a lasting impression on her mind.

It is clear throughout the book that in her personality and very presence she possesses that wonderful gift of being instantly recognised and accepted as a friend in whom absolute trust can be placed.

Her wartime experiences in F.A.N.Y. with the S.O.E. (Special Operations Executive) as one of the Bods of which the Resistance formed an essential part are particularly significant. Her tremendous courage and faith cannot fail to bring

admiration and amazement to the reader, but her mission did not cease when the war in Europe ended, and her vivid descriptions of the extermination and prison camps which she visited are extremely poignant.

Her meeting with our Founder, Group Captain Leonard Cheshire, their marriage and the setting up of the Ryder-Cheshire Mission for the Relief of Suffering are all dealt with in full detail. The book is a 'Must' for anyone connected in any way with either of the Foundations, and it should be included on the book-stall of every Home in the U.K. and those Overseas.

Sue Ryder's work is a living memorial for all ages, and this most compelling story must surely become a classic that will be read over and over again throughout every country in the world.

Published by The Burleigh Press, Bristol.  
Paperback £1.25. Hardback £3.50.

## 'Provision for the Disabled'

by Eda Topliss

(Basil Blackwell & Martin Robertson £2.25)

This recently published paper-back to which the author referred in her address to the Annual Conference is a very well written and easily readable digest of the history and concept of the acceptance, treatment and provision made by society for the disabled. It is clear that the author has had a wide and practical experience of the subject, and that she writes from this experience. She makes a wide-ranging examination of the social facilities which exist to help disabled people live as full lives as possible. The uneven development of these facilities and the gaps in provision are pointed out and related to the prevailing social value of economic rationality. It is not, however, simply a factual listing of available services.

The book argues that to be disabled is to be disadvantaged in the competition for the good things of this world. Like other disadvantaged groups in society such as the elderly or the socially deprived, the disabled are helped to overcome their handicap when, and to the degree that, society as a whole expects to derive a net benefit from the expenditure on such welfare measures.

Such a rational and calculative view of welfare may seem the absolute antithesis of the warm heated philanthropy which disablement merits. It is nonetheless the approach this book recommends, just because it offers the best hope of successfully implementing welfare measures.

It should be found as interesting and helpful to the layman as to the professional social worker and it certainly deserves a place on the bookshelves or the library of every Cheshire Home.



## Recommendations for Residential Care

Recommendations made by the Personal Social Services Council in its report *Living and Working in Residential Homes*\* include—

National guide lines should be set requiring minimum physical provision and professional care in line with the principles stated in the report, together with a review of present registration and inspection procedures, and requiring the registration of *all* residential homes.

Positive requirement on local authorities to devise a comprehensive development plan for residential care and to improve joint planning between social services departments, housing, health and educational authorities, in consultation with voluntary and private bodies, with particular reference to admission procedures.

Drawing up of a clearly-worded contract between the providing authority and the resident or his representative, for the mutual protection of the home and the resident, to safeguard reasonable rights of tenure, to identify the services provided by the home and any conditions to be observed by the resident.

Regular review and assessment, at least every six months, of the individual resident's treatment, with his or her active participation wherever possible.

Access should be made available to staff, residents and their families at all key policy-making levels to express their views.

Notification to the Department of Health and Social Security, by the beginning of 1977, of a complaints procedure adopted by every local authority and private or voluntary body providing residential care.

Regular review by each home of its objectives, the changing needs of individual residents and of the residents as a group.

Requirement on all homes to provide a written prospectus.

Review by local authorities of their use of resources for staff training and development, and to the availability of local training facilities to staff in the voluntary and private sectors.

Carrying out of an attitudinal study of residents and staff in different kinds of homes, regarding existing practice and standards.

National forum for the regular exchange of ideas and the promotion of high standards of residential care.

Promotion of greater public understanding and awareness of the nature and purpose of residential care.

\* The report is available, price 65p, from Personal Social Services Council, Brook House, 2-16 Torrington Place, London WC1E 7HN.

## Hopeful view of multiple sclerosis

*Multiple sclerosis*. Office of Health Economics, London, W1. 1975. 25p.

This useful pamphlet reviews in simple terms the whole question and treatment of multiple sclerosis before looking at the cost and social aspects of it. It starts on the cover with Charcot's hopeful words of 1872, 'It is not rare to observe complete remissions which show hope for a positive cure' and continues in this vein, saying at one point that research work may in the not too distant future reveal that 'the different aspects of multiple sclerosis are a great deal less complex than is implied by the relatively confused state of our current knowledge'. The encouragement for this view comes from research work on the significance of fatty acids and measles virus.

Meanwhile the importance of individual adjustment to the particular physical limitations of each patient is stressed. In the absence of any reliable curative treatment rehabilitation assumes a greater importance and particularly occupational therapy if physiotherapy is really to be regarded as a placebo, unable to alleviate the fundamental problems and only of partial value. Assistance in providing aids and gadgets and diversional interests are of importance but, the pamphlet feels, there may well be a lack of appreciation about the social and psychological problems.

N.W.

(With acknowledgements to 'Occupational Therapy'.

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The revised edition of **Care of Disabled People in Britain**,\* compiled by the Central Office of Information, is an illustrated 59 page booklet crammed with useful information about the disabled. It has the advantage of being written in plain straightforward language.

It touches upon such a variety of topics as medical rehabilitation and training, social security and personal social services.

'About one quarter of all impaired people aged 16 to 64', it says, 'suffer from diseases of the bones and organs of movement, particularly the various forms of arthritis which is the most frequent cause of impairment and of most degrees of handicap. Taking severely and appreciably handicapped men and women together, about one quarter of them suffering from arthritis'.

\* *Care of Disabled People in Britain*, HMSO, £1.20 (by post £1.29½ from PO Box 569, London SE1 9NH).



# SPORT AND LEISURE

## FOR THE DISABLED

*Report by Mrs Janet Elliott, Physiotherapist, who with Mrs Nora Fox, resident at Oaklands, represented the Cheshire Homes at the Seminar on Motivation of Life, Sports and Leisure for Severely Disabled People.*

After an uneventful journey by road, air and rail, Mrs Nora Fox and I arrived safely in Arnhem on Sunday, 31st August, ready to participate in the seminar beginning on Monday, 1st September.

We settled into the hotel with some 25 other participants from Australia, Japan, South Africa, France, Holland, Denmark, Norway and the United Kingdom. Altogether 17 nations were represented by 270 participants – 80 of which were disabled. This was the first seminar of its kind to be held with the express purpose of exchanging ideas and views on the subject of sport and leisure and to promote a wider understanding of the needs and aspirations of disabled people.

The seminar was held at Het Dorp in Arnhem – a village purpose built for physically handicapped inhabitants. This is unique and is in fact a village in itself with shops, library, etc., with recreational facilities. Each resident has his own front door and letter box and each apartment has been fitted to the needs of the individual handicapped person. The apartments are in groups with nine residents under the care of an attendant. If ever they need assistance, they can ring but they are encouraged to be as independent as possible. The speed with which the electric wheelchairs dashed along the "village" roads had to be seen to be believed. These elaborate vehicles are allowed off the grounds and needing a licence, they take the place of our invalid cars.

At the official opening of the Seminar by the chairman, Derek Lancaster-Gaye, a telegram of welcome from the Dutch prime minister and Government was read. We were told by Mr Lancaster-Gaye to expect a full and informative programme. It was to be a gathering of people with the opportunity for all to have a say. Throughout the seminar, I was amazed at how freely the participants expressed their thoughts – all I must add, in perfect English.

The first day's theme was the quality of life. What has it to offer? and the motivation of life – is it reality or Utopia? Of the three speakers, William Hargreaves, himself disabled, seemed to catch the imagination of all the participants with

his reminiscences of being disabled and at the receiving end. He said his chief difficulty had been in accepting the fact that he would be handicapped for life. Once he came to accept this, he then had to fight "Mr Average Citizen" to identify as Bill Hargreaves and not just as a spastic. He thought the best way to educate the public in their reaction to disabled, was for them to see disabled out and about enjoying themselves. He also said, 'Try to motivate your disabled friends to have an interest in something other than themselves'. Group discussions ended the day's lectures and that evening we were received at a Civic Reception at Arnhem Town Hall by the College of Burgemeester en Wethouders.

The second morning was again spent at Het Dorp where a group of 17 handicapped people from Arnhem gave their personal views on motivation of life. The discussion leader, herself able bodied, introduced the 17 and explained that they had begun meeting regularly in July and had shared new experiences and discoveries amongst themselves since then. By intricate use of the microphone, the 17 were each able to participate and very openly gave their inner thoughts and views. Apart from other obvious difficulties, each of them had mastered English. Here are a few of the many philosophical statements which were made during this most interesting discussion:

'Here I am and tomorrow I will be different from today'.

'Let tomorrow be tomorrow and discover what this day has to offer'.

'I don't want ideas pressed on me. I want to find out for myself'.

'I am mentally as alert as any other; it is only a physical disability'.

'Motivation is meeting people: family, friends or people I see just once'.

'I live for myself and others. I try to find the best way to function in society'.

'I have the feeling I don't belong – I am not taken seriously and not treated as a grown up'.

After the 17 has spoken, several other disabled delegates had the opportunity to speak. An Indian gentleman had this to say, 'We want to play our own role in society – we have to struggle against a society that underestimates us. There is not enough publicity about our problems; only to those who know already'. From a Finnish lady, 'We have the rights but not the possibilities'.

After such forthright speeches there was indeed much "Food for thought" and discussion amongst ourselves as we went to Papendal Sports Centre for the afternoon. This is the National Sports Centre which, as a training centre, offers every facility for specific training of physical culture and athletics. In addition to the enormous sports halls, there are plenty of outdoor facilities – tennis



courts, five playing fields, a hard pitch, a running track with training centre for field events, a camping centre and a road system suitable for cycle training. It was in one of the sports halls that we assembled to watch exhibitions by disabled persons in Keep Fit, Basketball, Judo, Wheelchair Football, Funnel Ball and Wheelchair Handball. During the afternoon, Her Royal Highness Princess Beatrix, graced us with her presence and in fact, such was her interest that she overstayed the scheduled 1½ hour visit.

On Wednesday there was a change of theme, to sport. The day's events took place at Papendal, where in the morning we heard "A Philosophy of Sport" by Dr Gazeau of France. He pointed out that sport was a means of leisure and need not necessarily be of a competitive nature. It is an activity to promote useful function of limbs and he hoped to promote mass participation as for able bodied. Talking on Sport for the Handicapped, Dr Vermeer of the Netherlands stated that no activity meant no initiative and he thought the disabled needed to be steered towards movement and activation. 'THAT he is doing is more important than WHAT he is doing'. International Athletic events for disabled followed and Mrs Fox entered for throwing the club and throwing the medicine ball. The evening was festive and memorable with a superb buffet prepared by chefs of Het Dorp. The long table groaned under the weight of appetizing meats and salads and it seemed a shame to disturb the perfection. In fact, we all went past it once just to admire and anticipate. Whilst we enjoyed our cold buffet, we were entertained by Muvedo – which means musical association of Het Dorp. Muvedo was founded in 1969 by ten inhabitants of Het Dorp who started making music with great enthusiasm. This group has now grown into a successful orchestra of mouth organs, electric organ, guitar, mandolin and rhythmic and percussion instruments with 40 members. The rousing tunes had the audience captivated and we were loath to let them go after several encores. Then followed Roland Guy, a Belgian singer and Robert Kreis and Peter Stoops in an intimate review.

A more relaxing day followed on Thursday with creative work the theme. Throughout the seminar we had been very aware of the lack of windows in the lecture hall. Instead, the walls were covered with all types of creative work – collages, paintings, carvings, prints, photographs, candles, etc. all having been produced by residents of Het Dorp. This was our opportunity to examine the art exhibits at close quarters and also to see the artists at work. We were given a conducted tour of Het Dorp, seeing the village from the inside with the chance to question the residents. Mrs Fox and I had been eagerly awaiting the demonstration of wheelchair dancing and this lived up to

expectations and also gave us the opportunity to join in and be coached alongside the "professionals".

