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St Patrick's
Mental Health Services



Annual Report
& Financial Statements
2014



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Introduction

Acknowledged as a leader in the provision of the highest quality mental health care, St Patrick's Mental Health Services is Ireland's largest, independent not-for-profit mental health service provider.

Accounting for some 12% of the country's total in-patient care and treatment needs, St Patrick's Mental Health Services is also recognised for its ongoing promotion of mental health awareness and advocating for the rights of those experiencing mental health difficulties.

Wellness and recovery principles that empower service users to better manage their mental health and to lead fulfilling lives is central to the ethos of the organisation, which has continually expanded and enhanced its range of services to meet those objectives. St Patrick's is also a teaching hospital aligned with Trinity College Dublin.

St Patrick's Mental Health Services is driven by a vision of society where all citizens are given the opportunity to live mentally healthy lives. The organisation is governed through a charitable trust set out by a Charter established in 1746. It is independently governed by a voluntary Board of Governors, none of whom receive any remuneration for their services to the Trust.

St Patrick's Mental Health Services is an independent not-for-profit organisation and receives no government funding. The organisation receives fees for its services from service users and/or their health insurance company. There are no shareholders and any surplus funds are put back into extending its services for those who need it.

St Patrick's Mental Health Services is recognised as a leading provider of mental health care, promoter of mental health awareness and as an advocate for those experiencing mental health difficulties



As a result of its unique position, it is therefore essential that sufficient returns from its operations and assets are generated through prudent management to ensure its long-term sustainability in the fulfilment of its objectives.

During 2014, there were in excess of 4,000 admissions to the organisation's in-patient services and in excess of 6,000 day care attendees, with treatment provided by multi-disciplinary teams comprising highly qualified professionals. Over the same period, more than 13,000 visits were made to St Patrick's community-based Dean Clinics around the country.

Report of the Chairman of the Board of Governors

Our compliance with the Mental Health Commission's standards illustrates our commitment to the highest quality as we work towards maintaining and improving our services

It is my privilege, on behalf of the Board of Governors, to present the 2014 Annual Report of St Patrick's Mental Health Services.

As you will read elsewhere in this Report, it has been another year of significant progress throughout the organisation, with considerable achievements at every level.

We continue to maintain our position as one of the leading providers of mental health treatments in Ireland but that status is only achieved through hard work and commitment. We are continually seeking ways to enhance what we offer. That we can do this consistently is the result of dedicated staff and volunteers led by a strong management team and Board of Governors.

Together, they ensure that we keep up the high quality of our services while always looking for innovative ways to prevent and treat mental health difficulties.

Corporate Governance

St Patrick's Mental Health Services is a body corporate, the operation of which is set out by the Charter which was established in 1746 and supplemented in 1888, 1895 and 1897 and 2014. The Charter details the Memorandum and Articles of Association. The State adopted the Charter's orders in 1926.



St Patrick's is committed to maintaining high standards of corporate governance which is the subject of considerable Board and management time and attention to ensure our governance arrangements reflect the present and future needs of the evolving organisation. As a registered charity and in keeping with best practice for the sector, the Board of Governors at its meeting in May 2015 made the decision to implement the voluntary governance code for charitable and voluntary organisations. Although many of the code's provisions are already in place, the Board and management are committed to its full implementation during 2015.

The Board of Governors is charged with the responsibility of administering the Trust on a not-for-profit basis. In so doing, it is responsible for overseeing the operations and is accountable for providing quality health care services to those individuals under the care of St Patrick's Mental Health Services.

Significant Board and management time is expended on governance-related matters in addition to the activities of the five sub-committees of the Board, ensuring the delivery of high quality services, the continued financial well-being and reputation of the organisation.

During 2014, the Board met eleven times. The Board is comprised of twelve non-executive Governors. Five of the Governors are ex-officio Governors, the appointment of whom is prescribed within the Hospital's Charter. The Chairperson of the Board is nominated by the Governors. Each of the five sub-committees of the Board operates to terms of reference that are approved by the Board, and each sub-committee chairman formally reports to the Board. The Governors nominate a chairperson for the Finance & Audit Committee, Quality Governance Committee, Remuneration Committee and the Research Ethics Committee from their members.

The Nominations Committee, which considers appointments to the Board of Governors, is chaired by the Chairperson of the Board. To guide the Capital Development plans of St Patrick's University Hospital, a campus development project steering group committee has been formed, on which some board members sit.

The Board delegates the day-to-day management of the organisation to an executive management team led by the Chief Executive as well as having certain matters reserved for its decision. The Chief Executive, Medical Director and Finance Director attend the Board of Governors meetings in an attendance capacity and other members of executive management team attend committee meetings in an attendance capacity at the request of the respective chairmen.

The Board also operates the practice of *Visiting Governor* where each month a member of the Board visits a specific area or service of the organisation and reports to the Board at the next meeting. A service user representative also attends a meeting of the Board on a quarterly basis and members of staff are also invited to present various issues and topics to the Board.



Mr Willie Cotter being presented with his long service award by Mrs Caroline Preston

Our *Empowering Recovery* strategy is focused on providing specific short- and long-term benefits to service users and their families. Our compliance with the Mental Health Commission's standards illustrates our commitment to the highest quality as we work towards maintaining and improving our services under four core activities; - service delivery; advocacy; research and training; and development of service user participation.

Yet again, the Governors of St Patrick's have provided outstanding leadership and oversight of the work undertaken by the organisation and I wish to acknowledge the immense contribution of: The Most Reverend Dr. R. Clarke, The Most Reverend Dr. M. Jackson, The Very Reverend Canon V. Stacey, The Very Reverend D. Dunne, The Hon. Mrs. Justice S. Denham, Mr. Justice R. Keane, Mr. M. Beresford, Mrs. B. Godley, Ms. C. Gill, Dr. J. Hillery, Mr. D. Kitchen, Mr. C. Killeen and Prof. J. O'Connor.

I would also like to take this opportunity to highlight the most valued contributions of donors, supporters and members of the St Patrick's Hospital Foundation during the past year. Their input cannot be under-estimated in the present economic climate.

Mrs. Caroline Preston, Chairman

Chief Executive's Report

In a year in which our *Empowering Recovery* strategy continued to be the guiding principle for our activities, 2014 was the busiest year in our history, and arguably our most productive, in almost every facet of the organisation.

More people than ever before sought our assistance during 2014. This underlines the fact that there is a greater level of awareness of mental health issues, where we are to the fore with our ongoing promotional campaigns, and that the public realises the need for human rights-based, expert, professional intervention.

