



Annual Report & Financial Statements 2012



Introduction – 1

Report of the Chairman of the Board of Governors – 2

Chief Executive's Report – 4

Medical Director's Report – 6

Quality and Clinical Governance – 8

Advocacy – 11

A Continuum of Care – 12

Human Resources and IT – 17

Research and Training – 18

Finance Director's Report – 19

Introduction

Acknowledged as a leader in the provision of the highest quality mental health care, St Patrick's Mental Health Services is recognised for its promotion of mental health awareness and the protection of the rights of those suffering from mental illness.

As Ireland's largest, independent not-for-profit mental health service provider, it accounts for approximately 12% of the country's total in-patient care and treatment needs.

Now known as St Patrick's Mental Health Services, it is still driven by the vision, energy and determination of its founder, Jonathan Swift, Dean of St Patrick's Cathedral, over 260 years ago.

With an emphasis on wellness and recovery principles that empower service users to better manage their mental health and lead fulfilling lives, the organisation has continually expanded and enhanced its range of services to meet those objectives.

Approximately 3,000 people availed of inpatient and day care services during 2012, with treatment provided by highly qualified professionals working in multi-disciplinary teams. Over the same period, some 12,000 visits were paid to St Patrick's community-based Dean Clinics around the country. In addition, there were in excess of 5,000 visits to its day services in 2012.

2012 also saw the Hospital's second 5-year plan "*Mental Health Matters*" reach its successful conclusion and plans put in place for the third phase of this challenging yet particularly worthwhile strategy.

Report of the Chairman of the Board of Governors

“That we continue to make significant progress at all levels of the organisation is a tribute to the commitment, application and dedication of the management team, staff and volunteers”



It is my pleasure and privilege to present the 2012 Annual Report of St Patrick's Mental Health Services on behalf of the Board of Governors.

When we initiated our 'Mental Health Matters' strategy back in 2008, we set ourselves some particularly challenging targets. It is, therefore, satisfying to be able to report that as we reach that 5-year plan's conclusion, we have met - and in many cases, surpassed - those objectives.

That we continue to make significant progress at all levels of the organisation is a tribute to the commitment, application and dedication of the management team, staff and volunteers. Without that critical input, we would not be able to maintain and enhance our wide range of existing services, let alone introduce new ones.

As a result, we continue to provide the specialised treatment and support needed by those suffering from mental health problems and ensure that there will be sufficient services for their benefit.





Creating adequate mental health prevention initiatives and encouraging sufferers and their carers to play an active role in the structures and services being developed to support them, are also among the key objectives of our 5-year plan

The combination of these factors has led St Patrick's to being recognised as the leading provider of these mental health treatments in Ireland.

We address our governance matters very seriously, with a recent review of Board effectiveness an example of our ongoing efforts to ensure that our Governors are suitably qualified and experienced to provide the necessary oversight of the work undertaken at St Patrick's.

I will take this opportunity to extend my thanks to my fellow Governors for their much-valued contributions during 2012, namely:

The Hon. Mr. Justice John L. Murray, The Most Rev. Michael Jackson, Mr. Justice Ronan Keane, The Very Rev. Robert MacCarthy, The Very Rev. Dean Dermot Dunne, Mr. Marcus Beresford, Mr. William Cotter, Ms. Bernie Godley, Dr. Myriam Walsh, Professor Marcus Webb, Mr. Danny Kitchen and Mr. Conor Killeen.

I would also like to publicly highlight the input of donors, supporters and members of the St Patrick's Hospital Foundation for their vital input over the past twelve months.

Ms. Caroline Preston, Chairman

Chief Executive's Report

“We can look back with some satisfaction at a period of considerable progress, while recognising that we still have to work towards further enhancing the services and supports we provide”