A conducted tour of Johanna Stichting concluded the day's activities. This is a totally equipped rehabilitation centre for children from 0–21 years. Situated next to Het Dorp, Johanna Stichting trains physically handicapped children to become useful members of society. It takes children from all over Holland, looks after them, gives them medical treatment, tuition and vocational training. There are a total of 184 beds divided into family units of 8.

The last morning of the seminar was devoted to sexual lectures by three speakers. Also two Swedish sex films were shown and it seemed unfortunate that on the last day, several participants left the room as a protest against the films, one of which seemed out of context with the lecture. Reports of discussion groups followed in the afternoon and finally the Seminar was closed by Derek Lancaster-Gaye and Dr Klapwijk, the medical director of Johanna Stichting.

This had indeed been a hard week's work but from expressions on the faces of all participants from headmasters to a time keeper in a tin mine, from psychologists to artists, they had found it well worth attending. There would be much to think about in the months to follow. New friends had been made and new ideas discussed. Mrs Fox and I are indeed grateful to have been given the opportunity to participate in the 1975 Seminar.



Speaking at a discussion on British Agricultural Policy and the Hungry World, organised by the World Development Movement during the summer, Sir Henry Plumb, President of the National Farmers Union said:

*'The urgent problem of hunger among vast numbers of the world's population calls for concerted and large scale international action that ensures help to those who need it most. Eating less in the developed countries does not affect the basic problem.'*



# LETTERS TO THE EDITOR

*From Dorothy Whiting, Holme Lodge.*

Having read the Summer *Cheshire Smile* I would like to comment on the article by the Union of the Physically Impaired. I think it was quite out of proportion the statements that homes not institutions as referred to are the ultimate human scrapheaps. I think the union needs to get its facts right and speak the truth. We should be in a very poor way without these Homes and there is much to be grateful for.

I would also like to comment on Louis Battye's article "To Live and be Free". In all honesty I think there is still a wide gulf between the disabled and the man in the street. Being treated as an individual with the right to speak one's mind is important, and being independent to a certain degree. However, I find in life that whatever comes our way our dependence on God is what matters not our own independence. To try to do the best we can with our disability is the right way. Self pity is destructive but most of us need understanding. In any place of abode what matters is the love, kindness, understanding and compassion we show each other. Life would be an empty and meaningless existence if independence means going it alone and doing what you want to do always. We all need God in our life and one another. The strong also should help the weak. There is always a basic need for people whether in Cheshire Homes or anywhere else to discuss and air their views. That is the way to a better understanding of what life is about. Let us also be grateful for the existence of Cheshire Homes, and the help they give in so many ways when it is needed. There are so many people in the world today who are without homes and comforts at all. Jesus Christ was born in a stable, perhaps we should allow our thoughts to dwell on that sometimes, and count our blessings more.

*From Barbara Elsdale, New Milton, Hants.*

After a recent visit to South Africa, during which my cousin, Dr Peter Henson showed me the Chatsworth and Queensborough Cheshire Homes in Durban, I am enclosing a year's subscription to *Smile*, please.

It was a deeply moving experience for me to meet this charming Indian and his companions at Chatsworth. Their natural courtesy over-rides the terrible afflictions with which they have to live, and through them there is indeed a lesson to be learned by many of us who are fortunate enough to be in full possession of our faculties. In this smaller Home there are only seven residents at present, I believe; the atmosphere is homely, intimate, and full of kindness.

The Queensborough Home, for Europeans, is on a much larger scale, the more able residents taking a practical part in the running of the Home, which gives the impression of a pleasant guest-house in its beautiful surroundings, with a swimming pool, and a bowling green which was shortly to be opened. Each resident occupies a bed-sitting room which reflects the individuality and hobbies of its owner; one of these rooms held a large collection of classical records, and another one of many books showing catholic tastes! The resident of longest standing, Aida, is a personality in her own right, with pictures, ornaments and flowers from which she takes her simple pleasures.

The kindness, patience and understanding which are necessary and indeed vital for the care of these brave, afflicted people can be given to only a few dedicated, courageous and unselfish workers. For me, the experience of visiting these two Homes was a very humble one.

With every good wish.

## Extract from a letter to the G.C.

4th November, 1975

Dear Leonard,

Over the last few months I have not been at all well and as a final stage of convalescence my wife and I went on the *Blenheim* to the Canary Islands.

Whilst on board we met Mary Rogers from the Greathouse Home, Wiltshire, and her nurse companion Alice Hounslow and I thought you might like to know that Mary was almost the life and soul of the party and everyone admired her courage and fortitude even going on coach tours around the various islands.

At the fancy dress dance she came as a flower girl and Alice as "Bewitched, bothered and bewildered". I acquired a photograph of both of them which you might consider suitable for putting in the *Cheshire Smile*.

Although they did not win first prize the applause they received from all the passengers was tremendous and the captain himself referred to the Cheshire Homes when giving the prizes.

With kind regards.

Yours sincerely,

*See photo on page 35*



# Covenant Schemes

By Mr P. West

*Fund-raising Adviser to the Foundation.*

Many Homes with an otherwise very good record of fund-raising have a disappointingly low return on tax rebate from covenants. Talking to the various committees concerned, it would appear that the main problem is that people are reluctant to enter into a commitment over a period when it is so difficult to foresee what will happen in the future. There are also some mistaken notions about the exact nature of covenants.

We are far from being alone in encountering this problem and one way of tackling it is to give potential donors some facts about covenants in a form which is not too involved.

A detailed manual is being prepared on various aspects of covenants — law, administration and practice. It will be produced in sections so that a Home with a specific problem can have all the relevant information without having to wade through a mass of material which is irrelevant to its needs.

The following draft could form the basis of a leaflet, which could be used on its own or in conjunction with the very well-produced folders which are available on request from Market Mews.

**A covenant is, in effect, the best way in which most people in this country are able to give to a charity such as a Cheshire Home with tax relief.**

**At present, if you enter into a covenant, each £65 which you pay becomes £100 in the hands of the charity as it is able to claim back the £35 you have already paid; the result is much the same as if you had given £100 and been able to claim it on your tax return.**

**One attraction of the system is that many people are able to make quite large gifts to their own Cheshire Home out of income. Thus a £500 gift — possibly to endow a part of the Home — may be made (at the current rate of tax) for a weekly outlay of about 90p.**

**Please don't be put off by the minimum period of seven years. If you are genuinely unable to keep up your payments after a while, a Cheshire Home is not likely to insist on the performance of the covenant. As for the taxman, he would be legally entitled to claim from the Home the rebates received in the past in respect of your covenant, but, in practice, has never been known to do so.**

**Why not decide on a sum which you can reasonably afford and covenant it to help your own local Home? Once you have made the decision, the office at the Home will be glad to help you make the simple arrangements and answer any questions which may arise.**

## COMPANY COVENANTS MAKE SENSE

A company which covenants to a Cheshire Home is able to make a really worthwhile contribution with an outlay, which amounts in most cases to less than half the sum which the Home will receive.

This is because the gross value of a covenant may be deducted from the profits of a company before corporation tax is computed. An example is as follows:

A company wishes to endow a room in a Cheshire Home at say a cost of £5,000. It makes the endowment by means of a deed of covenant, providing for 7 yearly payments each grossing up to £714.29. As this gross sum is exempted from liability to corporation tax, the cost to the company, which is paying at the standard 52% rate of tax, will be in real terms £342.86 a year — or £2,400 over the full payment period.

The net outlay per year is, of course, easily worked out by taking 48% of the endowment cost and dividing by the number of yearly payments. If a net form of covenant is favoured, then, at the current personal tax rate, the cost of every £100 entered on the deed costs the company paying the full rate of corporation tax only £73.85.

However, the deed must be made out in the conventional way as for individuals. In the example given above, there would either be a deed to produce a gross figure of £714.29 each year or a net deed, which at current rate would be £464.29 a year, i.e. £714.29 less 35%.

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## THANKSGIVING

Those who walk on the path of pride crushing the lowly life under their tread, covering the tender green of the earth with their footprints in blood;

Let them rejoice, and thank thee, Lord, for the day is theirs.

But I am thankful that my lot lies with the humble who suffer and bear the burden of power, and hide their faces and stifle their sobs in the dark.

For every throb of their pain has pulsed the secret depths of thy night, and every insult has been gathered into thy great silence.

*And the morrow is theirs*

O Sun, rise upon the bleeding hearts blossoming in flowers of the morning, and the torchlight revelry of pride shrunken to ashes.

Rabindranath Tagore  
from 'Fruit Gathering'

(with acknowledgments to Sue Ryder, O.B.E.  
'And the Morrow is Theirs')



*Hilary Pole whom we described as the most disabled living person in our Summer 1973 issue, died in June last year, and we are grateful to 'Responaut' for their permission to reprint the following tribute.*

## Tribute to Hilary

By Joyce Glynn

Hilary Jennifer Pole, M.B.E., 1938-1975.

Thirty-seven action-packed years although for nearly fifteen years she was unable to see, speak or move except for a slight movement in her big toes and, later, her achilles tendon only.

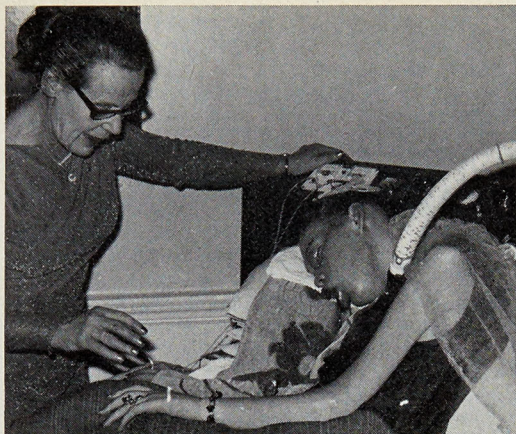
Most of her action was concerned with helping other people, particularly disabled people, but none of these was as disabled as Hilary. She wrote literally miles of letters, seeking and passing on information and, as the Hon. Appeals Organiser for Possum Users Association, appealing for financial help to buy the expensive electronic equipment which would give some independence and freedom to other disabled people. Operating her Possum controlled typewriter with her toe she typed on until the early hours so that help should not be delayed by another day, so that the organisation of a sale, a market stall, a jumble sale, a concert, a demonstration of Possum equipment or whatever would push on, so that an article would be finished.

Although so disabled Hilary always helped with family difficulties and enjoyed family pleasures. She was well aware that she was lucky to have such a close family relationship. They could argue and disagree but the bond was secure. They inflected each other with their interests and gave mutual support. Hilary said she could not have done so much without the support of her mother who at the same time respected Hilary's privacy and independence which Hilary greatly appreciated.

Hilary thoroughly enjoyed her nieces and nephews who liked to play in her room, kissing her foot in greeting and goodbye. Although communication with them was limited, companionship was strong.

Her pets were very much part of her life. They loved to get on her bed. Friends' pets, too, when put on her bed would snuggle down in the corner made by the bend of her knees and be quite content, obviously aware of the 'Hilary magic'.

Hilary taught me and others to enjoy music, to appreciate more the birds and flowers. She gave us lots of cooking and gardening tips and First Aid help – but she couldn't move or see! Mostly we weren't aware of her disability only of her vitality and determination. She would try and keep trying until at last she ferreted out the information she needed or had done what she set out to do.



One of her favourite quotes was 'the impossible takes a little longer'.

Hilary went to great lengths to try and solve the personal troubles of her friends and nurses – so many confided in Hilary and were glad of her help and advice. She had the happy knack of putting people at ease – strangers would go into her room quite diffident but leave it exultant!

The last event she organised was a concert at the Walsall Town Hall on the Friday prior to her death. The Canoldir Male Voice Choir sang. It was a wonderful concert, the singing was superb, the applause tumultuous and everyone had a good time. Hilary said she 'enjoyed every minute of it'. It was a financial success, too. Hilary was trying to raise £500, the balance for a Possum controlled typewriter for a severely disabled lady whose speech was failing. Hilary wanted her to have the typewriter before her speech failed completely. With the ticket money and generous donations she raised the £500 and ordered the typewriter on Saturday, June 14th. She died on June 18th.

