

The many faces of CRP

From 4 beds in a disused warehouse to ten dedicated centres across Bangladesh treating thousands of patients a year, CRP is now a far reaching organisation. However it continues to be the day to day hard work, dedication and passion of its staff, students and volunteers that really makes CRP the amazing organisation that it is. Each individual contributes in their own way to improve the lives of disabled people in Bangladesh. Read on to hear their stories.

Could you become part of the team?

Would you like to help to run VTT? There are no paid staff so we depend on volunteers to do all the various tasks involved with running a charity. Do you have the time and talent to help with our Newsletters? What about collecting and editing information for the VTT website? Are you interested in becoming a Trustee? Do you have the time and skills to be our Secretary or Treasurer? These are but some of the areas where we are looking for your help. Please do get in touch with our Administrator if you are interested.



Or could your skills be used out in Bangladesh? If you are inspired by the stories from the volunteers that follow, then get in touch to discuss the many different volunteer roles at CRP.

From the Chairman

Another year on and time to reflect on achievements over the nearly 10 years since VTT was formed. In financial terms just under £1.5 million has been sent out to CRP by VTT. This is a remarkable achievement during a period of austerity and that money has contributed directly to treatment of the poorest. At the same time income from sources in Bangladesh has increased. New departments have been established at CRP such as the Prosthetics and Orthotics; new OutStations including one at Chittagong; a CRP presence has been established in some Government hospitals. Following the Rana Plaza tragedy, CRP played a major role in the treatment and rehabilitation of the injured. Overall the last nine years has been a period of steady increase in CRP's work with disabled in Bangladesh.

But the demand for CRP's services continues to increase. The goal remains to establish centres throughout the country and so make it easier for patients in more remote areas to access treatment. Your support helps Valerie Taylor and her team to do that.

Thank you for helping to give a better life to so many disabled poor people.

Bertie Woolnough CBE
Chairman, Valerie Taylor Trust

P+O department continues to develop

The Prosthetics and Orthotics (P+O) department has gone from strength to strength in recent years, bolstered by the opening of the first School of P+O in Bangladesh three years ago. Last year CRP was able to run 5 mobile clinics taking this much needed specialised service out to those who are not able to travel to CRP-Savar.

Charlotte Walker tells of her time volunteering with the department:

"From learning to eat rice with my hands to watching patients take their first steps in years it truly was an amazing experience. I graduated last June from Prosthetics (false limbs) and orthotics (bracing, splints, supports, insoles etc.) so had decided to venture somewhere before starting out in my career and as CRP has a P&O department it allowed me to do this and also learn things about my profession. Safe to say I had no idea what I was in for, 7 weeks in a city with 4x the population of my home country Scotland.

Disability in Bangladesh was evident even just walking around the streets so the need for my profession is crucial. We would have patients who had their amputations years before and had been wheelchair bound or attempted to make their own prosthesis so giving them a device meant a lot to them. One of my patients was a young boy who had had amputations to both legs 5 years ago due to a train accident



and fitting him with limbs allowed him to go back to school as he hadn't been able to go since the accident.

On a few occasions I was also able to attend some external clinics in village areas (usually poorer than the city) where parents would bring children to see us, many of which had never walked or left their homes. Disabled children can become a burden on poorer families as they are not able to provide a living for the family and can require a lot of care. However CRP provided the patients with wheelchairs, orthoses (assistive devices) and prosthesis to allow them greater independence.

Besides helping in my profession there were lots of ways to volunteer at CRP from taking some of the patients to a museum during their Eid vacation, taking part in a show the physiotherapy students were running, being part of a music video to promote disability in Bangladesh and just playing cards or wheelchair basketball with the patients in the evening. As CRP specialises in spinal cord injury many of the patients stayed there for months for rehabilitation and as you can imagine many of them would be quite down from having their accident but also being miles from their families it was difficult for them. So we would try to spend as much time with them in the evenings as possible as it made such a difference. Even if they didn't speak English cards or games always went down well."



Meet the Staff – Tatafder Sunil Kumar

Tarafter Sunil Kumar has been working at CRP for 18 years. He completed his Diploma in Nursing at Kumudini Nursing Institute in 1992 and worked there for 6 years as an anesthesia technologist.

He joined CRP as a Senior Staff Nurse in 1998. At that time there were only 9 people were working as nurses at CRP and the number of in-patients was much less than today. The Spinal Cord Injured (SCI) patients used to stay here much longer and Sunil remembers it was like a family and everyone enjoyed their time with many co-curricular activities.