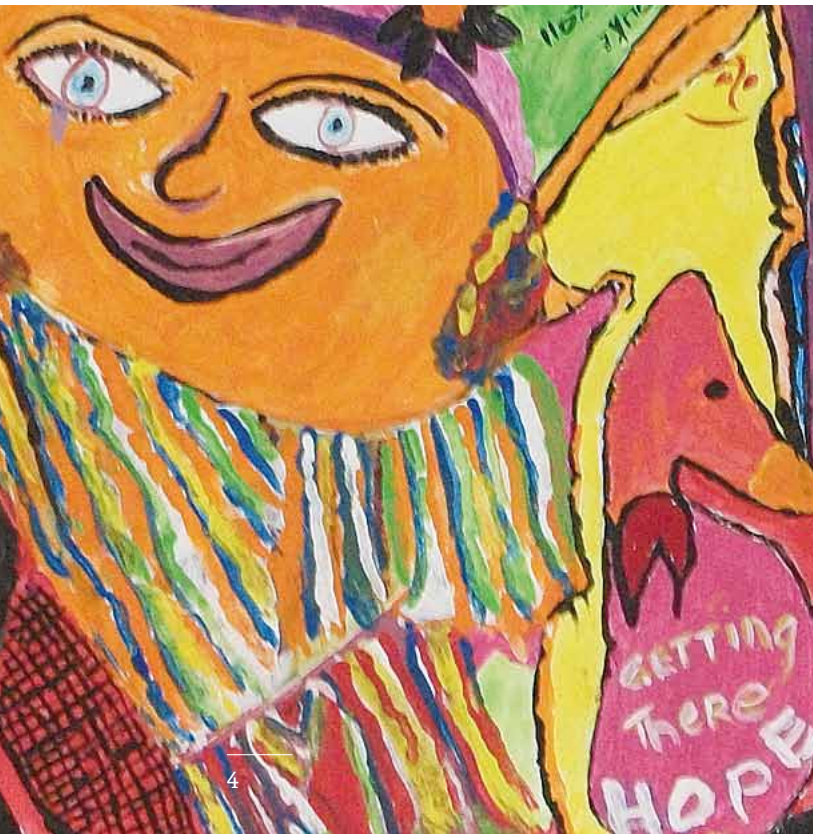


An American educator, Reed B. Markham, once said: “If you are standing still, you are also going backwards. It takes great effort to maintain forward movement”.

At St Patrick's Mental Health Services, we have never believed in standing still and the fact that we continually make positive strides forward underlines the great effort that is made by so many dedicated staff, volunteers and supporters and underlines the continued trust those experiencing mental health difficulties place in us.

As we reach the end of our current 5-year strategic plan “*Mental Health Matters*”, we can look back with some satisfaction at a period of considerable progress, while recognising that we still have to work towards further enhancing the services and supports we provide.

Over the past five years, we have focused on a number of key activities. Our emphasis on Service Delivery has provided a holistic range of mental health services based on a wellness and recovery ethos, grounded in evidence-based best practice.





We have continued to campaign and lobby against the stigma surrounding mental illness and for acknowledgement of the rights of those suffering from mental health problems.

Developing service user participation in the planning of services and treatment programmes continues to be central to our approach while we also strive to maintain our position as an international leader in mental health research and training.

It is a matter of great pride that we remain compliant with the Mental Health Commission regulations and standards and that the Mental Health Commission Inspectorate remarked on “*the number of excellent initiatives*” being progressed by the organisation.

However, we are fully committed to continue to achieve the highest standards of care, to treating more people and to advocating for the rights of those experiencing mental health difficulties.

Paul Gilligan, CEO

Medical Director's Report

“Research has shown that one in five of us will have a depressive disorder and that early intervention with young people is critical, especially before they reach their early 20s”



As we approach the conclusion of the 5-year strategic plan ‘Mental Health Matters’ and look forward to our next strategic plan of action, we can look back on an intense period of progress and development on

numerous fronts. Providing a holistic range of mental health services based on human rights and a recovery ethos, and grounded in evidence-based best practice, has always been central to our thinking and our activities.

Providing modern services that place the individual and their recovery at the forefront is our modus operandi.

2012 was a year of consolidation where our emphasis was on delivering on the commitments we had made, enhancing what we already had, and expanding our services to meet demand.

The community-based Adolescent Mental Health Service has been an outstanding success since its establishment, with the feedback we have been getting about the Willow Grove in-patient unit on the St Patrick’s campus and the community service in Lucan being extremely positive.





Research has shown that one in five of us will have a depressive disorder, and that early intervention with young people is critical, especially before they reach their early 20s.

The Dean Clinic concept of community mental health services has proven to be even more successful than we had even imagined at the outset. From small beginnings, we now have seven clinics - 5 in Dublin and one each in Galway and Cork - and all are providing a vital local service, which is highly appreciated by those suffering from mental health problems and their families.

Such statistics underlines just how important this development has been and continues to be.

Our Wellness and Recovery day services have been transformed into a new fully functioning programmatic, recovery-based service and we continue to progress on technology-based support services.

