Paul O’Connell at the opening of the Willow Grove Adolescent Centre

Annual Report & Financial Statements
2010
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Participants in the Coast-to-Coast Cycle 2010
Introduction

When Jonathan Swift, Dean of St. Patrick’s Cathedral and noted author, founded St. Patrick’s Hospital over 260 years ago, he did so because he recognised that people with mental illness needed a specialist service to provide care, treatment and a voice.

Today, the Hospital is Ireland’s largest, independent, not-for-profit mental health service and aspires to be the recognised leader in the:

- provision of quality mental health care
- promotion of mental health awareness
- protection of the rights and integrity of those suffering from mental illness

Now known as St. Patrick’s University Hospital through its association with Trinity College Dublin, the Hospital is driven by the same vision, energy and determination first demonstrated by Dean Swift in 1746.

During 2010, over 3,000 people availed of in-patient and day care services provided by multi-disciplinary teams of highly-qualified mental health professionals at the St. Patrick’s University Hospital Group, and there were in excess of 5,000 visits to the community-based Dean Clinics. With regard to in-patient care and treatment, St. Patrick’s services account for circa 12% of the country’s total in-patient needs.

The Hospital has, over the years, developed a range of mental health services emphasising wellness and recovery principles to allow service users manage their lives effectively in spite of mental health issues.

St. Patrick’s launched its 5-year strategic plan ‘Mental Health Matters’ in 2008 and is now halfway towards reaching the goals it set out to achieve by 2013.

...no Nation needed it so much...
On behalf of the Board of Governors, it is my privilege to present the Annual Report of St. Patrick's University Hospital for 2010.

During the year under review, significant progress was made in meeting the targets set in our strategic plan ‘Mental Health Matters’ and tremendous credit goes to the management, staff and volunteers of the Hospital in achieving those goals.

Adolescence is a time of increased risk of poor mental health, with one in 20 teenagers estimated to suffer some form of mental illness, and the new facility aims to equip vulnerable young people with skills to manage their own mental health, improve their quality of life and aspire to achieving their life goals and dreams in spite of mental health obstacles.

St. Patrick’s University Hospital has a long tradition of providing treatment to young people with mental illnesses. Supporting the standards of best practice introduced by the Mental Health Commission, we have now invested in a distinct adolescent service providing a range of community-based, day service and in-patient care.

Willow Grove represents another milestone in our ongoing efforts to develop new services to complement our existing services. That tireless work will continue in the year ahead and well into the future.

Finally, I would like to take this opportunity to thank my colleagues on the Board of Governors for their invaluable input over the year, namely:


Mrs. Caroline Preston, Chairman

“The staff were so helpful and caring and gave me as much time as I needed”

Kathryn, Dublin
Since opening its doors, St. Patrick’s University Hospital (SPUH) has been at the forefront of developments in caring for and treating those suffering from mental illness. It is a continuous, ongoing process and the present-day team of dedicated professionals constantly strives to enhance the services available to the mentally ill.

When we launched our five-year strategic plan ‘Mental Health Matters’ in 2008, our aim was to further improve our services in four critical areas - service delivery, advocacy, developing service user participation and research & training.

Our focus was on a number of strategic goals, namely:

- Those experiencing mental health problems would receive the specialised treatment and support they need from SPUH which would be acknowledged as the leading provider of such specialised services in Ireland
- Society would have a better understanding of mental illness and there would be less stigma attached to it
- Mental illness sufferers and their carers would play an active role in the structures and services being developed to support them
- Sufficient mental health services would be established to support and treat mental illness sufferers
- Adequate mental health prevention initiatives would be developed.

Three years on and, despite the economic downturn since the strategy was introduced, significant achievements have been made in developing new and existing services and facilities which are beneficial to service users, their families and carers.

We have always been person-centred in our approach and we are committed to a Recovery Model whereby we foster positive coping and management skills to enhance the quality of life of those suffering from mental illness. In this way, we return individuals to active social, personal and working lives.

We treat the people who use our services with respect, dignity and compassion and include them in all important decisions. We strive to use all our resources in such a way that they enhance the Hospital’s reputation, protect its assets and enable us to fulfil our mission. That we continue to retain our ‘Approved Centre’ status following the Mental Health Commission’s annual inspections further underlines our determination to succeed and we continue to develop new initiatives in line with our Quality Framework.

That we are reaching - and indeed surpassing - our goals can be attributed to the immense efforts and dedication of our staff, volunteers and Board of Governors as we work together to monitor, evaluate, highlight and respond to the changing landscape of mental health within Ireland.