One of our annual targets is to meet the standards and regulations set by the Mental Health Commission and it is pleasing to be able to report that we were, yet again, compliant. It speaks volumes for the dedication of our staff and the systems we have in place that we consistently reach this milestone.

The increased need for our services underlines the fact that there is a greater level of awareness of mental health issues and of the need for human rights-based expert, professional intervention



Our range of mental health services continues to be based on wellness and recovery principles and we continue to encourage service user participation in the planning of services and treatment programmes.



Conor Farren and Sheila Pomeroy, winning artist, Favourite Painting Competition 2014

Service delivery achievements during the year included meeting the highest level of demand for clinical activity seen in the last ten years, the introduction of a new in-patient recovery programme and the further expansion of our Dean Clinic network nationwide.

Initiatives include the progression of our plans to develop the first National Mental Health Wellbeing and Recovery Campus in Ireland, consolidation of our plans to develop a Later Life Mental Health Wellness Campus in St Edmundsbury and ongoing improvements in technology-based support services. A satisfaction survey of service users undertaken during the year highlighted the fact that we continue to maintain our high levels of service to meet the demands of those requiring them.

As we enter 2015, we now seek to build on the successes of 2014. We will strive to improve on what we do and how we do it, enhance our existing services and always seek to introduce new ones to meet specific needs.

Our values and aims remain the same as we commit to providing the highest quality mental health care, promote mental health and advocate for the rights of those experiencing mental health difficulties.

Paul Gilligan, Chief Executive Officer



98FM and Walk In My Shoes fundraising event



Willow Grove Adolescent Unit

Medical Director's Report

Our highly respected research clinicians maintained their remarkable rate of research output, enhancing our service further as a leader among its peers

It might seem odd to state that the increased number of people availing of our services during 2014 would be viewed as a 'positive' but that is precisely what it is - it is not that the mental health of the country is getting worse but rather that our message is getting through and more people are taking the opportunity to seek help to address their mental health issues.

Some 4,000 in-patients and 16,000 out-patient visits represent the most active year in our history. The statistics are also a reflection on our ongoing efforts to develop, enhance and maintain a wide range of services based on the recovery principle and on human rights, where possible by evidence-based best practice. However, it is important to note that we are seeing more people for a shorter period of time, underlining that we are delivering the right therapies in the most effective and efficient manner.



Enhancing the clinical experience means in-patients get involved in the process from the earliest stage, an important factor in their recovery. In order to meet the demand, we are acutely aware that actions must follow on from positive awareness of mental health difficulties.



Summer family day



Professor Lucey at the launch of Upbeat on Air



Stephen Gaffney, 2nd runner up in the Short Film Competition, pictured with Professor Jim Lucey

Maintaining that awareness is a critical element in our strategy so we use PR and promotional opportunities to keep the issues to the fore. Invitations to speak at public events and to be interviewed on TV, radio or by the media are welcomed, as they are a highly effective way of talking directly to the nation about our most pressing need, our mental health and recovery.

Our mindfulness programme again grew during the year. It encourages the public to be more 'mindful' in the diverse areas of society, while it is also beneficial for our staff members too.

Another growing success is our wellness recovery action plan (WRAP) which provides a structured route map towards improving cognitive behaviour. The Dean Clinic network of community-based mental health services has expanded further, illustrating the vital role it can play in various locations. In tandem with that development, we placed even greater emphasis on liaising with primary care providers such as GPs.

As always, our highly respected research clinicians maintained their remarkable rate of research output, adding significantly to our understanding of many topical issues in the field of mental health and enhancing further the reputations of our service as a leader among its peers.

Combined with the other actions and achievements, this clearly illustrates our commitment to working to the primary principles of Empowerment, Recovery and Research*.

**Professor James Lucey,
Medical Director**

** For a list of Peer Reviewed Research, see Appendix A on page 29*

Nurse graduation class of 2014



Quality & Clinical Governance Report

In keeping with internationally accepted best practice, St Patrick's Mental Health Services delivers care and treatment that is person-centred and recovery-focused

Throughout 2014, the continued achievement of excellence in the delivery of Mental Health Services remained central to our mission. Exceptional Clinical Governance is required to deliver on our continued insistence on the very highest standards.

In 2014, we continued a comprehensive programme of developments overseen by the Clinical Governance Committee. These developments are underpinned by the Quality Standards outlined in the Mental Health Commission's Quality Framework Document.

- We continue to maintain effective clinical governance structures and processes that include regular clinical audits (the reports of which are reviewed by the Board of Governors), incident reviews, external inspections, critical incident analyses and practice reviews.
- In April 2014, St Patrick's Mental Health Services hosted a National Symposium entitled *Measuring Quality in Mental Health Care*. The organisation facilitated a range of presentations from experts in the Irish mental health care sector.



Multi-disciplinary meeting at a Dean Clinic



Walk In My Shoes fundraising celebrity calendar

The aim of the symposium was to examine the content of mental health care and the setting of standards around the whole patient experience. 'Mental health services can only be enhanced by quality care which is effective, efficient, equitable, safe and just'.

- St Patrick's Mental Health Services is committed to the protection of children and to the promotion of positive parenting. As part of this commitment, a screening tool has been adopted which is designed to assist our Department of Social Work in promoting positive parenting.
- We developed the links to wellbeing programme to actively address physical health risks among our service users. By promoting physical health, mental health is also improved as an active lifestyle, healthy eating, no smoking and effective communication have a positive effect on mental health. The programme includes groups on everyday interactions, led by a Speech and Language Therapist, and aimed at addressing the communication difficulties often experienced by those with mental health problems.
- The depression recovery programme was developed to provide a stepped care model with the most flexible delivery for people with depression. The stepped-care model provides a framework in which to organise the provision of services, and supports service users, carers and practitioners in identifying and accessing the most effective interventions.
- St Patrick's Mental Health Services has adopted e-learning technology as one means to educate and provide information for staff training. Use of this format allows the user to train at a pace and time of their own choosing.

In this way, it is also resource-efficient in terms of trainers and training facilities. Staff training and understanding of the provisions of the Mental Health Act 2001 is a required and essential aspect of respecting those rights.

*Walk In My Shoes
Hell & Back fundraising*



To assist in staff training, an e-learning module on the provisions of the Mental Health Act and specifically Section 23 of the Act has been developed which covers staff responsibilities when a voluntary service user presents with a mental disorder and wishes to leave hospital.

