

ELMORE COMMITTEE

ANNUAL REPORT 1993

***23 Park End Street
OXFORD
OX1 1HU***

Charity No: 257247

ELMORE COMMITTEE MEMBERS 1993

Officers:

Mr R W Elmore	President & Chairman
Dr D W Millard	Vice-Chairman
Mr B Phillips	Treasurer
Mr J P McLeavy	Secretary

Members of the Committee:

Mrs C Angel	Oxford City Council Housing Dept
Mr G Beard	
Chief Supt J Burbeck	Thames Valley Police
Mr B Durham	
Dr R G Flood	Oxford University
Mr P Patrick	Oxfordshire Probation Service
Mrs C Roaf	
Coun B Standingford	Oxford City Council
Miss M Timbrell	Oxfordshire Health Authority
Mrs M Thorne	(resigned 1993)
Mrs J M Wallace	
Rev T S M Williams	

Co-opted Members:

Miss J Carr	Oxfordshire Social Services
Dr M Orr	Oxfordshire Mental Health Unit

Elmore Community Support Team Management Sub-Committee Members 1993:

Dr D W Millard	Chairman
Mrs D Wilson	Oxfordshire Social Services
Mr T Skinner	Oxfordshire Social Services
Miss P Goodwin	Oxfordshire Probation Service
Annabel Wilkes	Cherwell Housing Association
Dr P Agulnik	Consultant Psychiatrist
Mrs C Roaf	

Elmore Community Support Team Members:

Jon McLeavy	Co-ordinator	(1 wte)
Lesley Dewhurst	Support Worker	(0.5 wte)
Jane Edgington	Support Worker	(1 wte)
Angela Stannard	Support Worker	(1 wte)
Melanie Swinburne	Support Worker	(0.5 wte)
Mark Thompson	Continuing Care Worker	(1 wte)
Matt Berkley	Action Research Worker	(1 wte)
Mavis Lowe	Secretary	(0.75 wte)

CHAIR'S REPORT

Although the work of the Elmore Committee is now mainly directed at supporting the Community Support Team since the separation of the Lake Street project, it still maintains its original emphasis on co-operation with other voluntary and statutory agencies. This relationship - and it is a warm and fruitful one - is clearly demonstrated in the Report of the Co-ordinator, Jon McLeavy.

The Support Team is steered by a Management Sub-Committee, currently chaired by Dr David Millard, which has provided outstanding support and advice. The Elmore Committee owes the members an immense debt of gratitude for helping with this complex and often distressing work.

As will be seen from both the Report and the statistical data there has been no diminution in the requests for the Team's services but what neither fully disclose is the increasing complexity of the cases referred to it. That this happens is a tribute to the high professionalism and enthusiasm of the individual members of the Community Support Team which clearly provides an important and highly regarded service. They are entitled to our thanks and on behalf of the Elmore Committee I willingly do so.

Robert Elmore
Chair

INTRODUCTION

The Elmore Committee was constituted in 1968 as a voluntary agency with charitable status.

The Elmore Committee's only active project at the present moment is the Elmore Community Support Team although Committee members still discuss and debate other issues.

The objectives of the Team are:

to provide a flexible and responsive service for Difficult to Place people who have slipped through the existing provision and need guiding back to it.

to offer community support to those Difficult to Place people who can be helped to stay in a stable position within the network of existing provision.

to offer long term care management support to Difficult to Place clients.

to promote inter agency liaison at all levels.

to evaluate progress and achievements in these objectives.

The majority of the Committee's work is in maintaining the functioning of the Community Support Team and as with many local charities its concerns are with finding funding and identifying appropriate areas of work within the network of service provision for vulnerable people in Oxford City.

CO-ORDINATOR'S REPORT

The Elmore Community Support Team was formally inaugurated five years ago by Lord Franks and it has continued to offer a community service to Difficult to Place clients since that time.