At present Sunil is working as a Nursing Superintendent at CRP and 20 nurses are working under his supervision. CRP taught him a lot. He had no knowledge of SCI



management until he joined CRP. Many foreign volunteers who still visit CRP helped Sunil a lot in providing further training. Among them Maggie Muldoon and Jan Vaney are noteworthy.

CRP is a huge organization now with various services and

many more departments have also been introduced. Because of this the interrelationship among colleagues is not as intimate as in the past, however Sunil is so attached to CRP that he becomes upset at the thought of ever leaving CRP.

Outreach into Government Hospitals

Unfortunately, many of the patients under the care of CRP develop serious complications such as contractures or pressure sores prior to their arrival at one of CRPs centres. This is due to lack of knowledge and experience in the local hospitals. Permission has been granted by the Ministry of Health to set up small satellite centres in the Government Medical College Hospitals where patients can receive high quality acute care prior to their transfer over to CRP for their remaining rehabilitation.

This new project will not only improve care for the patients but also further raise awareness of CRPs work throughout the country.

Have you got your copy of Journeys?

This excellent book written by Liz Timms tells the moving and inspiring stories of patients at CRP. Printed in 'coffee table' style, it is a 'must' for any supporter of Valerie's work in Bangladesh. Copies available at the Annual Supporters Meeting or from our Administrator.

Developing skills in the SLT department

Karen Pearce, a Speech and Language Therapist (SLT) from the UK tells of her time volunteering at CRP.

During my time at CRP I volunteered with the SLT department, spending half my time in the academic side (BHPI) and half my time in the clinical side. The academic department has been running for 10 years now and the course is a whopping 5 years long (4 years study and 1 year internship). The clinical department has been running for 6 years. So all in all, Speech and Language Therapy is a very new profession in Bangladesh – it's strange to think that all the speech therapists in Bangladesh know each other and all the heads of departments will have a maximum of 5 years' experience!

My volunteering in speech therapy certainly kept me very busy but I thoroughly enjoyed it. I love the people I was working with! I was welcomed and accepted as part of the team immediately. I was impressed with how many positive things were already happening in the clinical department – group therapy, carer training on how to support communication as well as great skills and knowledge from the therapists and interns.

In the academic side, I helped with the training of the Psychology and the Dysfluency (stammering) modules. The teaching is done in English and in Bangla. I of course delivered my lectures in English (my Bangla is pitiful) but I tried to find



*Me and my wonderful interns
(Masuma, Efa, Fatema, Zahid and Sati)*

some materials relevant to Bangladesh. Trawling through Youtube I managed to find ONE video of people stammering in Bangla – and that was from London!

In the clinical department, I observed the interns giving them feedback and ideas; observed the inpatient and outpatient groups that they run in the department; and gave presentations and training on topics that the team requested.

The fact that therapy sessions are in Bangla actually helped me to give constructive feedback because it's almost as if I'm in the position of the patient with communication difficulties! The activities that I understand and learnt Bangla from are the ones I could praise them for. Whereas the activities where I had no idea what's going on are the ones I could say "a child with communication difficulties probably won't understand this activity either!"

A real highlight for me volunteering in the Speech Therapy department was how receptive the therapists and the interns were to my suggestions. They are so willing to learn new skills and readily took my ideas and ran with them. For example after suggesting that toy animals instead of pictures were needed for the 'Farm Song' in the outpatient paediatric group, Arif (SLT) found a toy cow. As soon as he showed it to the children, their faces lit up, they were engaged and reaching for it. I was so



*Paediatric inpatient communication group
(where carers are given advice on how to develop
their child's communication)*

happy it was my suggestion that contributed to the children's enjoyment and engagement in this activity.

Another highlight has been doing the staff training. After completing a teaching on 'Attention building activities', I observed Sati (one of the interns) in one of her therapy sessions. She had taken some of my ideas, developed them as her own and conducted a near perfect session that engaged the children and had them smiling and laughing throughout. I was beaming with pride!



The interns try out newly developed resources with inpatients

Sculpture Exhibition Raises Money for CRP



Valerie with Alison Blake and artist Arham Ul Huq Chowdhury

In February, **Ms Alison Blake, British High Commissioner** allowed CRP to hold a sculpture exhibition titled *Hard Emotions* in her garden.

The sculptures were created by **Arham Ul Huq Chowdhury**, a volunteer and supporter of CRP for the last 16 years, and pieces of his work have featured in the VTT newsletter in the past. The sculptures were all made from scrap metal, leftovers from CRP's workshops. They were lit up after dark on Thursday and bathed in sunshine all day, Friday.

A number of sculptures were sold raising Tk. 350,000 to add to the Tk. 100,000 raised last autumn during an exhibition at the Alliance Francaise in Dhaka.