- In keeping with national and internationally accepted best practice, St Patrick's Mental Health Services delivers care and treatment that is person-centred and recovery-focused. In order to enhance the recovery-focused nature of our services, we piloted a project to deliver wellness recovery action plan (WRAP) to in-patient service users. Ward-based nurses will facilitate WRAP groups on an on-going basis on each individual ward.



Cillian O'Gaora speaking at the TY Graduation Ceremony

- We introduced the clozapine initiation and treatment pathway (CIP). The pathway was developed in line with guidance issued from the Clozaril Patient Monitoring Service (CPMS). In 2014, the CIP was updated to reflect emerging evidence to enhance monitoring and clinical management within the first four weeks and a hospital policy was developed to provide governance over the use of the pathway.
- In St Edmundsbury Hospital, a new Day Service Facility and Information Centre is now available to service users.

- Perhaps the most significant clinical governance initiative undertaken by the organisation in 2014 was the introduction of the Team Liaison Nurse roles. In 2014, an opportunity arose when the Medical Registrar Training Scheme of the College of Psychiatry reviewed the national allocation of junior doctors and reduced the number of doctors in training available to St Patrick's Mental Health Services (SPMHS). On foot of this, a major quality initiative has been implemented to better utilise available medical and nursing resources. The organisation acted promptly to address the medical resource deficiency, appropriately allocating medical and nursing resources based on type and level of clinical need. This was achieved in three steps:

1. A re-organisation and management of the reduction of Non-Consultant Hospital Doctor (NCHD) numbers from 27 to 21.
2. Seven registered Psychiatric Nurses were up-skilled and allocated to Multi-Disciplinary Teams (MDTs) where a second NCHD is not allocated (5 of the 7 nurses required commenced in July 2014 with 2 more planned for January 2015). These Team Liaison Nurses work as part of the MDT and engage in many of the activities previously completed by the NCHDs such as admission assessments (in conjunction with the doctor), referrals and enhanced clinical decision-making.
3. St Patrick's Mental Health Services will establish a Primary Care Service to work on the grounds of St Patrick's University Hospital to work across all three approved centres. The Primary Care Service will consist of a GP and two practice nurses.

It is envisaged that this initiative will not only address medical issues that arise that were previously managed by our Registrars but will also enhance the quality of care we provide to all of our service users.

The positive outcomes from the inspection of all three approved centres are continuing evidence of this commitment to excellence. The 2014 Inspector's reports referenced many positives about the quality of care and treatment in our services.

This is reflected in the extracts from the Mental Health Commission's 2014 reports below:

St Edmundsbury Hospital

There was a wide range of therapeutic services and programmes which were tailored to meet the individually assessed needs of residents and these took place mostly in the day services facility and, upon discharge, residents continued to attend the programmes facilitated there, where applicable. All residents had an individual care plan as described in the Regulations. The pharmacy provided an excellent service, particularly in regard to information to residents, in which a pharmacist was available to residents on a one-to-one basis, if required, and also facilitated a group each week as part of the therapeutic programme schedule.



All policies and protocols were evidence-based and quality initiatives referred to the Quality Framework. Clinical and Corporate Governance structures were excellent.

Willow Grove Adolescent Unit

Each child had an individual care plan and access to an appropriate range of multi-disciplinary professionals. Therapeutic programmes were comprehensive, recovery-oriented and informed by evidence. Clinical governance was strong and quality improvement was ongoing.

Dean Clinics

Since 2008, we have established a network of 7 community-based Dean Clinics, the expansion and development of which is in keeping with national mental health policy, set out in *A Vision for Change* which states that "Each citizen should have access to local specialised and comprehensive mental health service provision that is of the highest standard" (DOH, 2006). In 2014, a total of 2,047 Dean Clinic referrals were received for mental health assessment from primary care, representing over a 3% increase on 2013 referral numbers.

The number of Dean Clinic referrals received from counties within the Connaught and Munster regions continued to grow in 2014, indicating the importance of regional access to services.

The range and number of mental health services delivered across the seven Dean Clinics also continued to grow in 2014, with over 13,000 out-patient appointments provided - the highest figure since their establishment. In addition, over 1,200 mental health assessments were provided free of charge through our Dean Clinic network, underlining our commitment to improve ease of access to mental health care.

Associate Dean Network

In 2012, St Patrick's Mental Health Services commenced the establishment of the Affiliate Network of Associate Dean Consultant Psychiatrists with the aim of providing whole island access to mental health assessment and treatment. In 2014, two additional Associate Deans joined the Affiliate Network, which now includes 6 Consultant Psychiatrists working in a variety of locations including Naas and Belfast. The Associates collectively carried out in excess of 200 assessments, and referred over 100 service users for treatment at St Patrick's Mental Health Services.

The establishment in 2013 by St Patrick's Mental Health Services of a mental health service on the UCD campus was expanded in 2014 following Student Health's request for additional mental health clinic sessions. A total of 104 clinics were delivered in the year with an average of 5 students being assessed or treated per clinic session. Through our campus-based Consultant Psychiatrist, we began to work with UCD to develop an integrated campus-wide Mental Health Policy.

In addition, St Patrick's Mental Health Services's satellite Dean Clinic based in Ennis, Co. Clare continued to operate a monthly mental health clinic, with its Consultant Psychiatrist working collaboratively with a GP. The service continues to provide a positive example of combined care between primary care and a mental health service. Plans are underway to continue the expansion of our Associate Network in 2015 which will increase our service access points geographically across the country including the South-East and Limerick.

Outcome Measures



Leading health care providers around the world are capturing outcome measures for their treatments and making the results available through their websites, to enable service users and referrers to make informed choices about what services they access.

Such transparency essentially provides a report card for all to access. This level of transparency also informs staff and volunteers at all levels of the outcomes of services provided and advances a culture of accountability for the services we deliver.

It also enables debate about what treatment modalities to deliver and crucially how best to measure their efficacy. The approach of openly sharing treatment outcome results has also been utilised by the Mental Health Commission in Ireland (Mental Health Commission, 2012).

In 2014, we produced and published our third outcomes report. The St Patrick's Mental Health Services Outcomes Report represents the organisation's continued commitment to continuous quality improvements through the measurement of its clinical activities, clinical processes, clinical outcomes and service user satisfaction levels. In 2014, we expanded the range of therapeutic services that published outcomes in the report.