Hilary has inspired many people, able-bodied and disabled alike, particularly her family and volunteers. They have decided to stay as a group and do their utmost to continue her work. The support and encouragement of Hilary's friends will be a great value in fund raising and locating people who need the help that PUA can give.

Hilary has left a lot of happy memories – of parties at home organised by her indefatigable parents and sister and brother-in-law. Of journeys to London for the Albert Hall concerts and the reception given when her biography was launched; the excitement of the BBC television appeal; cricket at Edgbaston County Ground; P.U.A. Committee meetings; local concerts, and day-to-day fun, jokes and wisecracks; her willpower, independence, sheer courage!

I feel very, very privileged and proud to have known Hilary.



# Marjo's wonder car

(With acknowledgments to 'The Sunday Times')

*In the continuing protests over the dangers of motorised invalid tricycles, the Government has steadfastly refused to provide handicapped people with specially-adapted small cars, though they are four times safer. Social services correspondent Marjorie Wallace reports on the practice in Holland, and on a remarkable success story.*

A bright yellow Daf car sailed smoothly down Park Lane in Culemborg, Holland, turned right, parked outside a block of flats and neatly demolished a claim by Britain's Department of Health that many disabled people are too handicapped to drive a car.

For the driver, 26-year-old Marjo Gerritsen, is paralysed from the chest down and the wasting muscles and joints of her hands can exert only the tiniest force – less than it takes to press a normal typewriter key. She must be one of the most extensively handicapped people to drive an outdoor wheelchair, let alone a four-wheel car.

Yet she has completed enough driving lessons to take the standard driving test shortly. The reason for her success is the Dutch policy of providing disabled people with adapted cars instead of tricycles. Marjo's car is an extraordinary conversion of a standard automatic Daf saloon into a space-age car with finger-tip controls. 'If they can make a car to drive on the moon, they can make one for me to drive on earth', Marjo told the engineers at the Dutch Rehabilitation Institute, near Amsterdam.

The result: 'It's more like a plane than a car', said Marjo. As she sat outside the car, she opened the door and swivelled the whole driving seat out to lie alongside her wheelchair. A push-button elevator control lowered the seat to the level of her chair and Marjo shuffled along a board into the deep bucket seat. Another touch on the elevator button and the seat lifted and swivelled her into position to drive the car, before she fastened her safety straps and fitted her head into a padded head-guard.

Around her, all the controls have been designed so that she can work them easily. They include:

**Steering:** power steering and, because Marjo cannot grip, a plastic cuff fixed to the wheel into which she puts her arm.

**Brakes:** servo assisted, operated by swivelling column on an arm rest in front of Marjo; degree of braking controlled by position of the column, instead of pressure applied to it. A tap to the left produces an emergency stop.

**Accelerator:** padded lever on right, squeezes inwards by Marjo's right elbow, as she leans on arm rest.

**Other controls:** wipers, washers, horn, lights and windows worked by micro-switches on brake column and need pressure of only 20 grams.

The adaptations cost £6,000 – on top of the £1,000 for the car.

It took Marjo more than two years of haggling and letter writing before a local authority agreed to pay for an adapted car. And for another year she worked with the engineers at the Rehabilitation Institute to find ways of compensating for her physical deficiencies caused by rheumatoid arthritis. 'I know what my body can do', she says. 'I know which is the best position for my arm and how my fingers bend. We worked together'.

The head of the institute's team of engineers, William Zevering, said: 'We have sent no one away. There is always a way of adapting a car'.

In Holland these adaptations are free. The car is also provided free to anyone earning less than £6,000 a year. The Dutch say that *all* adaptations do not cost £6,000, but more often as little as £150

For those invalids who are, or have been, working, the money comes from a disability fund to which employers and employees contribute.

Disabled people who have never worked can have the car paid for by local authority social services if they need it 'as a means of participating in the life of the community'.

What do the Dutch think of the British tricycle? 'Horrible', says Rudolph Fredericks, Mr Zevering's deputy at the Rehabilitation Institute. 'It is dangerous, especially in wind'.

Marjo says: 'I would hate it. When I saw those poor people in Britain having to drive around in those crazy tin boxes on three wheels I thought your government should be told about human rights'.

● In the campaign against the invalid tricycle, supporters recently mourned the loss of the racing driver Graham Hill, killed when his light aircraft crashed near Elstree. He had devoted a great deal of his time and money to helping the campaign.





One side of the "FRESHFIELDS" complex. The ground floor, formerly class rooms, have been converted into bedrooms, lounges and day care rooms. The windows on the second floor are from the large assembly hall, which once a lift is installed will be available to the residents. *Ack. The Southport Visitor*

## QUOTE

"What we are hoping to do is provide the opportunity for life that is creative, purposeful and fulfilling'.

LEONARD CHESHIRE

# "FRESHFIELDS" —Dream to Reality

A seven-year dream became a reality on 18th October when Group Captain Leonard Cheshire, V.C., D.S.O., D.F.C., visited Sefton to officially open the newest Cheshire Home at Formby in Lancashire.

In 1968 a handful of people in Formby saw the need for a Cheshire Home in the area for the young disabled and set about raising money to this end.

1972 saw the acquisition of the former St. Peter's College, Freshfield, Formby and Group Captain Cheshire went to Merseyside to launch a public appeal for the purchase and conversion of the complex of buildings to suit the needs of the disabled.

In spite of inflation, support was forthcoming from thousands of people throughout Formby, Crosby, Ormskirk, Maghull, Lydiate, Burscough, Southport and as far afield as Wigan and St. Helens. Local organisations, fund raising groups, countless individuals and young people from school throughout the area all took part in this project, one aspect of which was seen early in October in the seventh annual DESERT TREK; a ten mile walk along the beach from Formby to Southport, when anything up to 2,000 walkers took part and raised money from literally thousands of sponsors throughout West Lancashire and Sefton.

The first five residents arrived at "Freshfields" in September and happily settled into their new surroundings as part of the initial pilot scheme. Finishing touches were made to accommodate a further fourteen residents expected by Christmas. A day care centre should also be ready within the next few months and be able to accommodate some sixty people each week.

There are also two self-contained flats available at "Freshfields" for married couples, one partner of which is disabled. This means that the able bodied can pursue his or her normal work and know that the disabled partner will be looked after during working hours.



Very large sums of money have already been raised to bring the "Freshfields" project to its present position but much more is needed to progress and establish "Freshfields" as one of the spearheads of Cheshire Foundation policy for the seventies and eighties. "Freshfields" provides all the accommodation necessary for conversion into small homely units, day care, bungalow or flat accommodation for couples with one disabled partner and holiday care for those still residing at home while their families take a holiday.

'Freshfields should stand for all that its name implies – a place of fresh endeavour. A real home, a place where residents' disabilities should recede into the background.

'Encouraged by the friendliness and expertise of those who carry out the day-to-day running of the home, and refreshed by the constant contact with those who voluntarily render services, residents of Freshfields will be able to live a much fuller life than would otherwise be possible because of the severity of their disabilities.

'To use a Churchillian phrase, the opening of the home was "the end of the beginning".

'The goodwill of the community has enabled us to make a good start – with no public funds available – we look forward to that same community continuing its generous aid to our industrious support groups in their various functions'.

*Mr John Delahunty,  
Chairman of Freshfields' management committee.*

### Doors opened – and Winnie was first in

The most striking feature about Freshfields is its informality, encouraged by a staff who want the disabled residents to live as normal a life as possible.

Specialist equipment helps the residents achieve a high degree of independence and restrictions on such things as visiting hours are fewer than necessary in hospitals and most other homes.

The first resident through the door was Winnie from Southport.

The only resident not confined to a wheelchair, Winnie suffers from kidney and heart failure, and the times she has been in hospital are 'too numerous to mention'.

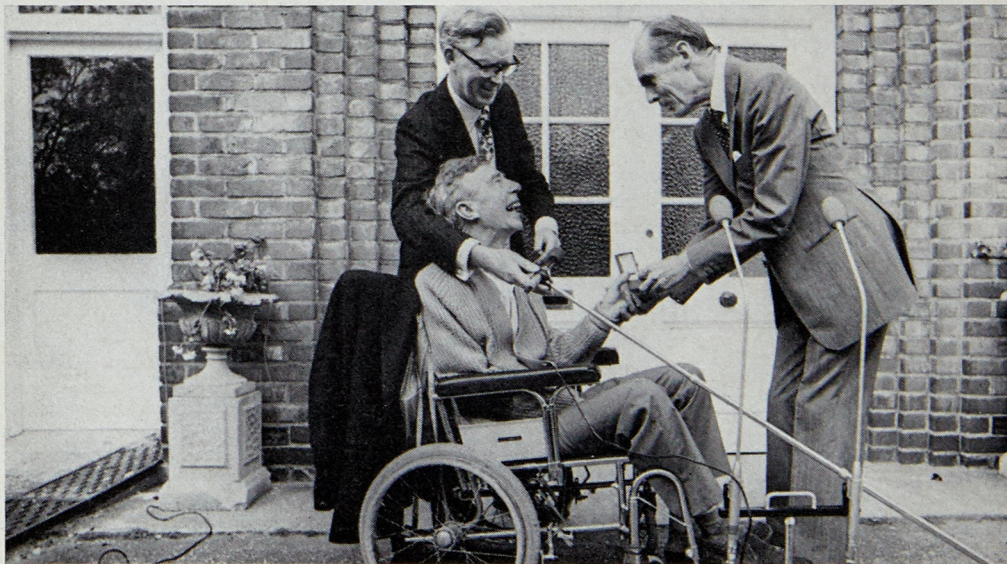
A former nursing sister, Winnie has not worked for ten years said:

'It was a big break when I came on to the other side of the fence, but while I have been here the staff – the regular staff and the voluntary staff – couldn't have been better. They have made this home a very happy one'.

As well as the usual occupational therapy all the residents practise, Winnie enjoys playing the piano and sewing. And she is at present embroidering a cloth, and anyone making a donation to the home is invited to sign it.

The second arrival on 1st September was Kathy who has been at a Southport old people's home, since becoming disabled eight years ago.

Charlie hands over the key to Group Captain Cheshire to open the door of FRESHFIELDS, watched by John Delahunty, instigator of the "FRESHFIELDS" project and chairman of the Management Committee. (Ack. The Ormskirk Advertiser).





A children's nanny for 35 years, she said: 'With old people you are restricted. They have their own set ways but you lead a different life altogether when you are in younger company.'

### Pioneer

'We feel we have our own home here and I hope everybody else who comes will be as happy as I have been'.

Dot, who was married but lost her husband recently when she was in hospital, has been crippled by arthritis since she was 25. She will be 54 in January and had intended to live with her daughter until she was offered a place at Freshfields.

Ursula, who is 50, has also been handicapped since she was 25. A former nurse, she has not worked since 1959. She came to her new home from an old people's home in Cheltenham. Ursula thinks Freshfields is a great improvement on her last home because of increased freedom, independence and more flexible visiting hours.

The first man to arrive was Charlie who came from an old people's home in Sefton Park.

Charlie went to the old people's home as a pioneer when the local authority planned to convert the second floor for handicapped people, but this never happened.

Freshfield's newest arrival, is Ivan, a 50-year-old Indian, who was shop steward for 14 years after moving to Britain. He has spent the last ten months in Walton and Fazakerley Hospitals since losing his legs as a result of bad blood circulation.

The female residents have been taken to a fashion show by voluntary helpers, the Forrby Lions have given a film show at the home.

On Sunday, Winnie is taken to church, and the residents, who will form a committee, when more people move in, are eventually hoping to have their own service, not necessarily on a Sunday.

Celebrating the Opening of FRESHFIELDS October 1975. (left to right), Group Captain Cheshire, Mr. Graham Page, M.P. for Crosby, Mr. John Delahunty, Chairman of Management Committee, Councillor and Mrs. E. Rowland Ball, Mayor and Mayoress of Sefton and Mr. Ian Percival, M.P. for Southport. (Photo: Sefton Newspapers Ltd.).