Our telephone support and information service is highly regarded by GPs, other healthcare professionals and the public as a most useful resource while a variety of web-based supports have been implemented by a number of therapeutic programmes.

In the past five years, we have re-designed our clinical structures so that wards, programmes and services are integrated to provide seamless treatment and care, with enhanced expertise from multi-disciplinary teams.

Over a dozen specialised services - including, for example, Bipolar Disorders, Adult ADHD and Eating Disorders - have been developed or enhanced and our ECT Department has gained independent ECTAS accreditation.

Our Twilight Programme provides a range of therapeutic and creative activities at weekends and evenings and the physical infrastructure of our Assessment & Admissions Unit has been significantly enhanced and fully resourced to give more efficiency, greater accessibility and improved patient satisfaction.



As shown elsewhere in this Annual Report, our research clinicians continue to be prolific in the area of research output and have a reputation for the value they add to many topical issues in the field of psychiatry.

The combination of these factors is a clear indicator that we take our roles and responsibilities extremely seriously and that we continue to work on the three-fold principles of Empowerment, Recovery and Research.

Professor James Lucey, Medical Director

Quality and Clinical Governance

“The organisation continues to maintain effective clinical governance structures and processes that include regular clinical audits, incident reviews, external inspections, critical incident analyses and practice reviews”



The achievement of excellence in the delivery of Mental Health Services is a central component of our mission. Exceptional Clinical Governance is required to deliver on our continued insistence on excellence.

Continued retention in 2012 of our ‘Approved Centre’ status from the Mental Health Commission for all three approved centres underlines how effectively the organisation has been clinically governed.

The 2012 Inspector’s reports were particularly complimentary about the quality of care and treatment in all three Approved Centres.

This is reflected in the extracts from the Mental Health Commission’s 2012 reports below:

“Staff were very positive and enthusiastic and working very hard to achieve a quality service. The catering and household staff appeared to be an integral part of the service and it was nice to see them engage in a very positive way with residents”.



“Residents appeared very satisfied with their treatment and were part of the care planning process.”

“The standard of care and treatment throughout St Edmundsbury was very high and again staff impressed as being enthusiastic, caring and interested in continuously improving the service.”

“Willow Grove was compliant on inspection with all applicable Articles of the Regulations and all applicable Codes of Practice. The service is to be congratulated on maintaining such a high standard of care since its opening.”



In 2012, we continued a comprehensive programme of developments in Clinical Governance overseen by the Clinical Governance Committee.

These developments are underpinned by the Quality Standards outlined in the Mental Health Commission's Quality Framework Document and mirrored in St Patrick's.

- The organisation continues 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 accordance with the recovery ethos in St Patrick's Mental Health Services, an information booklet (not aimed at a particular diagnosis) on practical skills that enhance and guide wellness was formulated.
- The Drugs and Therapeutics Committee was responsible for the implementation of the plan to improve lithium prescribing and monitoring and to standardise the information given to service users.
- Demonstrating our commitment to the inclusion of service users in the care planning process, a Recovery File was developed which focuses on embedding the recovery ethos, as well as allowing service users to be active participants in their recovery.
- A system of stepped care for the treatment of depression was developed by the MDT in the Dean Clinic, Donaghmede in partnership with local General Practitioners.
- The Occupational Therapy Department developed a six-week out-patient group to assist people to manage their work stress using more effective strategies.
- To underpin the organisation's commitment to the protection of the rights of service users, policies on the protection of Older People from Mistreatment and Advanced Healthcare Directives have been developed.
- As part of St Patrick's strategic plan to enhance services provided to relatives, a Family Support and Information Series has been introduced.

Tom Maher, Director of Services

Outcome Measurement

In 2012, the organisation expanded its process of assessing and monitoring the efficacy of its services through the measurement of outcomes and will publish a second edition of its Outcome Measures report for 2012.

This Outcomes Series is unprecedented in its extent in mental health service management in Ireland. These reports represent an attempt to collate, analyse and synthesize information relating to outcomes with respect to its clinical care pathways, clinical governance processes and clinical outcomes.

The 2012 report will continue to promote an organisational culture of excellence and quality through engagement in continual service evaluation in relation to efficacy, effectiveness and quality. By routinely measuring and publishing the outcomes of the services we provide throughout each year, we can begin to understand what we do well and what we need to improve.

Advocacy

“Increasing media presence through staff-generated initiatives with trained St Patrick’s representatives is another planned activity to create awareness of mental health issues”

Advocating for the rights of those experiencing mental health difficulties, harnessing public support to represent their best interests and encouraging voluntary effort to maintain awareness of the issues continues to be a major focus of St Patrick’s Mental Health Services.