Over the years one of the few stable factors has been the nature of difficulties faced by our clients whose definition has evolved to its current three part form:

A Difficult to Place person is someone:

- who has chronic, multiple needs
- does not fit into the current health care, social care, accommodation or criminal justice systems
- is behaving in a bizarre or disordered way

As can be seen from the statistics (see Appendix 1) many people in Oxford fall into the above category and have been helped by the Team.

The last year has been dominated by the implementation of Care in the Community and the Team has had its flexibility tested to the limits as it has adapted to the changing world for itself and its clients.

I feel we have been successful in finding our place in a challenging new situation and have continued to highlight the needs of one of the most vulnerable groups of people in society.

Jon McLeavy
Co-ordinator

THE TEAM AND ITS WORK

The Team has seen few changes in personnel in the last year with nobody leaving and only one new recruit, Melanie Swinburne who has joined us from the Mental Health Unit to take up a half-time support worker post. The core of the Team is still three full-time support worker posts but for the first time this year we have split one of the positions into two half-time jobs following Lesley Dewhurst's maternity leave. Although there were some concerns about how this might have affected the Team we have definitely gained in flexibility and in the expansion of our growing pool of professional skills.

Our move of office from the Probation Headquarters at 42 Park End Street to the Probation Day Centre at 23 Park End Street continues to be a great success with more room for ourselves, a separate client interview room and a more accessible office base. The Oxfordshire Probation Service must be thanked for providing the Team with a city centre base at an affordable price.

The Team is still learning much about the nature of Difficult to Place people and how best to help them. The diversity of problems and needs still astonishes us. We have yet to decide on what constitutes the ultimate Difficult to Place person and it is the Team's ability to tackle issues that range across money, housing, health, the law and social issues that is its greatest strength.

The fact that Difficult to Place people, by definition, are misfits who cannot be categorised by a set of criteria but more by their not fitting into a system still causes referrers problems. Some agencies feel we are an accommodation agency, some that we are a specialist mental health team, some that we deal with mentally disordered offenders, some that we are care managers and some that we simply deal with difficult people. The Team is all of these things and more and it is not surprising that the thirty to forty agencies that refer to us are confused at times.

The day to day work of a support worker is taken up in being a broker of services for an average case load of fifteen active clients at one time; constructing packages of care from agencies with scarce resources who have often had contact with our clients in the past and need persuading to have another go. This means equal amounts of time put into building relationships with clients who are often very isolated and suspicious of professional help and constantly working with agencies to update ourselves on what is available, when it might be available and how to get it.

Underlying the Team's work is the need to make the Network of agencies in the City work together in better and more innovative ways. If the Network does not function as a whole then we can do little for our clients and so, much time is spent in attempting to bring agencies together, to be involved in the planning processes and in tackling blocks in the system.

DEVELOPMENTS

The biggest single development of the year was the Committee's successful bid to the Mental Health Foundation for funding to run a three year research project into the needs of mentally disordered offenders. The Team has consistently received a high proportion of its referrals from the Criminal Justice System and has done much work in the Police Station and Courts. We recognised that mentally disordered offenders could be viewed as a distinct sub-group of Difficult to Place people and the Government's interest in addressing their needs led the Committee to try and find out more. Matt Berkley, who was employed as our research worker, has been in post for a year and his report is appended (see Appendix 2) and gives details of his work.

More than two years ago Oxfordshire Social Services seconded a specialist worker to the Team whose brief it was to work with homeless people with chronic physical health problems. The post has always had a focus on HIV issues and Mark Thompson has developed a number of initiatives around housing and HIV. For this year, in conjunction with the rest of the Team, Mark has been commissioned by the Health Authority to run a pilot assessment project looking at the needs of people living with HIV and housing need.

The Team has always had an interest in offering placements to students both in the hope of offering social work or nursing students a different view of community work and also because they offer a different perspective for the Team. This year we have been able to offer long-term placements to two social work students from Ruskin College and one community psychiatric nursing student from the Mental Health Unit. This is a development we hope to continue with and judging by the demand from local and national colleges one that is regarded well.