# Around the Homes

## “Big hearted Arthur” visits ‘Greenacres’

We held our Annual Autumn Fair at Sutton Coldfield Town Hall on 9th October, and were very fortunate to get ‘big hearted’ Arthur Askey as our special guest to perform the opening ceremony. What a wonderful person he is – so active and full of fun, and as he said of himself, ‘No make-up, and I’m an old age pensioner, you know!’ He went round all the various stalls, chatting to everybody, and signed literally hundreds of autographs on anything from cigarette packets to autograph albums. When he came to ‘Greenacres’ to see the residents who could not get to the Fair he signed the Visitors Book giving as his address ‘No. 10 Downing Street (servants’ entrance).

The Fair was an exciting occasion for us all, as everyone must find, but it is the Spirit behind such events that counts – so many people giving their ideas and time continually adding richness not only to our lives but theirs too, for a stream grows into a big river.

We raised well over £2,000 altogether at the Fair, and have received more money since from various groups down to three little children who had collected £3 carol singing.

We have been invited to so many entertainments recently that one volunteer driver said, ‘Why don’t you just stay in the bus?’ which just goes to prove my point that the Spirit of Christmas is not dead.



Olive Watkins proudly shows two of the cuddlies made at Greenacres for the Autumn Fair.

From one big old house with 10 residents, bit by bit new extensions have grown up round the land we have so that most of the present 32 residents have a bedroom of their own with their personal belongings around them which really makes it ‘home’ instead of ‘a Home’.

May I end by wishing everyone a very good and expansive 1976.

*Joan Atkins.*





THE FIRST SIX RESIDENTS AT FRESHFIELDS (Photo: Sefton Newspapers) Ltd.

## Cara calling

By Rosemary Shevlin

It feels a lifetime ago since we were working in our Costa Brava setting, as we stockpile for the Christmas Fair, with the lights defying the November fog. It wasn't all roses in our palatial home either, because we were caught by this accursed inflation that's blighting the world. Depressing it may be, but you can't *keep* a good man down; and surely Cara is that! In all our major and minor troubles where would you turn only to the Counselling Service? Aren't we the chosen few to have "big brothers" like that? Roy Billington flew over here for a weekend and hey presto, Irish eyes were smiling!

And they were gleaming at the IWA Fancy Dress, where Cara swept the boards – six prizes, including the first, Nuala Hanly as "What's new, pussy cat?" She got a big, blue travel case – just the thing for the next IWA holiday, if she's lucky enough to get a coveted place.

A few nights before, we graced a social in our village. (We are rabidly Chapelized "natives" by now, and a homely village it is). And we hope to go to a concert of sacred music in the church soon. They don't leave Cara in lone splendour up here in "The Park".

Woolworth's will soon be opening up specially to let us shop in comfort, and there are oodles of dinners and cabarets in the offing. Oh there's good times coming and they're ever so near at hand!

## Residents entertain Staff at Alne Hall

It was a great pleasure to visit Mickley Hall on the occasion of their Flower Festival and to be made so welcome. We were particularly interested in their new building which incorporated single and double bedrooms. This is a thing we are hoping to have ourselves sometime in the future.

A "first" for us – the Residents gave our Staff a Christmas dinner party in which we all took part. With the co-operation of some members of our Management Committee we were able to eat, drink, and be merry in our local village hall. After a four-course dinner with wine, organised by private caterers, we were entertained by a pianist and a group. The Staff and ourselves joining in the dancing until midnight – a thoroughly happy family affair.

I am very honoured to have been asked to represent the Residents on the Management and General Committee. Here is an opportunity for us to become more deeply involved in the affairs of our Home. This is widening our horizons and challenging us to move forward not only in the Home but in the district where we live.

We look forward to 1976 in which the Annual General Conference will be held in York, for the first time in the North. I can assure you, a great welcome will await you.

David Dunn



## Hydon Hill resident wins T.V. in rebuilding fund effort

The Autumn Fair was another outstanding success in the all out effort to raise funds not only to cover the ever increasing day to day expenses but to make a worthwhile contribution towards the Rebuilding Fund for the specially designed block of bedsitting rooms and medical centre.

The Town Mayor of Godalming, Mrs Gordon, honoured the Fair with her presence during the morning and met many of the Home's residents in their wheel chairs.

When the Grand Rebuilding Draw for 1975 was drawn by Bill Brooks, Chairman of the Residents Committee, all the residents hopes were concentrated on winning the portable Ferguson T.V. and the miracle happened amidst tremendous cheering. Paul Hanson with his disabled wife now have it in their room.

The Fair was wound up by Mr Leonard Thorpe, Chairman of the Fund Raising Committee, who thanked most sincerely all those who in one way or another had helped to make the Fair such a success with the profit of over £1,500 just exceeding that of last year.

*John Payne.*

## Modified phones used at Le Court as model

Telephone equipment at Le Court is to be used as a model for other Cheshire Homes throughout the country.

The Post Office has, over the years, answered the needs of residents by combining and modifying telephone equipment for their use. Now, a resident there Mr Brian Line, has prepared a report on telephone equipment at Le Court.

Equipment at the home includes a coinbox which incorporates a Sender No. 1 and a loudspeaking telephone No. 4 with a pendant telephone and a specially modified coin shute which is a great help to disabled people making calls.

Brian said that many Post Office staff had been helpful in getting together with residents and discussing individual problems. Assistance has also been given readily by Tony White of telecomms marketing, and Roger Jefcoate, of the Possum Users' Association.

The residents of Cheshire Homes do not qualify for assistance under the Chronically Sick and Disabled Act due to the fact that facilities are available for calling able-bodied help in an emergency. But the Possum Users' Association can be of assistance with rentals.



Brian Line (Le Court) uses a card callmaker. *Ack. John Rose of Alton.*



# Rosa blows back into sewing at St. Anthony's

(With acknowledgements to the 'Wolverhampton Chronicle')

A deep breath and Rosa can machine away for hours. She has only one active limb and feared that her sewing days were over. But her appeal for help to a Lichfield Street sewing machine shop has resulted in an ingenious solution which enables her to keep stitching away with no effort at all.

She explained: "I've always loved sewing but it was becoming increasingly difficult for me to operate my hand machine, and the doctor warned that it might prove too much for my only good arm.

'So I tried first to get the machine electrically powered, but I was told by the makers that this was not possible. Then I tried Possum, to see if they could adapt the machine so that it could be worked by mouth and was told the cost would run into three figures.

'Well, we just don't have that kind of money. But I was convinced that it ought to be possible to work a small switch by using the mouth, and in fact I had acquired a micro switch from a washing machine'.

So, armed with the micro switch and tubes insulated in a rubber ball, Rosa in her wheel chair called on Mr Alan Dunn, of Bullock's Sewing Shop. She showed him the hand machine, outlined her plan.

## Action

Alan thought for a while, then decided to have a go. A week or so later, Rosa's machine was back at the home, powered by a small motor and humming into action as soon as Rosa breathes into the tube.

And the cost was under £20!

Said Mr Dunn: 'It is the kind of challenge that really appealed to me. Mrs Krepa is such a wonderful person, naturally I wanted to help.

I could sympathise with her determination to remain active. If there are any other handicapped people who would benefit by this idea, I hope they will contact me'.

Rosa, a former nurse who was brought up in an orphanage was told she could not expect to live more than three years when she entered the Cheshire home almost 13 years ago, is now hard at work making dolls and other items.



Rosa blows her machine into action watched by Mr. Alan Dunn, who fitted the motor and adapted the machine for operation by mouth.

## Fighters

Nearly six years ago she married another resident at the home, Polish-born Jan Krepa, who is also paralysed and cannot walk. Though meals are available in the dining hall, every morning he makes her breakfast, and every weekend she cooks him Sunday dinner.

'We're both fighters', she said firmly. 'We don't give in. You have to accept increasing limitations, but you fight every inch of the way'.

'Now that I've got this gadget I'll be able to do so much more'.

They set themselves £50 profit for their under-50p stall, which meant sewing close on 100 items from shoe-bags to pinafores, and finished with £360! !



## New bus for Champion House

At last we have got our new Bus – achieved after years of events and work.

It is gorgeous in turquoise and cream with a hydraulic lift at the back for loading wheelchairs.

We were taken in three batches to Blackpool illuminations in October travelling through the countryside on the way there. We had tea at a delightful Cafe in Lytham called the 'Shrimp Pot'. The service and food was excellent and we can highly recommend it to other Homes visiting that area. We then travelled the whole length of the lights which were very beautiful and eventually arrived home tired but happy in the thought that we now had a new and comfortable bus.

It has since been used for Xmas Shopping and taking residents to respective Xmas Parties.

We wish all the other Homes best wishes for health and happiness during 1976.

*Elsie Lister.*

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## Carnival cash helps replace relic at Honresfeld

Rochdale Carnival Committee handed over a new ambulance to the Honresfeld Leonard Cheshire Home in September.

Mr J. Weston, chairman of Honresfeld management committee, who received the keys on behalf of the home, said: 'This ambulance could not have come at a more opportune time. Our old ambulance has just fallen to pieces. The new one will prove invaluable'.

The new ambulance has been bought with money raised from Rochdale Carnival. One of its special features is a hydraulic chair lift. Inside the ambulance special clamps are fitted to the floor to hold wheelchairs while the ambulance is moving.

Considerable support has been given to the Home throughout the year by the Support Group which is greatly appreciated.

The Mayor and Mayoress, Councillor J. Carroll and Mrs Carroll, members of the carnival committee, and the management committee of Honresfeld were at the presentation.

## Garden lift for disabled at Greathouse

*(With acknowledgements to 'Occupational Therapy')*

An automatic hydraulic lift, the first of its kind in Britain and specially designed for use by severely disabled people, has been presented to the Cheshire Home at Greathouse, Kington Langley, Wiltshire, by Plessey Hydraulics of Swindon.

The new lift enables disabled residents in wheelchairs to enjoy the gardens. Previously a four-foot difference in level between the terrace and the gardens made such visits without help almost impossible.

The fully automatic sequence is initiated by pressure on the mat at the entrance which summons the lift and opens the entrance gate. Once the passenger is properly installed on the platform, the gate is closed and the lift is set in motion. At the end of the lift travel the exit gate is opened and the motor is automatically shut off.

The hydraulic scissor-type lift is powered by an electric motor driving a Plessey hydraulic gear pump. The lift is actuated by a complex electro-hydraulic control system to ensure that events take place in the correct sequence and at the appropriate time intervals.



Mr. J. Weston, chairman of Honresfeld, receiving the keys of the new ambulance from Rochdale's carnival queen.  
*(Acknowledgement The Rochdale Observer).*



## Dan-y-Bryn entertains Dickie Henderson

There are many groups and Appeals Committees raising money in the three administrative counties of Glamorgan for Danybryn, Radyr. Without them the Home could not exist. And equally important are the individuals who work alone to the same end.

One of them is Mrs Mary Knight who lives in Pontypridd who had pledged herself to raise a thousand pounds unaided in a year.

She is well on the way to reaching her target but apart from her fund raising activities she has been instrumental in persuading celebrities, particularly from show business, to visit Danybryn.

Her latest "acquisition" was star comedian Dickie Henderson who reacted promptly when Mrs Knight approached him with an invitation to come and see the Home. Two of the residents travelled in the specially adapted ambulance to the St. Mellons County Club where he was staying and he returned with them to Danybryn where he spent much of the afternoon chatting and joking.

A keen golfer, he gave a short demonstration on the lawn outside much to the amusement of some of the residents and staff.

With them in the background in our picture is Mrs Mary Knight who made it all possible.





# The Foundation Overseas—1975

1975 has been a year of mixed difficulties and successes for the Foundation on the international front.