A Continuum of Care

Integrated Services across the Continuum of Care

Mental health care and treatment through a range of services, delivered by highly trained and experienced mental health professionals, continued to be developed during 2014 at St Patrick's and St Edmundsbury Hospitals and Willow Grove Adolescent Mental Health Services.

This existing continuum, continuously enhanced throughout 2014, incorporates in-patient services, Day Services and the Dean Clinics, and ensures service users receive the most appropriate care and treatment for their individual needs, as well as continuity through their recovery pathway.

In-patient Care

St Patrick's and St Edmundsbury Hospitals and the Willow Grove Adolescent in-patient unit provide high-quality, 24-hour care and treatment for people who are acutely ill and who need in-patient care. Ward-based Nursing Care is an essential component of in-patient stay within an approved centre. The ward-based nursing staff take 24-hour responsibility for ensuring the safety of service users and work with them and the multi-disciplinary team to ensure optimum functioning of all activities of daily living, with particular focus on symptom/diagnosis-targeted interventions as identified in the multi-disciplinary care plan.

A significant proportion of each service user's care and treatment is provided through the relationships developed with nursing staff and other members of the multi-disciplinary team.

Multi-disciplinary Team-based Care and Treatment

Our in-patients access both group and individualised therapy through a variety of programmes and individual sessions with mental health professionals, a facility that is either in addition to, or separate from, programme-based care and treatment.

These teams include:

- occupational therapists
- nurses (experienced ward-based nurses, clinical nurse specialists, advanced nurse practitioners)
- consultant psychiatrists and junior hospital doctors
- clinical psychologists
- counsellors
- social workers
- cognitive-behavioural psychotherapists
- systemic therapists
- pharmacists
- and other professionals skilled in specific psychotherapeutic interventions.

These highly-skilled mental health professionals work within multi-disciplinary teams to comprehensively address all areas of a person's life affected by their emotional and psychological distress.

Day Services - Wellness & Recovery Centre

The Wellness & Recovery Centre provides an alternative to admission for many service users. In 2014, Day Services continued to facilitate our service users' on-going journey towards recovery following an in-patient stay or as a more intensive intervention following an assessment in one of our Dean Clinics. These services also help to shorten in-patient stays through the delivery of Recovery-focused day programmes, thus allowing people to continue with their personal life.

Developments in 2014 Wellness & Recovery Centre

Day Programmes

Demand for day programmes continued to grow during 2014, with day service attendance over 13% above 2013 levels.

Support and Information Service (S&I)

Calls to the Support and Information Service increased by 20% on 2013 and a combined total of emails and web forms showed an increase of 112% on 2013.

Care and Treatment Programmes

The Clinical Programmes that were available to service users as in-patients or day-patients in 2014 included:

The Anxiety Programme is an evidence-based intervention programme, based on a cognitive behaviour therapy model and approach, aimed at service users who have been diagnosed with a primary Anxiety Disorder.

The Eating Disorder Programme provides assessment, treatment and on-going support for service users recovering from an eating disorder such as Anorexia Nervosa, Bulimia Nervosa and Binge Eating Disorder.

Depression Recovery Programme assists individuals diagnosed with clinical depression to understand, cope and manage their depression. The programme was expanded to provide a stepped care model with the most flexible delivery.

Bipolar Affective Disorder Programme offers educational and supportive interventions in the 'post-acute' phase of a person's Bipolar illness, to support the development of recovery and self-management skills.

Young Adult Programme is designed to meet the psycho-social needs of young adults (18 - 25 years) who experience mental illness and mental health difficulties.

Addictions Programme is designed to help individuals with alcohol dependence and/or substance abuse problems. It aims to provide treatment to match the individual needs of a person's recovery with the right treatment.

Dual Diagnosis Programme provides treatment and support for individuals who have a co-occurring psychiatric disorder with significant history of substance abuse.

Mental Health Care of Later Life - The Evergreen Programme is a group-based programme for in-patients experiencing mental health difficulties associated with ageing or who require mental health care with a later life approach.

Psychosis Recovery Programme is an intensive three-week programme which provides education around psychosis and assists service users to develop self-management strategies. Specific cognitive behavioural therapy is also available for those experiencing distress from the symptoms of psychosis.

Living through Distress and Radical Openness Programmes are delivered by Clinical Psychologists to assist people in dealing with emotional distress. In 2013, we enhanced and expanded these services to meet service users' needs.

Wellness and Recovery Action Plan (WRAP) Programme aims to provide service users with the skills necessary to define what recovery means to them individually and seeks to provide them with the skills necessary to achieve this recovery.

The Anxiety and Depression Programme, based at St Edmundsbury, aims to equip service users with the skills necessary to manage the symptoms of their depression and/or anxiety and their journey towards recovery.

Tom Maher, Director of Services

Communications & Advocacy Report

Advocating for a society where the rights of those experiencing mental health difficulties are acknowledged and promoting a nationwide awareness of the problems associated with them has been - and will continue to be - a major element of the work of St Patrick's Mental Health Services.

In line with this, our communications strategy involves combating the stigma that can surround mental health issues and continuing to campaign at school, public and governmental levels.

During 2014, advocacy achievements included:

- **Transition Year Programme** - this was expanded to facilitate 100 secondary school pupils on campus to enhance their awareness of mental health.
- **Walk In My Shoes** - the 2014 campaign was the most successful to date. In addition to generating publicity from the methods employed in previous years, this year also involved the production of a fund-raising calendar featuring some of Ireland's top chefs.
- **Launch of 'UpBeat on Air'** - this novel initiative fulfilled the dual purpose of promoting positive mental health on the airwaves and encouraging people to seek support and professional advice as soon as possible. Broadcasting live from St Patrick's University Hospital for five days, Upbeat on Air was manned by 45 volunteers and produced over 70 hours of radio.

This year, we were proud to launch Upbeat on Air, the first Irish radio station dedicated to promoting positive mental health and broadcasting live for 5 full days



Sheila Pomeroy, winner of the Favourite Painting Competition 2014, titled "The Hooded Claw"



Festive Forest Christmas Party

- **Public education and awareness programmes** - St Patrick's Mental Health Services enhanced its media, web and social media presence and continued to run a series of awareness-raising radio advertisements.
- **Arts events and exhibitions** - Family events such as the 'Summer Family Day' and 'Festive Forest Christmas Party' opened the campus to the public in a positive and inclusive way, and Art Exhibitions continued throughout the year in the art space.
- **Internal communications** - A new e-learning module for staff on mental health legislation was developed and promoted. A new Internal Communications Strategy was also developed for implementation in 2015.
- **Chats for Change campaign** - First launched in 2013 in collaboration with See Change and the Union of Students in Ireland, thousands of Chats for Change tea packs were distributed across college campuses nationwide to spark open conversation of mental health. 2014 was its most successful year to date.
- **GP and public information strategy** - Public information evenings were delivered free of charge around the country, and public awareness surveys were conducted with GPs, the public and end-users.
- **Enhancement of Human Rights** - Staff members represented St Patrick's Mental Health Services at the Disability and Human Rights Conference in NUI Galway.