Funding the Team has always provided challenges and particularly at the moment due to the development of the contracting process for voluntary agencies. The Team receives funding from four statutory agencies: Oxfordshire Social Services, the Mental Health Unit, Oxfordshire Probation Service and Oxford City Council and at the moment they give annual grants to the Committee. We have opened up negotiations with all of the funding bodies over service contracts and hope to be moving positively forward during 1993 and 1994. The service offered by the Team is holistic and complex and therefore signing a contract for a single specified service is not possible. This means, like many voluntary agencies who have developed projects that fit between the major blocks of statutory provision, that the Elmore Committee will have to discuss its future funding in many different arenas.

CONCLUSION

As far as we know the Elmore Community Support Team is unique. It operates in the small geographical area of Oxford City but across all professional boundaries. It has not tried to define its clients by health status, by social status or by special needs status but by assuming that there is an imperfect system of care and that some people need considerable time, effort and help being guided into it. These people lead vulnerable, isolated but whole lives and the team attempts to address all the issues that clients bring to us.

1993 has not differed greatly from the previous four years because changes in the Team and the way it works are part of the flexible way we do our job. It has been a year of hard work, frustration and elation.

It is possible to describe the Elmore Community Support Team in much greater detail but this Annual Report can only be a precis of our work. If you would like to know more about the Committee or the Team please contact:

Jon McLeavy
Co-ordinator
Elmore Community Support Team
23 Park End Street
OXFORD
OX1 1HU

Tel: 0865 200130
FAX: 0865 246039

REFERRALS JANUARY 1989 - DECEMBER 1992

The Team has received 635 referrals from 40 different agencies in the four years between 1989 and 1992.

Source of referrals

	1989	1990	1991	1992
SOCIAL SERVICES				
City Teams	12	8	6	4
General medical	10	5	1	6
Mental health	8	9	3	6
Care Management Team	0	0	0	5
TOTAL	30 (14.2%)	22 (14.5%)	10 (7.7%)	21 (15.1%)
HEALTH				
Mental Health Unit	21	22	17	22
GPs	6	6	8	3
TOTAL	27 (12.7%)	28 (18.4%)	25 (19%)	25 (17.9%)
CRIMINAL JUSTICE SYSTEM				
Police	5	7	3	0
Solicitors	0	4	3	5
Courts	4	6	6	16
Probation	13	11	10	7
Probation Day Centre	29	9	9	16
TOTAL	51 (24%)	37 (24.3%)	31 (23.7%)	44 (31.4%)
HOUSING/ACCOMMODATION				
Oxford City Council	7	5	13	10
Cherwell Housing Trust	7	4	1	4
Oxford Citizens Housing Assoc	0	1	1	1
Simon House	10	4	3	3
English Churches Housing	4	0	0	1
Windmill House	1	1	0	2
Night Shelter	38	14	10	5
Bridge	7	7	10	13
Other	3	1	4	1
TOTAL	77 (36.4%)	37 (24.3%)	42 (32%)	40 (28.5%)
OTHER				
Churches	1	2	1	1
DSS	3	1	1	0
Housing Rights Centre	1	2	5	2
MIND	11	6	2	0
Libra	1	5	0	0
Porch	1	3	6	0
Self-referral	7	5	7	5
Other	2	4	1	2
TOTAL	27 (12.7%)	28 (18.5%)	23 (17.6%)	10 (7.1%)
TOTAL REFERRALS	212	152	131	140

STATISTICS 1992

The attached figures represent a further analysis of the referral statistics normally collected by the Elmore Community Support Team.

The first section shows in broad terms where referrals came from during 1992.

The second section analyses the 140 individuals referred to the team in terms of their past and current contact with the four statutory agencies responsible for Difficult to Place clients and in terms of needs assessment for the future.

Points of particular interest are:

1. A low level of referrals from an agency does not mean a low level of contact (Housing Department - 7% referral rate, 38% current contact rate).
2. The assessment of future need shows greatest increase for Social Services and the Housing Department, remains the same for the Mental Health Unit and decreases for the Probation Service.
3. The analysis is based on the current situation and will alter rapidly as legislative changes are enacted (NHS and Community Care Act, Children's Act, Criminal Justice Act, Trust status for NHS services etc).