Inflation has hit our overseas Homes even more heavily than it has in the U.K., and many have had a constant struggle to survive and to make even the most basic ends meet. For them the drop in income has meant not the forgoing of a luxury, but the absence of necessities. The Homes have met this difficult year with great courage and have kept their spirits up while they continue their hard fight to keep going, and the interest and financial help they receive from the U.K. Homes is a great encouragement to them, in helping them to feel that they are not fighting alone. Please continue to help them as much as possible. Even a small donation carries with it to our overseas Homes a feeling that we in the U.K. care about their troubles and problems, and want to help.

It is with very great sadness that the Foundation has had to withdraw its support and its name from the Bethlehem Children's Home, but arrangements have been made to protect the welfare of the children at the Home, which is continuing independently.

At the beginning of 1975 a new Western Regional H.Q. was set up in Jamaica to look after the Foundation's work and Homes in Canada, the United States, Central and South America. We now have four Regional Offices which span the world and play a great part in our efforts to establish new Homes, and in helping existing Homes.

In April the hugely successful joint Ryder/Cheshire Family Day celebrations took place, and the joy, goodwill and friendship they brought with them has now – literally – reached right across the world.

The year has seen the opening of new Homes in Bangladesh, Canada (two – with more in the pipeline), Jamaica, Kenya (a takeover by the Foundation of the very large Dagoretti Children's Centre for 120 children), South Africa and Spain, and in France the Home at Dijon is ready and awaiting its opening this year.

And now 1976 is with us, and we are looking forward to a year in which the work of the Foundation will spread still further.



## The Group Captain's Plans for 1976

Group Captain Cheshire has a very busy year ahead of him in 1976.

He is planning to work on further videotape and film programmes which are proving an excellent and popular form in which to spread knowledge of the Foundation and its work. These programmes require a great deal of time from G.C. who is closely concerned not only with the content of the programmes but with every stage of their production. This is necessary to ensure the best possible end result, and the success of the ON REFLECTION series has proved all this work worthwhile.

In addition to his filming and videotape work, G.C. will be undertaking two very extensive overseas tours, lasting several months. In February he goes to Ireland for several days. In April he is due to leave for a trip to Spain, the United States and Canada, where he will be visiting Washington, New York, California, Vancouver, Saskatoon (to formally open the new Home), and Toronto. He returns in June and then has a busy two months in this country before leaving again in September for India, Pakistan, Bangladesh, and the Far East, a trip which will last until mid-December.

G.C., as always, very specially enjoys his visits to the U.K. Homes and although his heavy schedule this year will prevent as many such visits as he would wish, he will be going to as many Homes as possible this year, and will also be giving a number of talks to schools and other institutions.



## KHARTOUM Cheshire Home, The Sudan

We have at last started on our building extension programme which should be completed within two to three months and enable us to take some more boarders from those on our waiting list (at present we can only accommodate five). At the same time it will deplete our funds to the tune of £S7,600, so that we shall need once again to raise money.

The Home (which opened in November 1973) is now well established and the children making real progress. It looks as if next month our first "graduate" will be able to return home and go to school: a boy of ten who has had three operations under our auspices and a lot of physiotherapy.



## Overseas Letters

*From Pang Wai Yung, Hong Kong.*

Dear Miss Toner,

I shall never forget how you took care of me when I was in London. Thank you very much indeed.

I landed safely at Hong Kong on 6th October. My return journey was quite comfortable, except the last part from Bangkok to Hong Kong. The Cheshire Foundation provided a bed for me on the plane which occupied nine seats! An airline nurse took care of me all the way. The journey from Bangkok became unpleasant only because the weather was bad and the plane became unsteady.

Immediately after I had landed at the Kai Tak Airport, I was sent to the Queen Mary Hospital direct, whilst my luggage was delivered to the Cheshire Home. I have not totally recovered from the operation and require medical treatment and physical assistance. When I get better, I will return to the Home. It is likely to be sometime before December.



Miss Pang Wei Yung with members of the Cheshire Homes and Kingston Hospital staff at the party in Tudor ward. *With acknowledgements The Comet.*



## Happy-sad farewell

There was a mixture of happiness and sadness when Kingston Hospital staff threw a farewell party for Hong Kong accident victim Pang Wei Yung.

The staff of Tudor ward were naturally happy to see 29-year old Miss Yung well enough to leave hospital after a six-month stay. However, they were sad to see their very brave and special friend leave.

Pang, who has been paralysed from the waist down since she was 14, was on a holiday visit to the Cheshire International Day in April, when she was involved in an accident on the Kingston By-pass.

She is a permanent resident of the Cheshire Home in Hong Kong and had come over to England on an exchange visit.

Tragically, her holiday was spent almost entirely in Kingston's Tudor ward, where she became a favourite among the staff.

The staff and the home together planned a

special farewell party on 3rd October, when she was presented with a gift of her choice – a nurse's watch.

The staff of Tudor ward paid tribute to her bravery and were very sorry to say goodbye. Miss Yung left for her home in Hong Kong.

As well as the staff of the hospital, Maggie Toner, Overseas Secretary, Norman Whiteley from Athol House, Organiser of the Wheelchairs for Overseas Fund, and Roland Langley of *The Smile* were also present.

Pang who looked very pretty and full of fun was given a beautifully iced cake which she shared with the patients and guests, and to the sound of the tuneful harmonica played by George, one of the orderlies, Maggie Toner presented her with a beautifully illustrated book 'Colourful London' autographed by Group Capt. Leonard Cheshire himself.

In the message below Pang says, 'I thank you so much every-one for coming to join my party. I hope everybody had a happy time, and thank you so much Mr Cheshire for giving me the present.'

Thank  
彭惠容

我邦常之感謝  
各位到來參加我  
的聚會，希望各位  
都感到快樂！  
更感謝 Mr Cheshire  
送給我的禮物。

Message from Pang Wei Yung given on the occasion of her farewell party at Kingston on Thames Hospital on 3rd October, 1975 before returning to Cheshire Home at Hong Kong.

A letter from Dr Butler, of the Hong Kong Home, dated 30th December, just received, says:

"Most important news of all however, is that we are about to go out to tender for the new Cheshire

Home building which, by this time next year, should be a reality. We already have \$2.1 million of the \$2.6 million needed, and on 20th December we raised \$93,000 by the sale of flags (feathers) on the streets. So things are looking up".



# “The Role of the Management Committee”

Talk given by Mr. G. Reid Herrick – Foundation Trustee

## ANNUAL CONFERENCE

I think it will be as well to start with a definition, of a Management Committee.

As I understand it, the Management Committee of a Cheshire Home is a group of people who, with the approval of the Trustees of the Foundation, have jointly assumed responsibility to the Trustees for the Management of a Home under the authority delegated to them in the Homes Constitution. Each Management Committee is, in effect, the Trustees' Executive Committee for that Home.

From that definition there follow a very considerable number of implications but, in the interests of brevity, I have picked on four:

- (1) There is at least a hint of something less than absolute autonomy.
- (2) There is a clear statement of responsibility for the total success of the Home – not just for the finances, the fabric, the fixtures, and the fittings.
- (3) Included in No. 2 there is an acceptance of responsibility by the Management Committee for the type of training, of, behaviour of, attitude of, effectiveness of all the Staff.
- (4) There is, of course, a clear implication that with the Management Committee lies responsibility for the happiness and well-being of the Residents of the Home.

There are many other implications, but I think these four are enough to look at one by one and make an attempt at amplification.

Let us start with this very emotive word “Autonomy”. The word, in this context – indeed, in the whole context of the Cheshire Foundation – is emotive for reasons which are mainly historical, and of which I think we might do well to remind ourselves. Once upon a time, a young man called Leonard Cheshire proved, by practice in his own home, a need to provide care for some people who had slipped, or might slip, through the Social Security “Safety Net”. He started going round the country finding here a man, there a woman, somewhere else a little group, who reacted to his enthusiasm, who became fired by his inspiration. He told them of his ideals; he wound them up, and then went off to do it again somewhere else.

These little groups of people beavered away, each using its own methods. They raised money, they acquired buildings, they started to create homes, each according to their individual means, each according to their individual imaginations. Because they raised the money – the money which paid the butcher and the baker and the candlestick maker, and if there had been one, the piper – they felt they had a right to call the tune. They felt that, provided they kept within *their* interpretation of the spirit of the organisation whose flag they were flying, they were entitled to do as they liked, were entitled to self-government – which, in my dictionary, is a definition of “Autonomy”.

The result, the quite magnificent result, is 64 Homes in the U.K., each different in many ways, each run by a Committee with a different history, a different background, and different abilities.

The result is 64 Homes with widely differing standards of even the basics of life, even wider differences in the amenities provided, and often considerable difference of ideas about the purpose of the exercise anyway.

Now that there is talk, or even a whisper, of some surrender of the kind of autonomy I have been describing; now that there is some hint of meaningful guidance from the Trustees, I think it is important that nobody should get frightened. Our Founder, Leonard Cheshire, has never been, nor even sounded like a dictator. Our new Chairman is the least dictatorial man of his background and in his position whom I have ever met. My colleagues on the Board of Trustees look and sound less like a junta than the members of any Committee of which I have ever been a member.

What we, the Trustees, are asking Management Committees to do is to look at themselves very carefully, to decide what they are trying to do, to decide what need they think they are supposed to be filling; if necessary, to discuss their findings with us – the Trustees – who may be able to give them a clearer picture of where they fit in the total pattern of 64 Homes.

We are asking them, having redefined their purposes, having again thought through their aims, to set about fulfilling those purposes and aims to standards comparable with the best available anywhere in 1975, rather than comparable with those which were available and acceptable twenty years ago.

The second implication, that the definition includes a clear statement of responsibility for the total success of the Home, may seem so obvious as to be not worth stating. The obvious is not always remembered. Some Management Committees – not many, I hope – come, as the years go by and the first flush of enthusiasm



wears off, to feel that having provided the main fabric of the building, having arranged for a suitable per capita grant from the Local Authority, and having created some form of money-collecting machine, their responsibilities are at an end. They are tempted to allow themselves to become rubber stamps: a rubber stamp for the Treasurer in his negotiations with the Local Authority; a rubber stamp for the Fund-collecting Officer, whatever form he or she may take; a rubber stamp for the Admissions Committee, who have a difficult job dealing with personal details, which are always a little embarrassing; a rubber stamp for the House Committee, which really runs everything else; and House Committees themselves all too often become rubber stamps for a strong Head of Home. Far too often Management Committees as such, and certainly members of Management Committees as individuals, fail to accept and implement a continuing personal involvement in every aspect of the life of the Home, and the life of everybody in it, both Residents and Staff.

This seems a suitable moment to introduce one or two hobby horses and give them a run.

Firstly, let me deal with the matter of grants.

I am sure that a number of Homes are getting from their Local Authorities less than they could; this for a number of reasons, of which at least one may be a lack of understanding of the amount to which they are entitled. May I remind you that there is a very small sub-committee of three who are available to help in this matter – if you want help. Probably we don't know any more about it than you do, but we think we do and one or other of us is willing, almost at the drop of a hat, to come and offer advice – if advice you want, knowledge – if knowledge you want, or help in interviewing your Local Authority – if that is what you want. All we need is asking.

A second hobby horse concerns the matter of the Homes Constitution.

This Constitution was not drawn up solely for the benefit of the Trustees: it is equally valuable to you if you use it properly. The very simple rules laid down for annual election of officers are themselves a tremendous safeguard to the Homes. Very few people could say this except me, but I was the Chairman of a Management Committee for a totally unconstitutional 15 years. They were stuck with me and I was stuck with them. They did not know how to get rid of me, and I didn't know how to get out of the job. That particular Management Committee was fortunate because it had a brilliant Chairman, but I might have been a stinker and they would still have been in the same spot. If you adopt the electoral suggestions, anybody can be got rid of without any embarrassment or difficulty either to them or to your Committee, and this must be an advantage to

you as much as it is an advantage to the Trustees.