St Patrick's Mental Health Services continued to support Mental Health Reform, Children's Rights Alliance and See Change campaigning initiatives, and played an integral role in presenting formal submissions on Termination of Life, the National Paediatric Charter, Fitness to Drive, as well Capacity Legislation and reform of the Mental Health Act.

St Patrick's Mental Health Services was also highly active in the campaign for full ratification and compliance with the UNCRPD and European Social Charter.

Sarah Surgenor,
Head of Communications and Fundraising



Colman Noctor (left) with TY graduation winner, Conor Harty



Festive Forest Christmas Party



ICT, Development and Data Protection Report

Behind all this is the desire to increase efficiency, keep data secure and support the delivery of the services we operate to the highest standards

Information and Computer Technology (ICT) Developments

2014 was a busy and productive year for the ICT function within the organisation.

Following the introduction of a new telephony system in 2013, which uses Voice over Internet technology, the second of a three-phase technology infrastructure project was implemented.

This involved the roll-out of a Wi-Fi network across the main hospital campus which allows service users to access free guest Wi-Fi and for staff to access the hospital network using mobile devices and work on the move.

The final phase of this project is scheduled for 2015 with the introduction of a Wi-Fi-enabled Emergency Paging System for staff.



1st runner-up and judges in the Short Film competition



Walk In My Shoes golf fundraiser

ICT Governance

The implications of the steady growth of our various services for our ICT are significant. ICT is a key strategic asset which requires governance to create value. In 2014, the ICT Strategy Committee was established and meets monthly to ensure the appropriate governance of our ICT assets is provided. This includes making appropriate ICT investment decisions, reviewing and managing ICT risks and monitoring the delivery of approved ICT so that they remain within budget, on time and within scope.

An external review of the ICT function was carried out during 2014, which has provided a valuable roadmap to support the future development of the ICT department based on industry standards for ICT operations, service and project management.

Electronic Health Record (EHR)

Significant progress was made in preparing for the implementation of the St Patrick's Mental Health Services Electronic Health Record. We worked in depth with external vendors and experts as well as internal stakeholders to review our EHR procurement process and evaluate market offerings suitable for a mental health service provider of our size. We also undertook a detailed analysis of the total costs of an EHR implementation and so inform the required budgetary plan.

An Enterprise Project Manager was recruited to assist in preparing the organisation for this transformation project. Based on the year's work, we decided to re-tender for an EHR solution. A project team was established and is making significant progress on preparing for the EHR implementation.

Alongside this, we approved almost 20 ICT projects aimed at supporting the business and maintaining a fit-for-purpose ICT environment.

Data Protection

In delivering its services, St Patrick's Mental Health Services receives, processes, stores and communicates significant amounts of written and electronic information every day, much of which is sensitive as defined by the Data Protection legislation.

As a Data Controller (registered with the Data Protection Commissioner of Ireland), we are responsible for protecting all data in our possession including service user data, employee data and third party data in keeping with the provisions of the Data Protection Acts of 1988 and 2003.

Lisa Keegan and team - winners of the Short Film competition 2014





We take these legislative responsibilities seriously and in 2014, we appointed a Data Protection Officer whose primary responsibility is to ensure that we fulfil our obligations through our policies, procedures and practices. During 2014, we processed just under 250 data access requests alone.

In addition, a survey of staff members' awareness of data protection obligations was carried out in 2014, suggesting a good level of understanding. On foot of the survey's findings, a Staff Awareness Training Programme is being developed in relation to Data Protection and will be rolled out across the organisation in 2015.

New Opportunities

In 2014, we continued to explore new opportunities within the mental health sector to deliver our services to more people. We worked, for instance, with a number of corporate and professional partners to both support and deliver Employee Assistance Programmes and Employee Mental Wellness programmes such as Staff Mindfulness workshops.

Work will intensify in 2015 to explore and deliver new business opportunities and fulfil our strategic objective to ensure that the highest quality mental health care will be made available to more people who experience mental health difficulties.

Orla Gogarty, Director of ICT, Development and Data Protection



Central to the ethos of our service are wellness and recovery principles which involve empowering service users to better manage their health and lead fulfilling lives

St Edmundsbury, Lucan



Human Resources Report

We invest heavily in staff education and development, most particularly in respect of clinical and allied professional staff

2014 was a year of consolidation on the Human Resources front in St Patrick's Mental Health Services, with progress made in several areas and planning put in place for future activities and initiatives.

Our strategic HRM objective is to ensure that our learning and development processes and procedures are fit for purpose, enjoy a good reputation amongst staff, generate an acceptable return on investment, help support our objective to be the preferred employer of choice in our sector and assist in meeting the need to ensure that the Hospital has in place the talent required to deliver on the Hospital's clinical and commercial objectives.

St Patrick's Mental Health Services is a teaching hospital aligned with Trinity College Dublin. As an employer, we invest heavily in staff education and development, most particularly in respect of clinical and allied professional staff. Education and development is divided into a number of categories.

In order to maintain registration and the right to practise, a number of disciplines represented at St Patrick's Mental Health Services must undertake mandatory training and this training is given priority in terms of allocation of budget and protected time.



Walk In My Shoes fundraising celebrity calendar



TY graduation students

The next level of priority is given to training where the Hospital has a requirement to enhance individual staff members' clinical skills to deliver new or improved services to our service users, or where, in non-clinical terms, we see a gap in skills and relevant staff are required to undergo training. The final level of priority is given to staff who seek on a personal basis to enhance their skills by engaging in further education, typically on their own time, and who seek financial assistance with this from St Patrick's Mental Health Services. In respect of this final category, in deciding whether or not to support the staff member's application, consideration is given to the relevance of the training to the current role of the staff member, the organisation and to the potential deployment of this training within the organisation at a future time.

In this regard, the HR Department was responsible for the co-ordination and management of the various training programmes. The Professional Development Programme, which was first implemented in 2013, continued to engender a shared understanding of staff members' individual roles. It will also encourage each member to reach their full potential now and into the future, and to facilitate career and succession planning.