Stats/C

ELMORE COMMUNITY SUPPORT TEAM

Statistics 1992

Referrals

Network	58	41%
Probation	29	21%
Mental Health Unit	22	16%
Social Services	21	15%
Housing Department	10	7%
TOTAL REFERRALS	140	

Contact rate/needs assessment

Social Services

past contact	50	35% ¹
present contact	42	30%
future need	86	61% ²

Mental Health Unit³

past contact	78	55%
present contact	76	54%
future need	72	51%

Housing Department

past contact	18	13%
present contact	54	38% ⁴
future need	98	69% ⁵

Probation

past contact	60	42%
present contact	50	35% ⁶
future need	36	25% ⁷

Stats/c

NOTES

1. Of the 50 people who had had contact with Social Services, 18 (36%) had been in care.

2. The definition of future need for Social Services contact was made by referring to special need categories within the Community Care Plan

Mental Health	64	74%
Elderly	8	9%
Learning disability	8	9%
Children	4	5%
Physical disability	2	2%

TOTAL - Social Services future need 86

3. A total of 100 people were known to have some sort of major mental health problem.

In-patient treatment	66	66%
Out-patient /Community support	18	18%
No known contact	16	16%

TOTAL - known mental health need 100

4. Of the 54 people in current contact with the Housing Department, 16 were tenants of the Housing Department and 10 were tenants of Housing Associations (6 of whom had been nominated by the Housing Department).

TOTAL of tenancies 26 48%

5. The 98 people with future housing need were further categorised as being: tenants, vulnerable tenants (as defined by Social Services research done by Carol Higgins in 1991), accepted as vulnerably homeless under the Homeless Persons Act or in general housing need.

Tenants	16	16%
Vulnerable tenant	10	10%
Vulnerably homeless	40	41%
General housing need	32	33%

TOTAL - future housing need 98

6. A total of 50 people had current contact with the Probation Service.

On a current probation order	12	24%
Mentally disordered offender	30	60%
Other probation contact	8	16%

TOTAL - current contact 50

7. A judgement of people's future need for the Probation Service is necessarily difficult. It is based mainly on those Mentally Disordered Offenders who have a long history of petty crime and are likely to re-offend. Changes in the role of the Probation Service due to the Criminal Justice Act and the development of diversion strategies for the Mentally Disordered Offender will affect this.

Action Research Project: The Needs Of Mentally Disordered Offenders In Oxford City

A three-year project involving one full-time worker from August 1992 to August 1995, based with the Elmore Team and funded by the Mental Health Foundation.

Aim

To identify the needs of, and make recommendations as to local arrangements for, those with mental disorder who have contact with the criminal justice system.

Background

In the last few years many court diversion schemes have been started to deal with mentally disordered defendants. However, formal arrangements for pre-court diversion have not been so common. The prime focus of this project is on what happens to people with mental disorders who are detained at St Aldates Police Station.

Subjects

Subjects include those arrested under section 136 of the Mental Health Act and others whose cases do not reach court. The range of disorders covered includes people with relevant personality disorders or mental handicap, as well as those with major psychiatric illnesses. As the needs of the individuals involved are so diverse, a major part of the research is to follow up a selected number of cases in detail over time.

The Elmore Committee, 23 Park End St., Oxford OX1 1HU

Acknowledgements

I would like to thank the following people for their contributions to this project:

- all of the Elmore Team for giving me such a pleasant base to work from, and for sharing their experiences; Jon McLeavy, Co-ordinator of the Team, for his wisdom and support; Mavis Lowe, Team Secretary, for her patience.
- the Project Steering Group, especially Pat Goodwin, until recently Senior Probation Officer at the Probation Day Centre, for her advice;
- David Millard, Chairman of the Elmore Team's Management Committee, for ideas on research; Peter George of Oxford Brookes University for giving me a fresh outlook on my work;
- Chief Superintendent David Lindley, and his staff at St Aldates Police Station, especially the custody officers;
- The many other agency staff and clients who have given their time, advice information and support.