The income raised will be used to support poor paralysed patients undergoing treatment and rehabilitation at CRP.

CRP continues to promote awareness of scarf strangulation

CRP, along with the Savar Upazila Administration jointly organized an awareness programme on 5th December 2016 at Savar Upazila Auditorium. 15 Headmasters from different schools and some NGO representatives joined the programme. It started with a presentation of the current situation of scarf strangulation in Bangladesh which was followed by an awareness song on the scarf injury issue composed by the students of Bangladesh Health Professions Institute (BHPI). Significantly, 50 Easy-bike drivers and 30 Easy-bike owners attended the awareness campaign.

After the discussion session Valerie and Ms. Sanjida (from the Savar Upazila Administration) jointly placed a specially designed wooden strut, manufactured in CRP-Wood workshop, to cover the gap between the two seats which can greatly reduce the risk of scarf injury. CRP hopes that, with continued awareness raising and support from the Government these accidents can be prevented.

Bee Keeping becomes a reality at CRP

Through persistence and the invaluable help of some Bangladeshi friends, Tim Allen's idea about beekeeping training for CRP patients became a full-blown reality in just 4 months.

When I suggested setting up a beekeeping project this idea was warmly received. Bangladeshis struggle to find pure honey (their shop-bought stuff is heavily adulterated with sugar), so the prospect of having CRP beehives was very popular. However, making the project a reality involved lots of paperwork and waiting for other people and was very slow to get going effecting my moral.

Luckily for me, Volunteer Coordinator Masud was excited about the bee project; not just by the prospect of pure honey (!) but by the fact that it could help to train many patients. Masud is one of the most can-do people in the whole organization of CRP, and I know that without his constant encouragement, chivvyng and his frequently taking tasks off my shoulders, the beekeeping project would have remained just a nice idea to this day. The focus on training patients gave the work new impetus too – it was energizing to think that we could help give patients a much-needed focus and source of income.

Firstly, we scoped out potential hive sites at CRP's Ganakbari site and visited a place called Manikganj, to meet another NGO and quiz them about their own beekeeping experiences.

The final piece of the jigsaw came when we invited the "Bangladesh Institute of Apiculture" (BIA) to visit CRP Savar. Their mission is to support poor and vulnerable people in Bangladesh to gain a new livelihood through beekeeping, and as soon as they arrived their enthusiasm and professionalism promised that this would be an exciting partnership. Before I knew it the BIA were on site, teaching 5 staff, 2 patients and their carers how to keep bees!



Transferring the bees to their new home

Our biggest problems came from the practical side. When the BIA trainer arrived, he came bearing bees – 5 colonies in their hives. The first time we fully opened up a hive was a practical session on the last day of the BIA being there. Our work was transferring them from the small hive they'd been transported in, into a larger new home. The bees behaved themselves, the trainees were excited, and



Confident village women and girls who had no qualms about picking up live bees between their fingers!

all seemed to go well... Until the following day.

Together with the trainees we opened up the same hive to see how well the bees had settled after their transfer. Even before we opened the box, we could hear from the angry tone of the buzzing that something was wrong. Sure enough, as soon as we removed the lid, ALL the bees swarmed out, and started buzzing in their hundreds and thousands in a cloud around our heads – it was a true swarm. After a couple of minutes they had settled calmly high up on a nearby tree branch, as most swarms do. What a way to start my first lesson!

It has to be said though, the trainees' attitude was brilliant, and this mishap was rightly seen by all as a great learning experience. We all fervently discussed what had

happened, why, and what we should do next. I was torn – it is possible to catch and re-house a colony of bees immediately after they’ve swarmed, but the clock is ticking... already scout bees were searching for a new permanent home. There was only a small window of opportunity to keep our colony. On the other hand, they were twenty feet up – dangerously high, and though in a health-and-safety-free country like Bangladesh there are always people prepared to take on risky tree climbs, I certainly didn’t want to be responsible for another spinal injury to add to CRP’s patient list. So, in the end, we left the bees, and they left us soon after. A memorable way to learn!

The final excitement from the first training batch came a week or two later on a field visit to the provincial town of “Modhupur” (which funnily enough translates as honey town!). The reason for our visit was to collect replacements for the 3 colonies the BIA had originally given us, as well as a chance to see beekeeping in a village situation. The most interesting thing was that the chief beekeepers were



Rikta and me – proud of our achievements

women. This interesting role reversal was due to that particular village being populated by the rare matrilineal “Garo” tribe – whose female-led property and activities closely reflect the sisterly society of the bees themselves.