One of the main aims of an advocacy strategy is to reduce the levels of stigma surrounding mental health issues.

Among the actions identified to achieve this goal are to further develop the Walk in My Shoes campaign model, create a suite of recovery booklets, and develop a national GP engagement programme.

Increasing media presence through staff-generated initiatives with trained St Patrick’s representatives is another planned activity to create awareness of mental health issues.

During the year, a submission was made to the Mental Health Commission on the development of the organisation’s strategic plan.

This was prepared by a number of Governors and senior management personnel.

In 2012, the need for a youth advocacy service was identified by the management of Willow Grove Adolescent Unit. Funded by the St Patrick’s Hospital Foundation, the aim of this group, later renamed YES - Youth Empowerment Service, is to create an advocacy service for young people in Willow Grove Adolescent Unit and to grow the service so that it becomes an advocacy service that other young people in other adolescent mental health services can also access.

Teaching students about the reality of mental illness is the focal point of the organisation’s increasingly popular Transition Year programme that saw 80 young people from over 40 schools nationwide participate in one-week educational placements.

The students worked in various departments in the Hospital and attended mental health awareness classes in the Willow Grove Adolescent Unit.

Early intervention is the key to recovery so an important part of the programme is to inform students how to access appropriate supports and ensure they are better equipped to recognise the symptoms and warning signs of mental illness.

On the international front, the organisation continues to support advocacy initiatives in Ghana aimed at creating awareness of mental health matters and encouraging medical students to train in psychiatry.



A Continuum of Care

“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”

INTEGRATED SERVICES ACROSS THE CONTINUUM OF CARE

St Patrick’s and St Edmundsbury Hospitals and Willow Grove Adolescent Mental Health Services continued to develop in 2012 to provide mental health care and treatment through a range of services, delivered by highly trained and experienced mental health professionals.

The existing continuum of care was continuously enhanced throughout 2012. This continuum incorporates in-patient services, Day Services and our Community Mental Health Clinics, the Dean Clinics, and ensures service users receive continuity through their recovery pathway and the most appropriate care and treatment for their individual needs.

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 mental health centre. The ward-based nursing staff take 24-hour responsibility for ensuring the safety of service users and work with the service user 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

Within the in-patient setting, our service users access both group and individualised therapy through a variety of programmes and individual sessions with mental health professionals. This treatment and care is either additional 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, counselling psychologists, 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 AND RECOVERY CENTRE

The Wellness & Recovery Centre provides an alternative to admission for many service users. In 2012, Day Services continued to facilitate our service users' ongoing journey towards recovery following an inpatient stay or as a more intensive intervention following an assessment in one of our Dean Clinics. These services also help to foreshorten in-patient stays through the delivery of recovery-focussed day programmes, thus allowing people to continue with their personal lives, at work, leisure and social levels.

Developments in 2012

Wellness and Recovery Centre

Day Service attendance continued to expand during 2012. 1,205 service users commenced programmes throughout the year, of which 202 attended St Edmundsbury day services and the remainder attended St Patrick's. Attendances for 2012 were 7.67% ahead of agreed targets. This was a 15.5% increase on 2011 attendances.

Mindfulness

Mindfulness-based Stress Reduction (MBSR) expanded in 2012 in line with service user demand. Four discrete programmes were established, two-day programmes and one evening programme in St Patrick's, and one day programme in St Edmundsbury. In total, 75 individuals commenced MBSR in St Patrick's.



Recovery (WRAP) Programme

The Recovery Programme continues to be the flagship programme for day services. Two-day programmes and one evening programme continued. There were three refresher weekends undertaken throughout the year. A total of 175 service users attended recovery programmes in 2012.

Mental Health Information Evenings

A series of Mental Health Information Evenings commenced in September 2012. These talks are held one evening per week and are aimed at friends, family members and supporters of those with mental health difficulties and the general public. They are free to attend and are facilitated by mental health professionals from all disciplines, service user representatives and carer representatives. They are a rolling series of ten stand-alone talks.

Support and Information Service

The Support and Information Service is also provided through our Wellness and Recovery Centre. It is a free telephone-based service, delivered by experienced mental health nurses, that can be used by service users and their relatives to obtain information regarding the types of mental health care available nationally.

The service expanded in 2012 and an additional nurse was provided by the St Patrick's Hospital Foundation. Calls to the line increased by 6% on 2011 figures.