Matt Berkley
Action Research Worker

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1. The first six months: preparatory phase
2. Months 7-10: data collection
3. Developments in approach
4. Future plans
5. Questions being examined by the research
6. Summary of main points

Appendix A: Organisations and individuals consulted

Appendix B: MDO conferences attended; MDO projects visited

1. The first six months: preparatory phase

In the original project proposal, the first six months were to be spent as preparation for the main research period of 18 months. Work carried out during the preparatory phase (August 1992 to February 1993) included the following:

1. Study of relevant literature.
2. Involvement in day-to-day Elmore Team work. This has included participation in team meetings; some general client work and some work to divert individuals at Court, for training purposes.
3. Visits to representatives of statutory and voluntary agencies, and also users of services:
 - to explain the purpose of the project;
 - to familiarise myself with the current range of service provision, and the responsibilities and policies of relevant organisations;
 - to gather views from key players on needs which are currently unmet.
4. Participation in inter-agency meetings and conferences locally, regionally and nationally.
5. Visits to and establishing links with MDO research and diversion projects in other parts of the country.
6. Developing and piloting a recording document for use in a database of individuals being tracked.
7. At the police station: establishing links with custody sergeants and setting up a system to identify those individuals in custody who the staff think may be mentally disordered. Observing procedures put in motion when mental disorder is suspected.

2. Months 7-10: data collection

The success or otherwise of research at the custody suite was clearly going to depend on the development of good working relationships with custody staff. In practice I have found the staff friendly, concerned and helpful; I have had constant support for the project from Chief Superintendent David Lindley to facilitate access to both people and records.

In February I collected initial data on cases where police called doctors and approved social workers to assess the mental state of detainees. From March, custody officers have been asked to note cases where they thought a detainee might be mentally disordered: I visit the police station to collect basic data on those identified and interview staff. This enables me to identify problem areas - regarding both referral arrangements and gaps in resources - and make further investigations, where appropriate, concerning individual cases. I am also in a position to observe some assessments and decision procedures at first hand.

Custody staff have identified an average of 25 cases a month (out of a total of around 600 custody cases a month) where they suspected mental disorder, - excluding cases where the primary problem is thought to be substance misuse.

I am developing a computer database to analyse information on subjects of the research. Through regular meetings with the Elmore Team support workers and the Probation Day Centre Team I am able to keep track of many relevant cases at court and at other stages in their careers. (The Elmore Team supports clients deemed 'difficult to place' and a significant proportion of these are mentally disordered offenders; the Day Centre Team have among their duties the screening for possible mental disorder of people held in the city magistrates' court cells before court each morning).

3. Developments in approach

Developments since the original project proposal include the following:

1. The need has become clear for a thorough survey of the current situation regarding relevant individuals passing through custody, before any significant extension of the Elmore Team's work. This is necessary in order to gain a clear idea of the gaps in service, in terms both of referral and support work.

2. A steering group was set up in November to act in an advisory capacity for the project. Its members are:

Dorothy Wilson, Team Manager, Social Services
Pat Goodwin, ex- Senior Probation Officer
Dr Peter Agulnik, Consultant Psychiatrist
Jon McLeavy, Elmore Team Co-ordinator
Chief Superintendent David Lindley/Inspector Stuart Barsby, Oxford Police
Matt Berkley, Researcher

The steering group has met 4- to 6-weekly: its discussions have been very useful in shaping the project's development.

3. The research is putting an emphasis on in-depth case studies. These should prove useful in illustrating the variety and complexity of needs within the subject group.

4. I am registering for a PhD at Oxford Brookes University (formerly Oxford Polytechnic) based on this research. Academic input from Peter George of the Social Studies Department has proved very useful in terms both of methodology and of access to related research.