Paul Gilligan, Chief Executive Officer

“...We have always been person-centred in our approach and we are committed to a Recovery Model whereby we foster positive coping and management skills to enhance the quality of life of those suffering from mental illness...”
Service is central to everything we do at St. Patrick’s and we continue to re-organise and develop our programmes in line with the Mental Health Matters (MHM) strategy so that the diverse services we offer are delivered in a more open, accessible and effective way than ever before.

Under MHM, we made a commitment to develop new initiatives in mental health treatment and prevention services and to enhance the existing range of specialised programmes.

**ADOLESCENT SERVICES**

Within a year of starting MHM, we had established our community-based Adolescent Mental Health Service in which young people suffering from mental illness are assessed outside a hospital environment by attending one of our Dean Clinics, a facility that helped to remove stigma and treated the young people and their families with dignity and respect in a community setting.

This was followed in 2010 with the opening of The Willow Grove In-Patient Adolescent Centre, a new state-of-the-art 14-bed in-patient unit at St. Patrick’s. Operating to almost full capacity by the end of 2010, it has proven to be an invaluable facility in the Hospital and has been warmly welcomed by young people and their families, as the day service and community-based aspect of the service continues to grow.

**DEAN CLINICS**

The purpose of the community-based Dean Clinics, first established in 2008, was to provide multi-disciplinary mental health assessment and treatment for those who would be better supported within a community setting and also those who had left the Hospital’s in-patient services and recovery centre.

That the first three Clinics - in Dublin City Centre, Lucan and Donaghmede - should be increased to four with a centre opened in Cork in 2009 speaks volumes for the success of the Dean Clinic format. It is planned to open two further Clinics - in South Dublin and Galway - during 2011.

A development plan for the Dean Clinics, incorporating bundled care and free-of-charge assessment and follow-up, has been finalised and will be implemented in 2011.

**WELLNESS & RECOVERY SERVICE**

The Wellness & Recovery Centre is now well established on the Hospital campus and provides an alternative to admission for many service users who may have attended a Dean Clinic.
The Recovery Model is the primary focus of our service delivery and aims to give service users the necessary skills to cope with their illness while at the same time carry on their personal lives, at work, leisure or social levels. The Centre continues to provide programmes and services on a day-patient basis and a 10-day recovery programme equips users with the tools necessary to manage their own mental health and maintain their quality of life.

The Centre progressed the development of a number of new programmes during 2010 and achieved its clinical activity targets.

TECHNOLOGY-BASED SUPPORT SERVICES

The telephone-based Information & Support Service set up in 2009 continues to be an important resource for GPs, other healthcare professionals and members of the public. It has also proven to be a useful tool for existing service users, their families, carers and friends, to help them stay well at home.

“...The response and respect that I received meant a great deal to me, as I came to the hospital broken and despairing and left feeling renewed and well and looking to the future...”

Fidelma, Cork

The Centre progressed the development of a number of new programmes during 2010 and achieved its clinical activity targets.

A number of additional clinical programmes have now developed supportive websites which form the basis for the development of interactive web-support options in the future.

EXISTING SERVICES DEVELOPMENT

Enhancements have been made to a number of services/programmes during the past year, including:

- **Addiction Disorders** - this service is based at the Temple Centre for Addiction and Mental Health where a newly-installed high-observation area allows direct admission to a ward and seamless progression from detoxification to rehabilitation.

- **Anxiety Disorders** - this programme was enhanced with the addition of a day service component providing specialised assessments, and interventions specifically designed to address the problems caused by anxiety disorders.

- **Psychosis Recovery** - this new programme includes support groups for service users following discharge, as well as the Psychosis Recovery Aftercare programme.

- **Psychiatry of Old Age** - the appointment of a clinical nurse specialist and a broad range of interventions has helped to further strengthen this service for the over-65s.

Professor James V. Lucey, Medical Director
Advocacy

At St. Patrick’s, we place service users at the heart of decisions made at the Hospital and continually support advances in making mental health provision a right, not a privilege

Sarah Surgenor,
Communications Manager

“The monthly group meetings of OCD sufferers are small in number (usually around 5 or 6 people) so there isn’t the discomfort of standing up and speaking in a large forum. I find them very useful in my ongoing battle with OCD and hearing how it affects others”

Brian, Galway

St. Patrick’s remains committed to advocating at a national level for a society in which the rights of those suffering from mental illness are acknowledged and in which the stigmatism attached to mental illness is combated.