CLINICAL CARE AND PROGRAMMES

The Clinical Programmes that are available to service users as inpatients or day-patients include:

- **The Anxiety Programme** - is an evidence-based intervention programme aimed at service users who have been diagnosed with a primary Anxiety Disorder and is based on a cognitive behaviour therapy model and approach. In 2012, an additional OCD stream was firmly established.
- **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. The programme has distinct but integrated in-patient, out-patient and day patient care pathways and in 2012, the Sandyford Dean Clinic continued to develop community-based interventions.
- **Depression Recovery Programme** - is a treatment programme for individuals diagnosed with clinical depression. It assists individuals to understand, cope and manage their depression.
- **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. The aim of the addictions service is to provide treatment to match the individual needs of a person's recovery from alcohol and/or drugs with the right treatment. The programme provides a stepped model of care from out-patient assessment and treatment, followed by in-patient treatment when necessary, a step-down day programme and finally out-patient support delivered through after-care groups.
- **Dual Diagnosis Programme** - provides out-patient and in-patient treatment and support for individuals who have 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 specialist psychiatry 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 for Psychosis is also available to service users experiencing distress arising from the symptoms of psychosis.
- **Living through Distress and Radical Openness Programmes** - these programmes are delivered by Clinical Psychologists to assist people in dealing with emotional distress. In 2012, we enhanced and expanded these services to meet the needs of our service users.
- **Wellness and Recovery Action Planning (WRAP) Programme** - this 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, this programme aims to equip service users with the skills necessary to manage the symptoms of their depression and/or anxiety and to manage their journey towards recovery.



We have developed additional programmes that enhance and support the diagnosis-based programmes while providing a Recovery focus. These programmes have been developed in 2012 based on principles of Occupational Therapy, Social Work, Psychology and Psychotherapy.

COMMUNITY MENTAL HEALTH SERVICES - THE DEAN CLINICS

As well as initial assessment, the Dean Clinics provide multi-disciplinary treatment, individual and group psychotherapies and clinical reviews in helping to deliver more timely interventions and better outcomes.



Clinic newly opened in 2012

The Bon Secours Associate Dean Clinic

This is a general adult mental health service run by two independent consultants who are associated with SPMH. They have direct access to refer to in-patient and day patient care and provide mental health assessment and treatment for new referrals from General Practitioners to St Patrick's University Hospital.

Clinics already in operation in 2012

The Dean Clinic Galway

A general adult clinic, it allows easy access for service users from Galway, Mayo, Sligo, Roscommon, Longford, Clare and North Limerick.

The Dean Clinic Sandyford

A general adult mental health service, this clinic expanded its specialised services in 2012 and includes Psychiatry of Older Age, Eating Disorder, Young Adult from 18 to 25 years and Dual Diagnosis. The clinic accepts referrals nationwide for its specialist service and will cover Dublin South County, Wicklow and Kildare for general referrals.

The Dean Clinic St Patrick's

A general adult clinic, it also has additional services to cater for the particular physical health needs of people with enduring illness.

The Capel Dean Clinic

Located in city centre Dublin, this clinic continues to expand with general adult mental health services and a specialised Anxiety Disorders service, addictions and adult ADHD.

The Dean Clinic Donaghmede

A general adult service, in 2012 this clinic established close links and shared-care models of service delivery with local GPs.

The Dean Clinic Cork

This general adult mental health service continued to grow during 2012.

The Dean Clinic Lucan

Located on the grounds of St Edmundsbury Hospital, Lucan, this clinic continued to expand in 2012. It provides a general adult mental health service with 3 consultant teams.

Willow Grove Community Adolescent Mental Health Service

This separate service, with a full adolescent multi-disciplinary team, provides a community service for 14-18 year olds with mental health problems. This clinic is located on the grounds of St Edmundsbury Hospital, Lucan. This clinic, in addition to the Willow Grove Adolescent In-patient Unit based on the St Patrick's campus, represents two outstanding services on the Adolescent Mental Healthcare landscape nationally.

Human Resources and IT

“We are fortunate to have a dedicated and motivated staff who play a vital role in the Hospital’s day-to-day running and contribute significantly to our Medical Commission compliance status”

The central focus on the HR & IT fronts has always been to provide the internal IT systems and staff resources that will complement or enhance the key objectives of the Hospital’s five-year strategy.

Against a background of financial constraints as a result of the present economic downturn, considerable progress continued to be made in both areas during 2012.