4. Future plans

1. Until August 1994 I shall continue to follow up individual cases in depth from the basic data collated at the custody suite, attempting to identify both needs and what seems to trigger the meeting of needs at various stages in a subject's career.

2. In autumn 1993 a survey will be undertaken of police surgeons, psychiatrists and approved social workers carrying out mental health assessments at the police station. Questionnaires are being devised for professionals to note their observations in particular cases. A positive response on this has already been received from the relevant group of psychiatrists.

4. Part of the research will be to review the histories of a number of mentally disordered offenders who seem to have been inappropriately placed in the past - notably those who ended up in prison - in order to attempt to trace decisions at various points which led to these outcomes.

5. I shall continue participation in the newly-formed MDO Strategic Development Forum for Oxfordshire, and (through the Co-ordinator of the Elmore Team) involvement in the Community Care Plan process. I shall use such opportunities to report interim findings as appropriate.

5. Questions being examined by the research

These include:

- Unmet needs (among clients, agencies and the public).
- What triggers the meeting of needs at particular points in a client's career.
- Where savings can be made as a result of inter-agency co-operation.
- How many of those newly identified as MDO are already known to the existing network of organisations connected with homelessness in Oxford city.
- For those clients known to the network: to what extent their involvement with the criminal justice system brings to light needs previously unknown to agencies.
- Advantages and disadvantages of identification and diversion work at the Police Station rather than at the Court.
- Indications of differential treatment received by people according to their race and/or gender.
- Costed proposals for both referral and service provision elements of an effective local diversion strategy, recommendations for liaison between agencies and training of staff.

6. Summary of main points

The first six months of this project (August to March) included training, gathering views on unmet needs, researching other projects concerning mentally disordered offenders, formulating research questions and designing data recording instruments. The next four months have concentrated on data collection, which has been facilitated by the helpfulness of the police.

Developments in approach since the original project proposal include a recognition of the need for a thorough assessment of the current situation before any new intervention by the Elmore Team; the setting up of a steering group for the project; an emphasis on case studies; and academic input from Oxford Brookes University.

Until August 1994, from basic data gathered at the police station I shall follow up individual cases in depth; meanwhile I shall trace routes to some apparently inappropriate disposals, carry out a survey of assessors at the police station and continue involvement in local policy development groups.

Matt Berkley, Action Research Worker
June 1993

Appendix A

Some of the individuals consulted for perceptions of gaps in current services

Oxfordshire Mental Health Unit

Unit General Manager

Clinical Directors of Departments of Rehabilitation and Continued
Community Care, and of General Adult Psychiatry and Psychotherapy
Consultant, McKnight Unit

Community Nurse

Luther Street GP Surgery for homeless people

Regional Secure Unit

Consultant Psychiatrist

Community Psychiatric Nurse

Social Services

Team Manager, Disability

Approved Social Workers

Care Management Team Leader

Mental Health Specialist Social Workers

Elmore Community Support Team

Support Workers

Clients

Oxford Survivors (group for users and ex-users of mental health services)

Probation Service

Day Centre Team

Courts

Deputy Clerk to the Justices, Oxford City Magistrates' Court

Housing

Oxford Night Shelter Manager

Police

Chief Superintendent, Oxford

Custody Sergeants

Appendix B:

Visits to/links with other MDO and diversion projects

Southampton:	Social Services MDO Co-ordinator
Reading:	DIVERT Scheme
Birmingham:	NACRO inter-agency co-operation scheme.
Surrey:	MDO research and development project (Social Services based)
Gloucester:	National Schizophrenia Fellowship researcher

MDO conferences attended

National Schizophrenia Fellowship (London)
College of Occupational Therapists (Oxford)
Mental Health Foundation / Home Office inter-agency conference (Oxford Region)
National Practitioners' Group for MDOs (Birmingham, Coventry)