In association with an external partner, a Staff Engagement Survey was conducted during the year and this again yielded useful feedback in terms of the staff's understanding of the performance levels required, their role in the organisation's daily services and their commitment to the spirit of teamwork.

At the same time, the Survey provides key findings that can be used in improving performance management, training opportunities and collaboration across the hospital.

There was a slight increase in staff turnover over the previous year but staff numbers continue to increase as we meet the needs of the organisation's strategies and expanding services. Streamlined recruitment processes were implemented through a specialised software program. A commitment to open and transparent communication was maintained through continuous dialogue with the unions and there was also ongoing engagement with various working groups.

Looking forward, enhancing the HR processes is the central focus of the HR Department and the structures and procedures are continuously tightened up on an annual basis to help this objective.

Brendan Power, HR Director



*Brendan Power and Valerie Gannon
at the Long Service Awards
Ceremony 2014*

Finance Director's Report

Our objective is to improve our financial position and ensure that new service initiatives and existing services are delivered in a financially-sustainable manner

Our *Empowering Recovery* strategy sets out ambitious objectives over the five-year period 2013-2017, and 2014 marked another year of steady progress in the achievement of those objectives.

As an independent not-for-profit organisation that receives no statutory funding from Government, a key enabler in the achievement of this plan will be to maintain and improve our financial position to ensure those objectives are realised and that new service initiatives and existing services are delivered in a financially-sustainable manner.

Despite the challenging environment over the last number of years, we are continuing to expand our services. This is a significant achievement for an organisation with limited financial resources and is a testament to the commitment of all stakeholders to our shared objectives, not least the staff and the increasing number of service users that continue to place their trust in us.



Further progress was made during the year as we continued to expand our services and to consolidate our financial position while continuing to deliver high quality services in keeping with our strategic objectives.



Family room at St Patrick's University Hospital

Financial Results

During the year, demand for our services continued to grow, resulting in an overall increase in clinical activity levels across all service components that together deliver a high-quality integrated mental health care service. There were in excess of 3,000 admissions to in-patient adult and adolescent services, marginally down on the previous year and more than 6,600 full-day care attendances which were higher than the previous year by 13%. The Dean Clinic network of community-based services recorded continued growth during 2014 as activity levels for our seven clinics throughout the country increased by 6% overall, with total visits in excess of 13,000 for the year.

The financial results for the year show that the organisation achieved an operating surplus (before exceptional items, pensions finance charge and other items) of €4.2 million compared to a surplus of €2.20 million for the corresponding period in 2013.

Overall income amounted to €65m (+3.1% v 2013) and total expenditure amounted to €60.8m (-0.2% v 2013), resulting in an operating surplus (before exceptional item) for the year of €4.2M.

The underlying Operating Surplus (before exceptional item) in 2014 compared to the previous year is materially different, due to non-cash charges relating to the Defined Benefit Pension Scheme treatment under Financial Reporting Standard 17. As shown below, the underlying Operating earnings (before non-cash pension charges) indicate an improved outcome (+10%) due to increased clinical activity levels when compared to 2013.

	2014 € '000	2013 € '000
Operating surplus - before exceptional items	4,221	2,162
Less current service cost under FRS17 (as per note 15)	-	3,348
Plus actual employer pension contributions (as per note 15)	(1,002)	(2,606)
Adjusted Operating Earnings (before non-cash pension charges)	<u>3,219</u>	<u>2,904</u>





Summer family day 2014

In overall terms, the increase in revenue year-on-year as a result of increased clinical activity was marginally increased from a reduction in overall costs, resulting in a modest surplus. Our programme of reducing and containing costs and achieving better value for money while continuously seeking to improve services delivered positive results again during 2014.

Defined benefit pension scheme funding/Exceptional Item

During 2013, the organisation finalised plans that sought to resolve the affordability and future sustainability of its Defined Benefit Pension Scheme with the Trustees of the Scheme and members of the scheme. Such actions were necessary to ensure the future sustainability of the organisation, given the quantum of the funding deficit. The Scheme (which is closed to new members since 2005), as a result, underwent a significant re-structuring following the approval by the Pensions Authority of an application by the Trustees of the Scheme seeking direction under Section 50 of the Pensions Act 1990 to modify the benefits under the Scheme.

The impact of the changes eliminated the deficit that existed at 31 December 2012. The principal changes to the Scheme involved the cessation of future service accrual, removing automatic pension increases in payment and by increasing the normal

retirement age in line with the State pension age increases in 2014, 2021 and 2028.

Effective from 1 January 2014, all pension provision for employees is being made on a defined contribution basis. The impact of reducing the future liabilities of the Scheme, together with the purchase of sovereign annuities to settle certain liabilities of the Scheme, resulted in an exceptional item being disclosed in the Income & Expenditure, given their once-off nature amounting to €52.8 million for 2013.

As a result of a significant deterioration in corporate bond yields (the rate used to determine liabilities of the Scheme for accounting purposes under FRS 17), the notional liabilities of the Scheme have increased substantially at year-end, resulting in a net pension liability of €10.3m compared to a net pension asset of €0.7m for the previous year. It is important to note, however, that the Scheme continues to be in surplus under the minimum funding standard basis and on an on-going funding basis of valuation as at 31 December 2014.

Our balance sheet position, as measured by net assets excluding pension liability amounting to €36.7m, improved year-on-year by €3m. However, once the pension liability of €10.3m is included, the overall net asset position deteriorated, amounting to €26.4m at year-end compared to €34.3m for the previous year.

There was an improvement in the net cash position amounting to €8.6m at the end of the year compared to the previous year of €4.95m, due to the improvement in the underlying operating surplus and other components of working capital. During the year, a decision was made by the Board to set aside €4m as a reserve amount as noted below. The remaining funds will be re-invested in expanding our services where feasible and to partially fund key capital investment projects.

Reserves Policy

As an independent not-for-profit organisation with limited financial resources, the organisation considered its reserves policy at a meeting of the Board of Governors held on 4th December 2014, with a view to establishing a level of reserves that is appropriate, having due regard to the operational circumstances, capital commitments, the certainty of future income and the risks and sensitivities likely to face the organisation.

The term 'reserves' refers to the funds that are available to the organisation on a discretionary basis that are easily converted into cash funds to cover planned future events and unforeseen events or changes in its operating circumstances. The Board of Governors has deemed it appropriate and prudent to maintain a level of reserves to safeguard against any unforeseen events into the future whilst balancing the various competing demands on its limited resources.