During this first, staff-focused, “train-the-trainer” bee course, Rikta (the only female staff participant) had stood out as one of the most engaged of all. This was good news, because the responsibility for teaching CRP’s first in-house Beekeeping Vocational Training Course fell to her.

We spent the final month of my time writing, translating and

delivering simple but comprehensive, visual and interactive Beekeeping Powerpoint Presentations in Bangla, which I strongly hope will continue to be a useful resource. Rikta’s training style was perfect – firm but fair, involving everybody, peppering her explanations with story-like comparisons from everyday life. I knew without a doubt that the course was in safe hands.

I was glad to learn that all this had some kind of positive effect on the patient trainees too. On one patients’ discharge form, under the “future plans” heading I read “Rafiq plans to set up a beekeeping social enterprise in his village” – music to my ears!

After much running around, meetings and assurances, late-night typings of documents and protocols, I’m 80% confident the project will continue long after I’m gone – and in the field of new sustainability projects those are pretty good odds! It was brilliantly exhausting to finish my time at CRP in a flurry of activity. I’m grateful to Rokhsana, Masud, Rikta, and the bees, for ultimately making my working life at CRP into a happy story with a long-term legacy.

New Work Opportunities for Disabled Persons

CRP’s Madhob Memorial Vocational Training Institute (VTI) organized a selection programme for the industrial sewing machine operators in January, 2017. One representative from TESCO, eight factory representatives, one representative from CRP’s Inclusive Job Centre, 24 participants with disability, CRP’s Rehabilitation Manager and VTI’s staff were present in the program. Among the participants, ten were selected by factory managers. The Representative from TESCO committed to ensure employment for the rest of the participants as soon as possible.

William and Mary School benefits from mother and daughter team

Mary and Juliette Flach report:

We travelled as 'General Volunteers' to spend 2 months in Bangladesh. We don't know whether many other mother and daughter combinations have volunteered at CRP, but from the knowing nods when the relationship was explained, people approved of an 18 year old girl being accompanied by her watchful mother! In reality, quite who was looking after whom was debatable!



As we had run a MENCAP youth club for children with special needs in the UK, plus had a wide range of school and pre-school experience, we spent much of our time helping in the William and Marie School at CRP, Savar. With the teacher from Beli class, Mary explored different sensory experiences that could be offered to the children with profound learning difficulties in her class; the wonderful grounds at CRP offered many opportunities and it was easy to note how well the children responded to these new stimuli.

We had some very special times in the wards too when we visited armed with the ever popular 'Connect 4' and other games. Juliette would often ask patients 'Akta gan gun?' – can you sing a song? She'd then sing one in return in English and these exchanges would often draw large crowds. We hope that in our own small way, these interactions helped patients feeling of self worth.

We witnessed that patients and their family carers were a great support to each other. Their days were punctuated by treatments and therapies, but also by daily sports activities for the patients and numerous cultural events. Despite people's life changing accidents, there was a strong feeling that with good medical input and training, lives could be adapted and that CRP would be there for follow-up support and advice as long as they needed, to help them make that journey.

New CRP centre opens in Pabna

A new centre of CRP has started its journey in Pabna in order to meet the needs of patients coming to CRP-Savar from the northern part of the country. CRP-Pabna started to provide services in the premises of Pabna Diabetic Samity from 1st January, 2017. It is the 10th CRP centre to open across the country. A total of 7 staff, including therapists and administrative staff are working there providing outpatient services similar to CRP-Savar.

Following on from writing the excellent book '**Journeys**', Liz Timms is now in the final stages of writing a history of CRP. The working title for the book is **Centres of Hope – a History of 35 years**. At this stage we do not know when the book will be available so keep an eye on the VTT website and our newsletters.

In a joint initiative the Community Based Rehabilitation Unit and the Department of Biomedical Physics and Technology have been trying a new device called a **Pressure Relief Alarm**. It is hoped this simple device which reminds patients and their families of the need to change position regularly, when combined with the other initiatives carried out by the CBR team will result in a reduction in readmissions with pressure sores.