The mention of "Admissions Committees" reminds me to suggest that the whole question of admissions is one of the most difficult of our mutual problems. A number of Homes are less than full. Frequently we hear of a lessening of need, of – to use a rather horrid business expression – a shortage of customers. Yet to Market Mews there comes a continuous and continuing stream of applications for help. This suggests to me that a need is still there, but that individual Management Committees are being perhaps too precious, too choosy about their own admissions, but the Trustees are thinking very seriously about it. We shall soon be suggesting a much tighter central register of applications, acceptances, refusals, and the reasons why. Maybe a common application form would help. I am merely floating the idea at the moment, and pleading with you to view sympathetically and co-operatively any suggestions and requests which come out of Market Mews in the near future. If people write to Market Mews asking for help and some Homes are losing money by being less than fully occupied, then there must be something wrong. I don't mind for the moment whether you judge it by the standard of human need or by the standards of "lolly". There is still something wrong. The basic ideas and suggestions should, and will come from the Trustees. As a Management Committee please remember that you run your Admissions Committee; the Admissions Committee doesn't run you.

Our third implication reminds me of the responsibility of the Management Committee to and for the Staff. It is simply not enough to find some paragon, to appoint him or her as Head of Home, and sit back and think that all is well. It may be, but it may not, and it certainly won't be all the time. Even paragons get tired and irritable and occasionally misguided, and, not infrequently, quite sincerely confused in their minds about the real object of their jobs. Even paragons need help and encouragement and re-inspiration; sometimes a pat on the back, sometimes a kick in the pants! The Management Committee, owes it to the Head of Home, to the Staff, to the Residents, to the G.C., in whose name it is working, to *know* that all is well or otherwise in the Home, and not be satisfied merely that the Head of Home puts up a good performance, or tells a good tale when presenting his or her report to the Monthly Committee. It is dependent, to an enormous extent, on the quality of its chief official, its Head of Home, but don't forget that the finest Head of Home in the world can be let down by a little bitch of an auxiliary who falls out with her boy friend and takes out her bad temper on some hapless Resident. Of course the Head of Home should know, and most of the time I am quite sure he or she does, but the Management Committee too, should know.



Many *duties* it can and should – indeed, must – delegate, but *responsibility* it cannot delegate.

They also owe it to themselves, to their Staff, to the Foundation, and, above all, to the Residents, to ensure that the Staff *at all levels* are exposed to the maximum amount of the best quality training which is available. This is a very big subject. A number of seminars have been held dealing with this very matter. They have been well attended and I hope proved useful. This is not the time and place to itemise the various forms of training which are now available, both through our own Service Corps and through Local Authority Courses. All that information is there for the asking. The point I want to make is that it is the responsibility of Management Committee to *know* what training is *available*, to *judge* what training is *necessary*, and to make sure that such training is not only made available to Staff, but that Staff are required to improve their efficiency through the use of such training. The firm, the company, the organisation, or the Home which ensures that it is using trained staff, gets better value for money out of that staff. And at least equally important, the staff get very much greater job-satisfaction if they feel that they are on top of the job as a result of being properly trained for it.

Many Homes when they started became registered as Nursing Homes, and amongst the regulations to which they were subject was a requirement for a specified number of State Registered Nurses. Since then, things have changed. Most Homes have changed over from being Nursing Homes to being "Part iii Accommodation", but the feeling that there is some necessary magic in the qualification of State Registered Nurse still exists in many minds. Please don't misunderstand me. I give second place to none in my admiration for a good State Registered Nurse. I give second place to none in my admiration for the dedication given by the vast majority of that very splendid profession; but don't forget that the care of the fit handicapped forms no part of the training of a State Registered Nurse; don't forget that nursing skills, whilst necessary in dealing with sick people – be they handicapped or not – are not necessarily the right skills to deal with the care of the fit handicapped, and a great many of the Residents in our Homes come into that classification of the 'fit handicapped'.

Our fourth and most obvious implication deals with the responsibility for the happiness and well-being of the Residents in your Home. Here, of course, we are entering an enormous field, of which I can only hope to skim the surface.

Firstly, note that I use the phrase, "*The Residents*". A Resident in a Cheshire Home is a man or woman with exactly the same human rights, legal rights, and civic rights as you or I. They are not to be herded and guided, controlled and coddled, and told what is best for them.

They are people who need help, and each person needs help of a different kind. They are also people with a right to be involved in discussions and decisions which concern their lives and the Homes in which they live. The amount of involvement which Residents have in the various Homes in the organisation varies from nil to near enough a maximum extent of democratisation. I can remember in the early days when I first became connected with the Foundation that involvement of the Residents merely meant could one of them do some washing-up. This may sound very silly, but it is almost literally true. That was what Management Committees in those days thought of as "Resident Involvement". We have come a long way since those days but we still have a long way to go, and *each Home should be trying to work out the method of involvement most suitable to its peculiar circumstance*.

I could go on for a very long time expanding and commenting upon the views so brilliantly expressed by Louis Battye of "White Windows" in the Summer edition of the *Smile*. And when you have read it, think about it. As a good journalist and a very good publicist, he exaggerates to make his point, but his point is valid. Cheshire Homes do have to make up their minds whether they are providing homes into which incurable people come to die, or homes into which handicapped people come to live, or what mixture of the two is most appropriate and most possible.

The very phrase, "into which handicapped people can come to live", makes it necessary for us all to consider what is meant by "living". If there is any one single feature which gives us the right to feel that we are living, it must surely be individual freedom. "Individual Freedom" means the right to sit and look at the wall or watch the "Box" twenty-four hours a day, if that's what suits. A number of people feel that they should be urging the Residents to "do something". What I think members of Management Committees should be doing, and should make sure that they do on a continuing basis, is to make available to the Residents in their Home the opportunity to do what, within reason, is what they like. Whatever "hobby" (and I choose the word carefully) appeals to the individual Resident, that hobby should be available to them. And it should be available at any hour which suits them.

It is completely useless building the most magnificent Occupational Therapy or Hobby Room somewhere in the grounds, and then saying to the Residents, "I am sorry, the door shuts at 4 o'clock". Occupational Therapy is not a discipline, to be applied between 9 o'clock in the morning and 4 o'clock in the afternoon. Occupational Therapy is only a grand word for people enjoying their own hobbies, and hobbies are things which should be, and – with a little thought and care – can be, enjoyed at any hour of the day which suits the person concerned.



Your Trustees have given a great deal of thought to this matter. About a year ago we spent, under the direction of our then very new Chairman, a weekend together, thinking about this and many other matters. The Foundation, as it now exists, has an organisation big enough, and certainly it has a heart big enough, to embrace and watch over the activities of Homes of many kinds, fulfilling many needs. As in the Kingdom of Heaven, so in this Foundation there are many mansions (maybe one or two too many), and there is room for care of many kinds, to be provided under the overall umbrella of the Foundation. Each Home should examine itself, should examine its own strengths and weaknesses, decide what need it can best fill, what need is most germane to its area and its time.

I would like to see every Management Committee in this organisation put on its agenda for the next meeting a new item – “What are we here for?” Management Committees’ agendas get very stereotyped.

Each Committee should try, and should try constantly, to clothe those bare bones with flesh, the flesh of thought and caring and involvement.

Being a member of a Management Committee is not just another feather in a Committee Woman’s

hat, not just a job for one evening a month, passing a few resolutions by occasionally saying “agreed”. Involvement is not just a matter of patting the heads of a few Residents who you happen to recognise, and leaving the business of looking after them to the professionals. Involvement is not just a matter of driving home with a slightly “holier than thou” smile on your face because you have been to a charity committee. Involvement is not a matter of sitting on a platform at the Annual Fete and listening to someone who probably doesn’t know, saying what a splendid work you are doing.

*Being a member of a Management Committee means accepting a maximum personal involvement in the lives of a lot of people – the lives of the Residents and the lives of the Staff.* Any degree of involvement in other people’s lives is never easy and is always taxing; but personal involvement is the very essence of all we are trying to do, and without it we can never be really effective.

Finally . . . If you forget everything else, please try to remember this – that for every member of every Management Committee within this Foundation, personal involvement is the name of the game.

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## IF YOU LOVE HIM— LET HIM KNOW IT

By Rosemary Shelvin

No, I’m not advising “Troubled Blue-Eyes” but giving every human a tip-off before it’s too late. Reticence is all jolly fine but there’s a happy medium in all things!

Peculiarly, there is no holdback when we write about the “dear departed” who unfortunately cannot read their own obituaries, or hear their virtues extolled over their corpses (it seldom lasts any longer!) Many a tired out mother would be amazed to hear that she had been dearly beloved by a family who had never thought to give her as much as a cup of tea in bed!

Not that it’s so easy to have a soft word of appreciation accepted. That women especially meet it with a suspicious “Why?” in spite of all their complaints of a thankless world, is a sad reflection on former generations and our own. Test that! It’ll be valuable practice, and you’ll find I’m right: it was my experience prompted me to write this.

Men are more inclined to accept a touch of graciousness at its face value. Just watch a workman’s face light up with pride if you give him as much as a smile of appreciation for a job of work well done! After all, there *is* a spark of an Edison in him when he fixes the plug in a freezing

room, and even if he forgets your compliment in a split second, you have warmed his heart for that instant and many sparks make the blaze we could be doing with in a world that is growing colder.

Of course, it’s taken for granted you are sincere in what you say. Otherwise there wouldn’t be much point in saying anything, would there? A bit of Blarney never did anyone any harm but the slightest sign of the gratitude you surely feel, does the trick. In everyday life no one wants a vote of thanks: it might even be embarrassing, which would defeat the whole purpose of carpeting the straight and narrow path.

On the other hand, if you don’t love him, you’d best keep that under your hat, or you’ll pay for it – like me! One sunny day I drove past a sour-faced Garda and forgetting the wide open windows, I commented clearly, ‘Hmm, who stole his bun?’ I was rewarded with a dirty look then and a parking ticket for the flimsiest of breaches a few hours later. I was fined £1 or 7 days!

But there’s no hold-up on the cynical ‘Well, she’s paid for it!’ affected to hide our better nature. And with all our faults, we *have* a better nature, if we had a bit of pluck to break the stupid, but deep-rooted idea that plain, ordinary love of your fellow-man is somehow despicable softness.

There’s great talk these times about our non-inhibited society and it is taken to mean sleeping ‘round that kind of thing, but with the spice of courage we could use it to bless not blight our days.



# LONELINESS

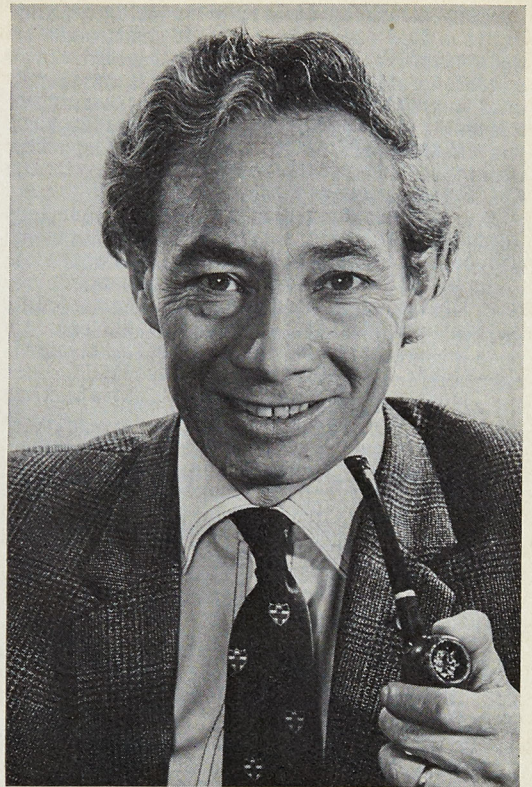
*By The Rev Alan Nin, B.Sc. Ph.D.*

It can be quite rightly said that loneliness is one of the biggest ailments of our time. We are frequently bombarded with statistics which bear this fact out. However statistics themselves can be no measure of the human condition of loneliness any more than they can measure hope, joy or sorrow, but they do enable us, by giving a broad view of the way people live, to gain some idea of the number of potentially lonely situations with which many living in our society are faced.