As we grow our services, so too the staff numbers grow to meet the demand but the biggest challenge is managing the costs of employment. We are fortunate to have a dedicated and motivated staff who play a vital role in the Hospital’s day-to-day running and contribute significantly to our Medical Commission compliance status.

That our absenteeism rate is well below the national average in the health sector speaks volumes for their individual and collective commitment.

As part of a Lean Management structure, revised working arrangements were put in place to ensure greater flexibility and support between medical secretaries and general administration staff. We also implemented new controls to reduce the reliance on and financial exposure associated with employing temporary staff across all disciplines.

Following a competitive tendering process, leading HR consultancy Hays was selected to undertake our first staff engagement survey, devised in conjunction with the HR Department. Action plans to address the main findings were due to be implemented in the first quarter of 2013 and a follow-up staff survey is planned before the end of the year.

A number of developments on the IT front were put in place during the year. A vendor was selected and the budget sanctioned for the installation of cabling early in 2013 to allow for improved wi-fi/unified communications throughout the hospital.

A decision to proceed with a ‘best of breed’ solution to our requirement for an enhanced Electronic Health Record system was taken and the supplier will be determined early in 2013.

Also in the pipeline is a new HR/IT Software System, which among other things will link directly with Finance/Salaries software to generate significant efficiencies between these departments. It will also greatly assist in the day-to-day management and supervision of staff.

Brendan Power, HR & IT Director

Research & Training

“The Department’s success rate in applications for external funding continued, with a significant one-year grant under the Health Research Enhancement Awards”

2012 represented another highly active and productive year for research output from the team of 20 research clinicians working within the organisation’s Department of Psychiatry.

Between them, they had some 27 peer-reviewed research papers published in a wide range of clinical and basic science research journals. Topics ranged from pre-clinical molecular biology and behavioural studies to randomised controlled trials of text messaging and epidemiological studies on schizophrenia.

Recruitment of nearly 140 participants was completed in November 2012 to the HRB-funded randomised controlled trial of different forms of ECT for severe depression. Follow-up is due to be completed in 2013.

Studies of topical interest mentioned in last year’s Annual Report continued to make progress and the senior members of the team were actively engaged in the Department’s Outreach programme and various external work projects.

The Department’s success rate in applications for external funding continued, with a significant one-year grant under the Health Research Enhancement Awards. Over the previous five years, some €2m in external funding has been secured.

In the year under review, the organisation continued to recruit Clinical Research Fellows, posts that are awarded to more experienced junior psychiatry trainees (mostly post-MRCPsych) and have a 20% research commitment. Along with advances in the academic infrastructure of the organisation, this has allowed St Patrick’s Mental Health Services to appoint (and retain) more advanced trainees and to have a full complement of registrars.

This helps to further enhance the profile of clinical research activity within the organisation, thereby increasing its attractiveness to trainees in what has become a very competitive market in recent years.

Professor Declan McLoughlin, Consultant Psychiatrist at St Patrick’s Mental Health Services and Research Professor in Psychiatry at TCD

Finance Director's Report

“As we embark on our new strategy for 2013-2018, the primary focus will remain on delivering and expanding high quality services in a cost-effective and efficient manner to ensure greater access to our service..”



‘Mental Health Matters’ set out our strategy for the years 2008-2012, a key component of which was to stabilise and improve our financial position to ensure that new service initiatives and existing services are delivered in a financially-sustainable manner.

Despite the challenging environment over the last few years, the objectives as set out in the strategy were achieved.

This is a significant achievement, especially for an independent not-for-profit organisation with limited financial resources, and is a testament to the commitment of all stakeholders to our

shared objectives. Further progress was made in 2012 in continuing to consolidate our financial position through maintaining revenue, investing in additional staff resources, particularly in the community and cost containment, while continuing to deliver quality services in keeping with our strategic objectives.

FINANCIAL RESULTS

During the year, there were approximately 3,000 admissions to in-patient services, in line with the previous year and in excess of 5,500 day care visits which was ahead of the previous year.

The number of day care visits doubled over the period of the MHM strategy. The Dean Clinic network of community-based services demonstrated continued growth during 2012 as all of our clinics were fully operational throughout the year.



Dean Clinic activity levels increased significantly with total visits of 12,000 well in excess of the 8,000 during 2011. The number of new assessments also grew significantly during this period.