OT Students have rewarding placement at CRP

Heather Bronson and Mandy Hong write:

Last summer, as we were approaching the end of our occupational therapy program in Canada, the opportunity arose to do one of our final placements at CRP. We both had previous experience in developing countries, and were both keen to expand our occupational therapy skills in a country that would be quite different from our own. When we heard about CRP and about the variety of rehab services it offers, we were intrigued. Once at CRP, we were warmly welcomed by the staff as well as the patients and their families. Heather chose spinal cord injury and Mandy paediatrics as the departments in which we would do our placements. Over the next month and a half, we learned a lot about occupational therapy practice in our respective departments, and as we did so, gained an appreciation for some of the challenges faced by patients and clinicians in living with and doing therapy for disabilities in Bangladesh, including the limited availability of services, limited resources such as adaptive technologies, and limited understanding of disability by those in patients' communities. Despite the challenges, the therapy staff do an amazing job of providing treatment, education, and care to support patients in living their lives as fully as possible. We were pleasantly surprised to discover the innovation and creativity that the therapists put in their service delivery. The majority of the equipment and



Mandy with one of her patients

tools were developed within the department; anything from sensory tools to play equipment to specialized seating. The therapists made great efforts to communicate and collaborate with team members and parents and thereby created a trusting relationship with clients.

Beyond gaining clinical skills, what really made our time at CRP a valuable experience was the friendships we built with the people there. Each week, we would consistently visit homes for dinner, play games in the hall with new friends, discover local food with CRP staff, and plan outings to see sites. Our experience at CRP was better than we could have imagined or hoped for. We will be excited to see what developments come about there over the coming months and years!

CRP-Savar's Theatres due an upgrade

Long standing supporters **Roger and Jan Varney** are taking on an ambitious new project to help with a complete refurbishment of the operating theatres at CRP Savar, bringing them up to international standards.

This will include the installation of a negative/positive filtered air system essential for maintaining a sterile environment during operations, as well as replacement of a variety of theatre equipment including the surgical table and overhead lights. This sizable project is likely to cost around £250,000 and a number of funding possibilities are being explored including support from Rotary International. Keep an eye on the VTT website and future newsletters for ongoing updates of this exciting venture.

Long term volunteer tells of what CRP has done for her

My name is Sharmin Rahman (Neon) I was born in England three months premature and I have a spastic type of cerebral palsy. Although when I was younger I was able to walk and attended mainstream school, at the age of 11 my condition began to deteriorate and I was struggling to walk. At this time my family and I returned to Bangladesh and my life drastically changed. I became completely confined at home. In Bangladesh 20 years ago disability was unacceptable. It was normal for a person with a

With renewed hope I decided to study hard and sit O'Level Examinations. I passed and was overjoyed. Later I also managed to complete a distance education course on Business Communications from the Institute of Business Administration and Management UK.



Children at the school, Credit Mukti Mohammed

disability to stay indoors and do absolutely nothing. There were only a handful of special schools and inclusive education was unthinkable. Since, I did not need to attend a special school and I would not be able to attend a normal school due to accessibility reasons, I studied at home. I was frustrated, friendless and confined.

A physiotherapist referred me to CRP for leg braces. The day I entered through the gates of CRP was a turning point in my life. I met employees in wheelchairs and saw students returning from school in wheelchairs. Meeting them I realized that despite disability if proper opportunity is given then everything is possible. They inspired me and my negative attitude towards disability in Bangladesh changed.

I took it as a challenge that if they could fend for themselves why should I, with all I had, remain in the dark, confined and frustrated. I had to prove to myself and others about my ability and the only way to do this was study.

Needless to say without the support of my parents and the frequent visits to CRP nothing would have been possible. Since 1998 I have been a regular contributor to the magazine and Accessibility Newsletters of CRP publications as a freelance writer and translator. In 2001, I started to work as a volunteer at CRP's publications department. I helped with the editing and translations for the annual reports and newsletters.

Since 2006, I have been working as a volunteer teacher in the Special Educational Needs Unit at the William and Mary Taylor Inclusive School. I like to spend my time with the children with cerebral palsy there. They are always eager and enthusiastic to learn and I am impressed when they all crowd around me and eagerly tell me to teach them.

My long acquaintance with CRP has helped me overcome my frustrations and seek an active life. I have been able to make friends and meet many foreign volunteers. I intend to continue to contribute my time at CRP and also try to do something for the children with cerebral palsy.

WAYS YOU CAN HELP

The disabled poor in Bangladesh continue to need help. The Valerie Taylor Trust supports the Centre for the Rehabilitation of the Paralysed. This is the only place in the country where the paralysed are given specialist treatment – free of charge for the very poorest.

Support our work by:

- Regular donations by completing the back page of this newsletter – our preferred method.
- Donate on-line to our bank, details overleaf, or via www.valerietaylortrust.org, www.paypal.co.uk or www.justgiving.com.
- Donate by Text to TXTVTT12 £+ the amount (£1 to £10) from any UK mobile phone to 70070. You will receive confirmation of your donation which is deducted from your mobile phone without charge for the text message.
- Please register your donations for Gift Aid if this is applicable.
- Use a VTT Collection Box in the home and outdoors – obtained from the Administrator.
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