We can be lonely in so many ways, maybe it is someone living alone, young people living away from home, young marrieds, independent elderly people and of course the loneliness of the handicapped, the latter may ring true to you. Oh, yes, there are many people who show us their kindness and attend to our daily needs with loving attentiveness, but I wonder if they can ever really enter into our inner most feelings of isolation of having to live with a handicap of some sort.

In my experience, lonely people withdraw into the circles of their minds. They are trapped by the revolving doors of their own questions which are only answered by their own changing opinions. If we think of lonely people as being the elderly, bereaved or those who are forced to live alone — then we are wrong, loneliness is found in lively communities, (yes, even in such wonderful communities as we find in Cheshire Homes), in prosperous business concerns, and within the family circle. We know well the emptiness of a crowded city street and the cocktail party where all the other guests are long lost friends.

Loneliness is not quietness. It is not solitude. It is colder. The loneliness of the long distance runner is not so great when he is well within his strength and leading the field home. A solitary country walk can be a harmony of contentment with nature and oneself. Loneliness is being 'without' being cut off from lines of communication that leaves a feeling of desolation and rejection.



We can understand the loneliness of the tower block flats where the inhabitants know the sounds through the wall better than the neighbours' names. The old contemplating in the park looks up to find the world too busy to say good morning. But loneliness can be most costly when it results from the breakdown in a marriage where love and understanding are dead. The beginnings can be so small, not wanting to hurt or worry the loved one, fear of being misunderstood or the fear of not being forgiven. Deception begins and can grow into a gulf which can isolate partners sometimes for years, changing personalities and taking away the hope of reconciliation.

It is a vicious circle of insecurity and personal problems which result in a person withdrawing and becoming so difficult to reach. The strange aloof character who has no interest in us may be imprisoned by his own self-consciousness and fears. We ourselves know times of desperate loneliness when we have been totally unable to reach out to others or indeed to admit our need even to ourselves. The spiral deepens. Even while we put on a nonchalant front the longing for human understanding demands that we protect ourselves from being hurt, from the open involvement of real and costly friendships.



We are all at risk, yet, as the Bible says: "He who would save his life shall lose it, and he who would lose his life for my sake shall find it" . . .

It's amazing how much comfort we can find from the Bible and I hope my following comments maybe helpful to some of you:

If we are forced by circumstances into a situation of loneliness, the promises of God that He is always with us (Matt. 28, 20 and Heb. 13, v 5) and that nothing can separate us from His love (Rom. 8, 39) are especially relevant. Indeed God may use periods of loneliness, as when Christ went into the hills alone (John 6, 15) as a period to reach us and to draw us closer to Himself.

However, it is not healthy for us to go through life alone (Gen. 2; 18 Eccl. 4, 9) and God usually has a plan for us to be provided with companionship. This may be in the form of marriage (Gen. 2, 24) but is not necessarily so. The Bible demonstrates many times other close, God inspired relationships, for example the friendship of David and Jonathan (1 Sam., ch. 18, 19, 20).

Christians too must show hospitality and offer fellowship (Heb. 13, 2; 1 Peter 4, 8, 9) to the stranger and the lonely ones amongst us, not only on a spiritual plane by welcoming them to weekday meetings and Sunday worship, but also at a practical day-to-day level by inviting them into our homes or into our company. Unfortunately, there are often aspects of some people's personalities which make it difficult for us to offer them genuine friendship. Here, we must be aware of St Paul's words in Eph. 4, 2, ". . . forbearing one another in love . . ." and we must pray for the love of God to be worked out in us by His Holy Spirit. Perhaps each of us should seek God's help in removing from our personalities any facet not of God and which may give offence to others.

But, a warning . . . There is a danger however for Christians to be friendly with everyone and no one in particular, perhaps the example of Jesus who often shared his most innermost thoughts with just two or three close friends (Matt. 17 1-13) is a good pattern to follow.

I am a great believer in 'getting involved' especially the lives of others, particularly the lives of those less fortunate than myself. I assure you, it helps one to be really thankful for one's mercies and blessings. Our Lord taught involvement in the story of the Samaritan, who not only shared his goods, with the man hurt and robbed, but showed mercy, concern and compassion.

Finally, may we all heed the words of Jesus, ". . . just as I have loved you, you must also love one another. By this love you have for one another, everyone will know that you are my disciples . . ." (John 13, 34).

## The Toc H Project at 'Greathouse'

"A Place Like Home"—this was the title of the film shown to the volunteers on our first evening at Greathouse, and it provided an excellent introduction to the Cheshire Foundation, its aims and activities.

Our activities at Greathouse were especially centred around organising outings for the residents. Our first was a shopping expedition, when clothing allowances bit the dust of Swindon with amazing rapidity, forcing the outing to Bath the following day to confine itself to less costly activities, such as looking round the abbey, which was enjoyed just as much! Our *tour de force* was the outing to Weston-super-Mare at the weekend, when the weather was marvellous, and we were able to picnic on the front and then go onto the pier. We also spent a day at Slimbridge Wildfowl Trust and had two evening outings to local country pubs, the second of which was a date to remember for one of the older residents, who had never been in a pub before! The residents told us that the outings were a very welcome change, as usually there were not enough escorts available for this, and we were very pleased that most of the residents "volunteered" to go on at least one outing, so that each time different groups of residents and volunteers went out together.

As well as planning outings, we helped the staff in the house and began to learn something about the many duties of a care assistant, or we sat and talked with the residents, wrote letters for them and twice we played games of Bingo, which were much enjoyed by us all! We were all impressed by the residents' cheerfulness and their happiness in the close friendships they made among themselves and with the staff; above all — the residents' endless patience — for instance when we were negotiating, with very little skill, the many kerbs and pavements in Bath.

Our group consisted of eight volunteers, ranging in age from eighteen to twenty-eight. Some had been on TOC H projects before, for others it was the first time, but for everybody living at Greathouse it was a very enjoyable and valuable experience. TOC H projects aim to serve the community — mostly, like this project, by helping people in need; some, such as the music week at Dor Knap by encouraging each individual to be creative according to his own ability, but all projects have in common the coming together of different types of people, who for a short time can experience together living as a group.



# "But we can't do it alone"

(with acknowledgements to 'The Washington Post', U.S.A.)

Referring to a recent front page article on Handicapped People in the *Washington Post* entitled 'The Newest Militant Minority' Mary Bradley who was born with spina bifida, a disorder of the nervous system which paralyzes body from the waist down, but from which, as one can easily tell from this eloquent letter, does nothing to her spirit and mind wrote:

'I am a 33-year old woman, single, educated through graduate school, in excellent physical and mental health, with a good job – and a congenital handicap. Only lately have I begun to consider myself as a moderate-to-militant member of the disabled militant minority.

'I am glad to be here – square between the severely disabled shut-in, who cannot speak for himself, and the able bodied, who can walk, speak and work at will.

'There has been much accomplished but we still have a long way to go.

'A case in point.

'Recently, the state of Virginia held public hearings on a proposed comprehensive social services delivery plan which addresses many difficulties and needs of physically disabled children and adults, with a view to promoting maximum independence and preventing unnecessary institutionalization.

'However, the plan seems to exclude those persons who are severely disabled, mentally alert, healthy, employed full or part time and who gross anything over 350 dollars a month.

'My adequate income enables me to pay for medical insurance, modest room and board and reasonable incidental expenses. But my parents are still alive. What will happen to me when my parents, or those who care for us themselves, become incapacitated or die?

'Granted, we may still be wage earners. But few of us will get rich and we will still need personal care and may therefore face institutionalization by necessity, pending the outcome of such products

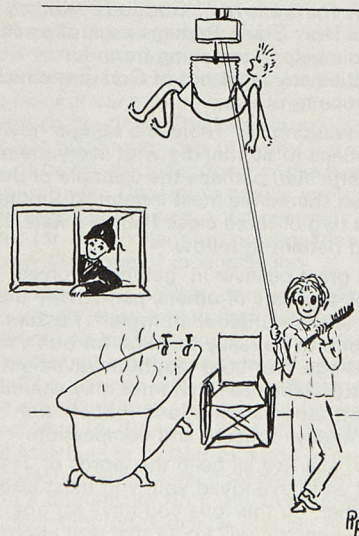
as the newly incorporated Independent Living for the Handicapped. The specific goal of I.L.H. is to establish a series of group residences for seriously disabled adults, who are mentally alert, need limited air, and who would not easily tolerate institutional model custodial existence.

'I do not need permanent institutionalization. Were that to occur my intellectual and emotional capacities could trickle away in sheer boredom, withdrawal and disuse. My second state would be worse than my first.

But I do need the chance to live in a group home, with access to employment, services and social involvement chosen not by the resident social activities but on my own initiative, for my own reasons and on my own responsibility.

'If and when my crunch comes, my first priority must be the preservation of intellectual capacity, my moral integrity, my creative potential and my emotional balance. This will be true regardless of my physical condition.

'If possible, I, and others like me, want to live as free persons within our own limited mobility. But *we can't do it alone*. Somewhere there's got to be a break in this dilemma. I hope we find it.'



Excuse me Sir, "May I see your Licence?"



# Joan Stewart (MURRAY HOUSE) walks again

By Denis Herbstein

A woman whose weight dropped to four stones, who lost the ability to speak or swallow and became totally paralysed, is today walking without crutches.

Doctors had put Joan Stewart's illness down to multiple sclerosis, an incurable disease of the nervous system.

As a girl in Gateshead, Joan Stewart was considered clumsy. She had rheumatic fever, suffered from double vision and later developed St. Vitus Dance. About eight years ago, when she was in the Bensham General Hospital in Gateshead for a gynaecological operation, a lumbar puncture – a painful test to take a sample of fluid from the spine – was performed on her and multiple sclerosis was diagnosed.

She left hospital in a wheelchair and rapidly got worse. Soon she was unable to swallow and pass water. After a second lumbar puncture, in Dunston Hill Hospital, near Gateshead, the diagnosis was confirmed.

Ward 12 at Dunston Hill seemed to be her final resting place. Her condition worsened. She lost her sight and then curled up into a permanent foetal position, hands clenched into fists, only the index finger of her left hand moving.

Then, five years ago, came the first turning point in her life. A room was found for her at the newly-opened Murray House, a home run by the Cheshire organisation for disabled people, in Consett. She weighed four stone.

'In the hospital they had cared for me as a case, not as a person. They did for me what they would do for a geriatric without a mind of her own', she says. But her brain was clear. At Murray House 'I was treated like a normal person. People were forever popping in to tell me the latest gossip, the weather, what I was eating, because with the tube I couldn't taste my food'.

They fixed her up with a "possum" machine so that with her one useful finger she could press a button and call a nurse, switch on the light and radio, and later, when her sight returned, the television.

The next break came when the Murray House matron, Mrs Pauline Wallace, sent her to the psychiatric hospital in Gosforth, Newcastle.

The psychiatrist straightened out her clenched fists and taught her to feed herself. She also had six major operations – two each on her hips, her knees and her legs.

Last April, almost a year after leaving Murray House little better than a human wreck, she walked back in on crutches (though today she even dispensed with these).

Now Mrs Stewart has learnt to make pottery, rugs and dolls. She is chairwoman of the Murray House residents' association. She is also on the Consett Council housing list, and hopes to take her three daughters out of care and live with them again.

Professor Ian McDonald, of the department of chemical neurology at the Institute of Neurology in London, said yesterday: 'Multiple sclerosis is one of those diseases where the early symptoms are identical with a whole lot of things, and can be confused with anything from a simple compression of a wrist right up to a tumour of the brain. This even happens with its later symptoms. There is no sign of a major break-through in finding a cure'.

Doctors are still unable to say what her illness was.

(Acknowledgements to 'The Times')

## DEATHS

*Hasper:* on 26th October 1975, LEONARD ("SPARKS") HASPER, age 73, resident at Cann House since 17th October 1965. The oldest resident and a former Chairman of the Residents' Committee.

*Alsopp:* on 10th December, 1975, SIDNEY ALSOPP, aged 60, resident at St. Anthony's. Sid with Marie was the first married couple here 7 years ago. He was also a member of the Residents' Committee.