ELMORE COMMITTEE - ACCOUNTS FOR THE YEAR ENDED 31 MARCH 1993INCOME AND EXPENDITURE ACCOUNT

	£	£
<u>INCOME</u>		
Community Support Team Grants	NOTE 2	56,440.12
Donations	NOTE 3	515.50
Bank Interest		4,089.59
Insurance claim receipts		1,122.05
Miscellaneous income		13.00
		<u>62,180.26</u>
<u>EXPENDITURE</u>		
Community Support Team	NOTE 2	61,168.75
Support for 60 Lake Street Project		300.00
Audit fees		400.00
Accountancy & data protection fees		160.00
		<u>62,028.75</u>
		£ 151.51

BALANCE SHEET AS AT THE 31 MARCH 1993

		£
<u>CURRENT ASSETS</u>		
Cash at Bank	NOTE 4	42,328.35
Cash in Hand		40.00
Sundry Debtors	NOTE 5	3,440.00
		<u>45,808.35</u>
Less : <u>CURRENT LIABILITIES</u>		
Sundry Creditors and Receipts in Advance	NOTE 6	4,597.52
		<u>£ 41,210.83</u>
Represented by :		
<u>ACCUMULATED FUND</u>		
Balance at Commencement of Year	£	40,648.38
Surplus for Year		151.51
		<u>40,799.89</u>
<u>COMMUNITY SUPPORT TEAM WELFARE FUND</u>		
Balance at Commencement of Year	297.50	
Receipts	555.44	
less Expenditure	(442.00)	
		<u>410.94</u>
		<u>£41,210.83</u>

ELMORE COMMITTEE - ACCOUNTS FOR YEAR ENDED 31 MARCH 1993

NOTES FORMING PART OF THE ACCOUNTS

NOTE 1 - Accountancy Policy

The accounts have been prepared on the basis of historical cost.

NOTE 2 - Community Support Team Funding

Expenditure for the year ended 31 March 1993 is as follows :

STAFF

Project Leader and Social Work Staff	33,721.09
Action Research Worker	9,611.95
Secretarial Support	6,517.48

49,850.52

OTHER RUNNING COSTS

Office Management Charge	1,000.00
Telephones	2,630.98
Stationery, Printing & Office Expenses	411.62
Computer Equipment & Supplies	1,802.72
Travel and Subsistence	831.87
Public Liability/Employers Insurance	1,017.38
Postage, Books and Publications	417.00
Bookkeeping and Payroll Services	1,920.00
Advertising Expenses	780.04
Staff Training & Conferences	403.00
Miscellaneous Expenses	103.62

£ 61,168.75

Income for the year ended 31 March 1993 is as follows :

Oxfordshire County Council Grant	29,200.00
Oxford City Council Grant	10,000.00
Action Research Worker Grant	11,753.00
OCC Continuing Care Grant	4,880.00
AHA - Reimbursement for seconded worker	607.12

£ 56,440.12

N.B. The Oxfordshire Mental Health Unit and the Probation Service each employ a full time worker seconded to the Team.

NOTE 3 - Donations

St. Michaels and All Saints Charities	500.00
Other Donations	15.50

£ 515.50

NOTE 4 - Cash at Bank

Current Account	(86.95)
Business Premium Account	5,024.62
Higher Interest Account	37,390.68
	<u>£ 42,328.35</u>

NOTE 5 - Sundry Debtors

Oxfordshire County Council	<u>£ 3,440.00</u>
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NOTE 6 - Sundry Creditors & Receipts in Advance

Trade Creditors	1,942.05
Inland revenue - PAYE/NI	1,655.47
Receipts in Advance	1,000.00
	<u>£ 4,597.52</u>

AUDITORS REPORT TO THE ELMORE COMMITTEE

I have audited the financial statements on pages 1 to 3 in accordance with approved Auditing Standards.

In my opinion the financial statements, which have been prepared under the historic cost convention, give a true and fair view of the state of affairs of the Elmore Committee as at the 31 March 1993 and of the surplus for the year ended on that date.

Philip C. Westall FCA
Registered Auditor

SIGNED ON BEHALF OF THE ELMORE COMMITTEE

..... CHAIRMAN

..... SECRETARY