The Board of Governors, on the recommendation of the Finance and Audit Committee of the Board, reviews and considers on an annual basis the certainty of future income and associated expenditure, in case they are different from the budgeted, planned activity levels and risks facing the organisation. As part of its review for the forthcoming year, it has also considered the current working capital profile of the organisation, available banking facilities and likely future capital commitments and set a reserve level of €4m for the 2015 financial year. The review and setting of the organisation's reserve policy is an integral part of the organisation's planning, budgetary and forecasting cycle and is a matter reserved for the Board of Governors.

Bank borrowings reduced during the year as scheduled interest and capital repayments were made. Total long-term bank borrowings at the year-end amounted to €3.2m of which €2.5m is repayable after one year.

During the year, capital expenditure amounted to €1.1m, and related to the continued upgrading and refurbishment of the organisation's facilities and assets and continued investment in communications and technology infrastructure.

Extracts from the audited financial statements for the year ended 31 December 2014 are set out later in this report. However, this report and the extracts should be read in conjunction with the audited financial statements and accompanying notes together with the Governors' and Auditors' reports that are available on our website. In addition, our Outcomes Report for 2014 sets out, in greater detail, information relating to clinical activity levels and related outcomes and is also available on our website.

Outlook for 2015

Demand for our services continues to be strong during 2015 and although the economic environment remains challenging, our financial position will continue to be consolidated so that continued investment into our services can be made as we strive to meet our strategic objectives. However, the impact of the wider economic environment on the health insurance industry - the primary source of our income - presents us with other challenges in meeting our strategic objectives.

To meet the objectives of our *Empowering Recovery* strategy, we will remain focused on delivering and expanding high quality services in a cost-effective and efficient manner to ensure greater access to our service by more people in the future.

Frank Byrne, Finance Director

INCOME & EXPENDITURE ACCOUNT*for the year ended 31 December 2014***Income - continuing operations**

Maintenance and treatment fees

Other income

Expenditure

Salaries and wages

Establishment and administration expenses

Other operating costs

Depreciation

Operating surplus - before exceptional items

Exceptional item

Operating surplus - after exceptional items

Interest payable and similar charges

Pension finance charge

Surplus for the year

2014	2013
€'000	€'000

64,392	62,533
662	595

<u>65,054</u>	<u>63,128</u>
---------------	---------------

(47,254)	(47,611)
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(8,949)	(8,744)
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(2,769)	(2,894)
---------	---------

(1,861)	(1,717)
---------	---------

<u>(60,833)</u>	<u>(60,966)</u>
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4,221	2,162
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-	52,771
---	--------

4,221	54,933
-------	--------

(150)	(179)
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(55)	(1,558)
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<u>4,016</u>	<u>53,196</u>
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STATEMENT OF TOTAL RECOGNISED GAINS & LOSSES*for the year ended 31 December 2014*

Surplus for the year

Difference between expected and actual return on scheme assets*

Experience gains and losses on scheme liabilities*

Effect of changes in actuarial assumptions*

Total recognised gains and losses for the year

*Defined Benefit Pension Scheme

2014	2013
€'000	€'000

4,016	53,196
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4,884	3,768
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47	401
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(16,872)	(5,164)
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<u>(7,925)</u>	<u>(52,201)</u>
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NOTE OF HISTORICAL COST SURPLUS AND DEFICIT*for the year ended 31 December 2014*

Reported (deficit) / surplus for the year

Difference between historical cost depreciation charge on hospital buildings and the depreciation calculated on the re-valued amount

Historical cost (deficit) / surplus for the year

2014	2013
€'000	€'000

(7,925)	52,201
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378	378
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<u>(7,547)</u>	<u>52,579</u>
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BALANCE SHEET

at 31 December 2014

	2014 €'000	2013 €'000
Fixed assets	26,793	27,545
Financial assets	86	86
	26,879	27,631
Current assets		
Stocks	72	94
Debtors	13,002	12,360
Cash at bank and on hand	8,639	4,950
	21,713	17,404
Creditors:		
Amounts falling due within one year	(9,367)	(8,185)
Net current assets	12,346	9,219
Total assets less current liabilities	39,225	36,850
Creditors:		
Amounts falling due after more than one year	(2,538)	(3,212)
Net assets excluding pension liability	36,687	33,638
Net pension (liability) / asset	(10,309)	665
Net assets	26,378	34,303
Capital and special funds		
Capital account	26,378	34,303

CASH FLOW STATEMENT*for year ended 31 December 2014*

	2014 €'000	2013 €'000
Net cash inflow from operating activities	5,563	5,227
Returns on investments and servicing of finance		
Interest paid	(150)	(179)
Capital expenditure and financial investment		
Purchase of fixed assets	(1,138)	(2,540)
Net cash outflow from capital expenditure and financial investment	(1,138)	(2,540)
Financing		
Repayment of bank loans	(586)	(566)
Increase in cash in the year	3,689	1,942
Reconciliation of net cash flow to movement in net debt		
	2014 €'000	2013 €'000
Increase in cash in the year	3,689	1,942
Repayment of bank loans	586	566
Change in net debt resulting from cash flows	4,275	2,508
Net debt at start of year	1,147	(1,361)
Net debt at end of year	5,422	(1,147)

Appendix A - Peer Reviewed Research

Database of recent research activities - January 2014

Publications

<i>Publication Title:</i>	Epigenetics and depression: return of the repressed.
<i>Authors:</i>	Dalton VS, Kolshus E, McLoughlin DM.
<i>Journal name/Year/Volume number/pages:</i>	Affect Disorders/2014/Feb/155:1-12/Epub 2013 Oct 25.
<i>PDF available in S:\Editorial Committee\Recent Research Activities\January 2014</i>	
<i>Publication Title:</i>	CBT by Psychiatric Trainees- Can a little knowledge be a good thing?
<i>Authors:</i>	Kelleher E, Hayde M, Tone Y, Kearns C, McGoldrick M, McDonough M
<i>Journal name/Year/Volume number/pages:</i>	The Psychiatrist Bulletin/2014