Mary Rogers from 'Greathouse' on board 'The Blenheim



# Top level Conference to review benefits for disabled

The Government is to hold a Conference at Sunningdale to review the whole range of benefits and facilities provided for disabled people. The conference, which is to take place in February, will be attended by Ministers, senior Civil Servants and representatives of the disabled themselves.

This was announced by Mr Alfred Morris, Minister for the Disabled, speaking at the opening of a new Day Centre for the physically handicapped, named after him in Deptford, South London.

'Disabled people and helpers in the field will review with me the totality of benefits and services now available. We shall also be considering ways of planning more effectively for the future.

'The conference will be attended not only by Ministers, Members of Parliament, senior Civil Servants and people from the statutory field authorities, but also by disabled people themselves and representatives of their organisations. My Ministerial colleagues and I are confident that we shall leave the conference in a much stronger position to consider priorities for action within the resources available'.

(With acknowledgments to 'Social Services')

## News from the C.C.D.

### Adventure Holidays for Handicapped Children and Adults

Churchtown Farm Field Studies Centre provides Field Study and linked Education/Adventure holiday courses for all types of handicapped children and adults. Accommodation is in a mixture of purpose built residential blocks and converted traditional stone barns. There is a well-equipped laboratory, classroom with audio visual aids and library and photographic darkroom. The dining hall and common room are in the old barn area, plus, there is an *indoor* heated swimming pool. All buildings and facilities are linked by the imaginative use of ramps and a covered concourse.

The Centre, situated close to the Cornish coast, by river and moor, with its own nature reserve and nature trail, offers courses in natural sciences, rural studies, adventure pursuits and leisure activities. An educational farm is being developed, with animals, greenhouses and kitchen garden. Almost all the courses sound exciting and inviting, and are so varied that it is hard to pick a particular example – but how about Exploring the Coast – examining marine life, birds and plants on a variety of shores, dunes and cliffs, with side-looks at fishing, harbours and smugglers?

The courses are very reasonably priced – £30 for a one week course for those under 18 years old, including all residential and tuition fees – £38 for adults. For full details, write to the Warden, Dr M. J. Cotton, at Churchtown Farm Field Studies Centre, Lanlivery, Bodmin, Cornwall.

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## Editors' Acknowledgements

The Editors acknowledge with gratitude the regular receipt of the following periodicals and publications which they find most helpful and interesting, and from which articles and snippets are reprinted in *The Smile* from time to time.

*The Nutshell* of The St. Giles Association, Capetown, South Africa.

*Possibility*. The Possum Users Association.

*Talkabout*. The O.T. Dept., Weemala, Ryde, Australia.

*Action for Development*. The Voluntary Committee of Overseas Aid and Development.

*Hearing and Speech Action*. National Association for Hearing and Speech, Silver Spring, U.S.A.

*Social Services Weekly*.

*Balance*. The British Diabetic Association.

*British Journal of Occupational Therapy*.

*The Royal British Legion Journal*.

*The Disabled Driver*. The Disabled Drivers' Motor Club.

*Rehabilitation*. The British Council for the Rehabilitation of the Disabled.

*Point Three*. Toc H.

*Responaut* for Respirator and other Gadget-aided People.

*The Magic Carpet*. Journal of the Disabled Drivers Association.

*The Muscular Dystrophy Group Journal*.

*M.S. News*. The Muscular Sclerosis Society.

*The Dolywern Digest*. Dolywern Cheshire Home.

*The C.C.D. Bulletin*. The Central Council for the Disabled.

*International Rehabilitation Review*. New York, U.S.A.

*Community Care Weekly*.



## Small Advertisements

*Has anyone in the Homes something to sell? Or have you any needs you wish to make known? Why not use this section?*

**Note to Advertisers.** All enquiries, and matters regarding advertising in *Cheshire Smile* to be sent to: The Secretary, *Cheshire Smile*, Greenacres, 39 Vesey Road, Sutton Coldfield, W. Midlands B73 5NR.

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**Hand made goods** of various kinds are available, or can be ordered, at most of the Homes. Why not visit your nearest Home, and see if there is anything you would like?

**The Cheshire Homes need volunteers** for organising fund-raising events, for undertaking transport runs, for working in the Homes in their spare time—anyone who feels drawn to this kind of work.

### Do you collect Green Shield Stamps?

If not, the following Homes could make good use of them—Heatherley, Le Court, Athol House, Llanhennock, Greenacres and Mote House.

**Spare parts** for electric indoor wheelchairs wanted by London Cheshire Home (Athol House), and Le Court.

### Someone, Somewhere, is Waiting . . .

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Registered as a Charity Number 218186

**The Cheshire Homes** care for the incurably sick or permanently disabled—those for whom hospitals can do nothing further. They are run as homes, and offer the affection and freedom of ordinary family life, the residents being encouraged to take whatever part they can in the day-to-day running of the house and to develop their remaining talents. Disabled people are admitted according to need, irrespective of race, creed or social status.

The Management of each Home is vested in a Committee as representative as possible of the local community. The Leonard Cheshire Foundation (a registered charity) is the Central Trust, and has ultimate responsibility for all the Homes. It owns all the property, and acts as guarantor to the public that the individual Homes are properly managed in conformity with the general aims of the Foundation. Similar charitable Trusts have been established to control the Homes overseas.

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*Residents telephone numbers in brackets.*

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### Avon

Greenhill House, Timsbury, near Bath BA3 1ES.  
Timsbury 70533 (70866).  
St. Michael's, Axbridge, Avon. Axbridge 358 (204).

### Bedfordshire

Amphill Park House, Amphill MK45 2HH.  
Amphill 403247 (403173).

### Buckinghamshire

Chiltern Cheshire Home, 29 North Park, Gerrards Cross  
SL9 8JT. Gerrards Cross 86170 (84572).

### Cheshire

The Hill, Sandbach. Sandbach 2341 (2508).

### Cleveland

Marske Hall, Marske-by-the-Sea, Redcar, Cleveland  
TS11 6AA. Redcar 2672.

### Cornwall

St. Teresa's, Long Rock, Penzance. Marazion 710336  
(710365).

### Cumbria

Lake District Cheshire Home, Holehird, Windermere.  
Windermere 2500 (387).

### Derbyshire

Green Gables, Wingfield Road, Alfreton DE5 7AN.  
Alfreton 2422.

### Devon

Cann House, Tamerton Foliot, Plymouth. Plymouth 771742  
(772645).  
Douglas House, Douglas Avenue, Brixham. Brixham 4787.  
Forches House Cheshire Home, Victoria Road, Barnstable.  
Barnstable 75202.

### Dorset

The Grange, 2 Mount Road, Parkstone, Poole.  
Parkstone 740188 (740272).

### Durham

Murray House, St. Cuthbert's Avenue, Blackhill, Consett  
DH8 0LT. Consett 504000 (502363).

### Essex

Seven Rivers, Great Bromley, Colchester. Colchester 230345  
(230463).

### Gloucester

Cotswold Cheshire Home, Overton Road, Cheltenham  
GL50 3BN. Cheltenham 52569.

### Hampshire

Appley Cliff, Popham Road, Shanklin, Isle of Wight.  
Shanklin 2193.  
Le Court, Greatham, Liss. Blackmoor 364 (229).

### Hereford and Worcester

The Saltways Cheshire Home, Church Road, Webheath,  
Redditch. 021-75 62938 (60590).

### Hertfordshire

Hertfordshire Cheshire Home, St. John's Road, Hitchin.  
S94 9DD. Hitchin 52460 (52458).

### Kent

Mote House, Mote Park, Maidstone. Maidstone 37911  
(38417).  
St. Cecilia's, Sundridge Avenue, Bromley BR1 2PZ.  
01-460 8377 (7179).  
Seven Springs, Pembury Road, Tunbridge Wells.  
Tunbridge Wells 31138 and 33522 (20130).

### Lancashire

Freshfields Cheshire Home, College Avenue, Formby,  
Liverpool L37 1LE. Formby 70119.  
Honorfeld, Blackstone Edge Road, Littleborough,  
Littleborough 78627 (78065).  
Oaklands, Dimples Lane, Barnacre-with-Bounds, near  
Garstang, Preston PR3 1UA. Garstang 2290 (3624).  
Springwood House, Springwood Avenue, Liverpool  
L25 7UW. 051-427 7345 (5400).

### Leicestershire

Roecliffe Manor, Woodhouse Eaves, Loughborough  
LE12 8TN. Woodhouse Eaves 890250.  
Staunton Harold, Ashby-de-la-Zouch, LE6 5RT.  
Melbourne Derby 2571 (2387).

### Lincolnshire

Hovenden House, Fleet, Spalding PE12 8LP.  
Holbeach 23037 (23241).

### Middlesex

Arnold House, 66 The Ridgeway, Enfield, Middlesex EN2 8JA.  
01-363 1660.

### Norfolk

The Grove, East Carleton, Norwich NR14 8HR.  
Mulbarton 279.

### Northumberland

Matten Hall, Matten, Newcastle-upon-Tyne. Stamfordham  
212 (383).

### Nottingham

Holme Lodge, Julian Road, West Bridgford, Nottingham  
NG2 5AQ. Nottingham 869002.

### Oxfordshire

Greenhill House, Twyford, Banbury. Adderbury 679 (667).  
John Masefield Cheshire Home, Burcot Brook, Burcot,  
Oxfordshire OX14 3DP. Oxford 340324 (340130).

### South Humberside

Stonecroft House, Barnetby ND38 6YD. Barnetby 344 (699).

### Staffordshire

St. Anthony's, Stourbridge Road, Wolverhampton WV4 5NQ.  
Wombourn 3056 (2060).

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near Camberley. Crowthorne 2599.  
Hydon Hill, Clock Barn Lane, Hydon Heath, near Godalming.  
Hascombe 383.

### Sussex

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Copthorne 712232 (712735).  
St. Bridget's, The Street, East Preston, Littlehampton.  
Rustington 3988 (70755).

### Warwickshire

Greenacres, 39 Vesey Road, Sutton Coldfield, West Midlands,  
B73 5NR. 021-354 7753 (7960).

### Wiltshire

Greathouse, Kington Langley, Chippenham.  
Kington Langley 235 (327).

### Yorkshire

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Beechwood, Bryan Road, Edgerton, Huddersfield HD2 2AH.  
Huddersfield 29626 (22813).  
Champion House, Clara Drive, Calverley, Pudsey LS28 5PQ.  
Bradford 612459 (613642).  
Kenmore, Whitcliffe Road, Cleckheaton BD19 3DR.  
Cleckheaton 2904 (2724).  
Mickley Hall, Mickley Lane, Totley, Sheffield S17 4HE.  
Sheffield 367936 (365709).  
Spofforth Hall, Harrogate HG3 1BX. Spofforth 284 (287)  
White Windows, Sowerby Bridge, Halifax HX6 1BH.  
Halifax 31981 (32173).



## SCOTLAND

### Dumfries

Carnsalloch House, Dumfries. Dumfries 4924.

### Edinburgh

Mayfield House, East Trinity Road, Edinburgh EH5 3PT.  
031-552 2037 (4157).

## WALES

### Clwyd

Dolywern, Pontfadog, Llangollen. Glynceiriog 303.  
Eithinog, Old Highway, Upper Colwyn Bay LL28 5YA.  
Colwyn Bay 2404 (30047).

### Dyfed

Coomb, Llangynog, Carmarthen. Llanstephan 292 (310).

### Gwent

Llanhennock Cheshire Home, Llanhennock, near Caerleon  
NP6 1LT. Caerleon 420045 (420676).

### South Glamorgan

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Nicholas House, 3 Old Nichol Street, Bethnal Green E.2.  
01-739 5165 (9298).

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Sinag-Tala for Men, Congressional Rd, Carmel Sub-Div.  
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Project 8, QUEZON CITY

AN Children's Home, c/o Sr. V. Baerts, PO Box 2508,  
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Pangarap Home, Paraiso St. No. 31, NOVALICHES

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## 2 Sue Ryder Foundation

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