Overall income amounted to €61.6M (+2.5% v 2011) and total expenditure amounted to €58.4M (+2.7% v 2011), resulting in an operating surplus for the year of €3.2M, in line with 2011 levels.

The Net Operating Surplus (after interest and net pension charges) amounted to €2.1M representing a stabilised performance compared to €2.47M in 2011 allowing for an increase in the pension finance charge.

In overall terms, the increase in revenue year-on-year was offset by increases in wages and salaries costs, driven largely by additional resources being deployed into the community.

The programme of reducing and containing costs and achieving better value for money without compromising services delivered positive results again during 2012 and will continue throughout 2013, albeit in a very challenging environment.



Our balance sheet position as measured by net assets (excluding net pension liability) amounting to €30.9M improved for the year ended 2012, compared to 2011 net assets of €29M.

However, due to an increase in the net pension liability relating to the defined benefit pension scheme (which is closed to new members since 2005), the balance sheet position (including the net pension liability) deteriorated significantly during the year, resulting in a net deficit of €-17.898M compared to a net asset position of €13M for 2011, representing a decrease of €-30.958M.

The increase in the net pension liability is primarily driven by a significant reduction in corporate bond yields on the previous year.

The reduction in corporate bond yields had the effect of materially increasing the liabilities of the scheme under prescribed valuation methodologies.

The organisation is finalising plans that seek to resolve the affordability and future sustainability of the scheme with the Trustees and employee members of the scheme. Such actions are necessary to ensure the future sustainability of the organisation given the quantum of the deficit.

Discussions with the Trustees of the scheme have resulted in an agreed proposal that will be the subject of an application by the Trustees of the scheme to the Pensions Board under section 50, Pensions Act 1990 following a period of consultation with members.

Provided the application to the Pensions Board remains unchanged following the consultation period and is subsequently approved, the funding deficit is expected to reduce by approximately €48M based on an unaudited estimate from the Scheme's Actuary. This could, however, change depending on the finalisation of the Pension Board proposal but it is hoped that the agreed plan and a substantial reduction in scheme liabilities will be agreed and finalised during 2013.

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 €4.4M, representing an improvement from 2011 levels of €4.9M.

The net cash position amounted to €3M at the year-end. This compared favourably to the previous year due to the reliance on overdraft facilities at the end of 2011 amounting to €-2.4M, an improvement of €5.4M.

Total borrowings amounted to €4.4M of which €3.8M is repayable after one year.

During the year, capital expenditure amounted to €1.7M, relating to the continued upgrading and refurbishment of the organisation's facilities and assets.

Cash flow generation for the year was strong as a significant reduction in debtors of in excess of €4M was achieved. This, together with other components of working capital, was used to fund capital expenditure and eliminate the reliance on overdraft facilities at the end of the year compared to the previous year.

Extracts from the audited financial statements for the year ended 31 December 2012 are set out later in this report. This report and the extracts should be read in conjunction with the complete audited financial statements and accompanying notes together with the Governors' and Auditors' reports that are available on our website.

OUTLOOK 2013

The economic environment remains challenging and the impact of the wider economic environment on the health insurance industry - the primary source of our income - presents us with challenges in meeting our strategic objectives.

As we embark on our new strategy for 2013-2018 the primary focus will remain on delivering and expanding high quality services in a cost-effective and efficient manner to ensure greater access to our services. This approach will ensure the long-term sustainability of the organisation's unique position as an independent provider of high quality mental health services.



INDEPENDENT & NOT-FOR-PROFIT TRUST

The organisation is governed through a charitable trust, the operation of which is set out by charter. The Charter was established in 1746 and supplemented in 1888, 1895 and 1897. The Charter details the Memorandum and Articles of Association. The State adopted the Charter's orders in 1926.

The organisation is independently governed by a voluntary board of Governors, none of whom receive any remuneration for their services to the Trust.

The organisation receives no statutory funding from Government; however, services are provided to statutory bodies as cost effectively as possible. In addition, significant services are provided at no cost in keeping with the organisation's philanthropic tradition. The organisation's independence is of paramount importance as it seeks to provide the highest quality mental health care, promote mental health and advocate for the rights of those who experience mental illness.

The objectives of St Patrick's Mental Health Services are set out in the Charter and, unlike many organisations, the primary objective is not-for-profit making or to maximise shareholder returns.

There are no shareholders and consequently all the assets of the organisation are deployed for the provision of services to sustain the future of the Trust. Any surplus funds generated by the organisation are re-invested in the provision of additional services or the upkeep of the assets employed by the organisation. As a result of its unique status, it is therefore essential that sufficient returns from its operations and assets are generated through prudent management to ensure its long-term sustainability.