Database of recent research activities - February 2014

Publications

<i>Publication Title:</i>	Re-appraising the long-term course and outcome of psychotic disorders: the AESOP-10 study
<i>Authors:</i>	Morgan C, Lappin J, Heslin M, Donoghue K, Lomas B, Reininghaus U, Onyejiaka A, Croudace T, Jones PB, Murray RM, Fearon P, Doody A, Dazzan P
<i>Journal name/Year/Volume number/pages:</i>	Psychological Medicine/2014/pp1 - 14
<i>Link:</i>	http://dx.doi.org/10.1017/S0033291714000282
<i>Publication Title:</i>	Living Through Distress: A Skills Training Group for Reducing Deliberate Self-Harm
<i>Authors:</i>	Booth R, Keogh K, Doyle J, Owens T
<i>Journal name/Year/Volume number/pages:</i>	Behavioural and Cognitive Psychotherapy/2014/42/156 -165
<i>Publication Title:</i>	Validation of the Face-Name Pairs Task in Major Depression: Impaired recall but not recognition
<i>Authors:</i>	Smith KJ, Mullally S, McLoughlin D, O'Mara SM
<i>Journal name/Year/Volume number/pages:</i>	Frontiers in Psychology/2014/doi: 10.3389/fpsyg.2014.00092

Book chapters

<i>Chapter Title:</i>	Losses in Later life: Practical steps for coping
<i>Authors:</i>	Waldron N
<i>Book name/year/publisher:</i>	The Evergreen Guide: Helping people to survive and thrive in later years/2014/Nova Publishers

Database of recent research activities - March 2014**Publications**

<i>Publication Title:</i>	Trends in use of electroconvulsive therapy in South London from 1949 to 2006
<i>Authors:</i>	Lambe S, Mogg A, Eranti A, Pluck G, Hastilow S, McLoughlin DM
<i>Journal name/Year/Volume number/pages:</i>	Journal of ECT/2014 Epub Mar 12
<i>Publication Title:</i>	Effects of brief pulse and ultrabrief pulse electroconvulsive stimulation on rodent brain and behaviour in the corticosterone model of depression
<i>Authors:</i>	O'Donovan S, Dalton V, Harkin A, McLoughlin DM
<i>Journal name/Year/Volume number/pages:</i>	Int J Neuropsychopharmacol/2014 Epub
<i>Publication Title:</i>	Construction and updating of a public events questionnaire for repeated measures longitudinal studies.
<i>Authors:</i>	Noone M, Semkowska M, Carton M, Dunne R, Horgan JP, O'Kane B, McLoughlin DM
<i>Journal name/Year/Volume number/pages:</i>	Front Psychol/2014

Database of recent research activities - April 2014**Publications**

<i>Publication Title:</i>	Pre-morbid fertility in psychosis: Findings from the AESOP first episode study
<i>Authors:</i>	Zimbron J, Stahl D, Hutchinson G, Dazzan P, Morgan K, Doody GA, Jones PB, Murray RM, Fearon P, Morgan C, MacCabe J
<i>Journal name/Year/Volume number/pages:</i>	Schizophrenia Research/2014
<i>PDF available in S:\Editorial Committee\Recent Research Activities\April 2014</i>	
<i>Publication Title:</i>	A 5-year follow-up of depressed and bipolar patients with alcohol use disorder in an Irish population
<i>Authors:</i>	Farren CK, Murphy PH, McElroy S
<i>Journal name/Year/Volume number/pages:</i>	Alcoholism: Clinical and Experimental Research/2014/38(4)/1049-1058

Database of recent research activities - August/September/October 2014**Publications**

<i>Publication Title:</i>	The impact of a change in prescribing policy on anti-psychotic prescribing in a general adult psychiatric hospital
<i>Authors:</i>	Kelly J, Kelly F, Santlal K, O'Ceallaigh S
<i>Journal name/Year/Volume number/pages:</i>	Irish Journal of Psychological Medicine/2014/31/167 - 173
<i>Publication Title:</i>	The persisting effects of electroconvulsive stimulation on the hippocampal proteome
<i>Authors:</i>	O'Donovan SM, O'Mara S, Dunn MJ, McLoughlin DM
<i>Journal name/Year/Volume number/pages:</i>	Brain Research/2014
<i>Publication Title:</i>	Acute phase plasma proteins are altered by electroconvulsive stimulation
<i>Authors:</i>	Glaviano A, O'Donovan SM, Ryan KM, O'Mara S, Dunn MJ, McLoughlin DM
<i>Journal name/Year/Volume number/pages:</i>	Journal of Psychopharmacology/2014/Sept 29 (Epub ahead of print)
<i>Publication Title:</i>	Identifying aspects of neighbourhood deprivation associated with increased incidence of schizophrenia
<i>Authors:</i>	Bhavsar V, Boydell J, Murray R, Power P
<i>Journal name/Year/Volume number/pages:</i>	Schizophrenia Research/2014/156 (1)/115 - 121
<i>Publication Title:</i>	Mortality in Schizophrenia and Other Psychoses: A 10-Year Follow-up of the SOP First-Episode Cohort
<i>Authors:</i>	Reininghaus U, Dutta R, Dazzan P, Doody GA, Fearon P, Lappin J, Heslin M, Onyejiaka A, Donoghue K, Lomas B, Kirkbridge JB, Murray RM, Croudace T, Morgan C, Jones PB
<i>Journal name/Year/Volume number/pages:</i>	Schizophrenia Bulletin/2014

PDF available in S:\Editorial Committee\Recent Research Activities\August 2014

Posters

<i>Presentation Title:</i>	Prospective Cohort Study of Capacity to Consent to Treatment in Psychosis
<i>Authors:</i>	Fernandez C, Kennedy M

Presentation at Founder's Day and European Psychiatric Association in Munich in March 2014**Book chapters**

<i>Chapter Title:</i>	Early Intervention in Bipolar Disorder
<i>Authors:</i>	Power P, Conus P, Macneil C, Scott J
<i>Book name/year/publisher:</i>	Early Intervention in Psychiatry: EI in Nearly Everything for Better Mental Health/2014/John Wiley & Sons Press

Database of recent research activities - December 2014**Publications**

<i>Publication Title:</i>	Inter-play between childhood physical abuse and familial risk in the onset of psychotic disorders.
<i>Authors:</i>	Fisher HL, McGuffin P, Boydell J, Fearon P, Craig TK, Dazzan P, Morgan K, Doody GA, Jones PB, Leff J, Murray RM, Morgan C.
<i>Journal name/Year/Volume number/pages:</i>	Schizophrenia Bulletin/2014



St Patrick's Mental Health Services

James's Street, Dublin 8, Ireland.

t: +353 1 249 3200. f: +353 1 679 8865.

e: info@stpatmail.com

www.stpatricks.ie