CORPORATE GOVERNANCE & INTERNAL CONTROL OVERVIEW

Maintaining the highest standards of corporate governance 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.

The Board maintains oversight and control of the organisation by having certain matters reserved for its decision, through the receipt of regular performance and quality reports by management on agreed plans, and by reviewing and authorising management proposals during the course of the financial year.

The Board is committed to the attainment of the highest standards of governance and regularly reviews its own effectiveness. During the year, the Board completed a routine evaluation conducted by an external facilitator.

The Governors have overall responsibility for the system of internal control procedures and reviewing its effectiveness. Together with the management team, they work towards the improvement of internal controls, the assessment of risk that may impact on the organisation (and its elimination where possible) and thereby ensuring the continued financial well-being and reputation of the organisation.

The Board delegates certain duties relating to internal control, risk management and general financial management and oversight to the Audit and Finance Committee. The Chairman of the Committee reports to the Board and minutes of meetings are circulated to all Governors.

During the year ended 31 December 2012, the Board met eleven times and the Audit & Finance Committee met four times.

Frank Byrne, Finance Director

INCOME & EXPENDITURE ACCOUNT*for the year ended 31 December 2012*

	2012 €'000	2011 €'000
Income - continuing operations		
Maintenance and treatment fees	61,024	59,522
Other income	589	577
	61,613	60,099
Expenditure		
Salaries and wages	(45,880)	(44,740)
Establishment and administration expenses	(8,027)	(7,725)
Other operating costs	(2,936)	(2,917)
Depreciation	(1,568)	(1,489)
	(58,411)	(56,871)
Operating surplus - continuing activities	3,202	3,228
Interest payable and similar charges	(223)	(230)
Pension finance charge	(870)	(521)
Surplus for the year	2,109	2,477

STATEMENT OF TOTAL RECOGNISED GAINS & LOSSES*for the year ended 31 December 2012*

	2012 €'000	2011 €'000
Surplus for the year	2,109	2,477
Difference between expected and actual return on scheme assets*	4,607	(6,352)
Experience gains and losses on scheme liabilities*	(314)	(2,573)
Effect of changes in actual assumptions*	(37,360)	5,512
Total recognised gains and losses for the year	(30,958)	(936)

*Defined Benefit Pension Scheme

NOTE OF HISTORICAL COST SURPLUS AND DEFICIT*for the year ended 31 December 2012*

	2012 €'000	2011 €'000
Reported Surplus for the year	2,109	2,477
Difference between historical cost depreciation charge on hospital buildings and the depreciation calculated on the re-valued amount	378	378
Historical cost surplus for the year	2,487	2,855

BALANCE SHEET

at 31 December 2012

	2012 €'000	2011 €'000
Fixed assets	26,722	26,576
Financial assets	86	86
	26,808	26,662
Current assets		
Stocks	86	81
Debtors	11,840	15,954
Cash at bank and on hand	3,008	0
	14,934	16,035
Creditors: amounts falling due within one year	(7,015)	(9,232)
Net current assets	7,919	6,803
Total assets less current liabilities	34,727	33,465
Creditors: amounts falling due after more than one year	(3,814)	(4,429)
Net assets excluding pension liability	30,913	29,036
Net pension liability	(48,811)	(15,976)
Net (liabilities) / assets	(17,898)	13,060
Capital and special funds		
Capital account	(17,898)	13,060

CASH FLOW STATEMENT

for year ended 31 December 2012

	2012 €'000	2011 €'000
Net cash inflow / (outflow) from operating activities	7,893	(25)
Returns on investments and servicing of finance		
Interest paid	(223)	(230)
Capital expenditure and financial investment		
Purchase of fixed assets	(1,714)	(1,601)
Net cash outflow from capital expenditure and financial investment	(1,714)	(1,601)
Financing		
(Repayment) / Additional bank loans drawn down	(594)	(516)
Increase / (decrease) in cash in the year	5,362	(2,372)
Reconciliation of net cash flow to movement in net debt		
	2012 €'000	2011 €'000
Increase / (decrease) in cash in the year	5,362	(2,372)
Repayment of bank loans	594	516
Change in net debt resulting from cash flows	5,956	(1,856)
Movement during the year	5,956	(1,856)
Net debt at start of year	(7,317)	(5,461)
Net debt at end of year	(1,361)	(7,317)

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