In line with an Advocacy Strategy approved by the Hospital Board in 2010, we became an active partner in the ‘See Change’ programme, a national anti-stigma campaign run by the mental health support agency Shine and the Department of Health. Part of that campaign is a series of evening public meetings around the country at which our CEO Paul Gilligan was a regular keynote speaker.

Our own research on the issue of the stigma of mental health revealed some disturbing attitudes and perceptions among the general public, a factor which can cause embarrassment and shame and a reluctance to seek the appropriate supports.

To address this issue and increase awareness of mental health, we produce and distribute information leaflets on the subject while also using print and broadcast media interviews to advocate on behalf of sufferers.

Our Medical Director Prof. James Lucey, for instance, is a regular contributor on mental health matters on RTE Radio’s ‘Pat Kenny Today’ programme.

We have continued to develop constructive relationships with the relevant authorities such as the Department of Health, the Health Service Executive and the Mental Health Commission. In conjunction with three other organisations, we helped to form the Independent Health Service Providers’ Group, later becoming its representative on the Independent Monitoring Group (IMG) which champions the ‘Vision for Change’ initiative.

The Mental Health Commission has recommended that ‘creative ways of involving the independent/private sector in public sector (mental health) projects should be explored’. For our part, we will continue to explore every available avenue in our drive to promote a better public understanding of mental health in Ireland and we have established links with a number of advocacy and service user groups towards this end.

Sarah Surgenor, Communications Manager

St. Patrick’s University Hospital - Annual Report 2010
Service User Participation

The implementation of the strategy to enhance service user participation within the Hospital was further strengthened during 2010 with service users continuing to be involved in such diverse activities as the establishment of the Adolescent Services Unit and the launch of ‘Mental Health Matters Phase 2’ and bringing a new perspective to staff recruitment while engaged on interview panels.

Service users continue to be consulted proactively about strategic developments and changes within the Hospital and are represented on a number of in-house committees including ethics and fund-raising.

A service user nominee also attends Board meetings on a quarterly basis in an ‘in-attendance’ capacity and has made a significant contribution.

The introduction of the ‘Expert by Experience’ initiative has continued to build an expert panel of service users to broaden participation and consultation within the Hospital.

In its document which charted transformational change within St. Patrick’s, the Consumer Council advocated a ‘Journey with Dignity’ through the Hospital, from the first point of contact to discharge and after-care.

“Our task is to enhance the experience of service users who undertake courses of treatment at St. Patrick’s and to ensure they have a positive experience in all aspects of their treatment”

Manus Hanratty, Chairman of Consumer Council

A number of new initiatives have been introduced to address the issues raised by that document and progress on these developments is directly overseen by the Senior Management Team.

Strategic partnerships with relevant service user organisations have been consolidated through the Hospital’s affiliation with the National Service Users Executive and active links with voluntary organisations such as Amnesty International, Shine and Bodywhys.
St. Patrick’s Director of Services Tom Maher reports on CLINICAL GOVERNANCE AND RISK MANAGEMENT during the year under review.

To enable us to continuously improve the quality and safety of our services, we pay particular attention to Clinical Governance measures within the organisation. Retention of our ‘Approved Centre’ status from the Mental Health Commission for all three approved centres underlines how effective we have been in enforcing these measures. Indeed, we received commendations for ‘excellent service care’ following our most recent annual inspection.

A comprehensive programme of quality improvement was introduced by our Clinical Governance Committee after the Mental Health Matters strategy was first launched and regular clinical audits are now carried out, with the results then reported back to the Committee.

In collaboration with St. John of God, we have established a clinical benchmarking process while our child protection policy has been comprehensively reviewed and independently audited.

Our risk management policies include incident reporting, complaints handling and adverse event review/analysis - our incident review process continues to provide invaluable information to evaluate the clinical performance of the entire service.

We also continue to implement our policies governing our relationship with pharmaceutical and medical device industries to ensure that our clinical decision-making is transparent, ethical and free of undue commercial influence. In this way, it is reflective of the highest standards of treatment and care.

Tom Maher, Director of Services
Specialist mental health care and treatment is provided through a range of programmes and services by highly trained and experienced mental health professionals.

These include clinical psychologists, social workers, occupational therapists, nurses (experienced ward-based nurses, clinical nurse specialists, advanced nurse practitioners), psychiatrists, cognitive-behavioural psychotherapists, systemic family therapists 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 or psychological distress. The Hospital provides a number of structured clinical programmes to address specific concerns.

**These programmes include:**

**Eating Disorder Programme** - emotional, psychological and relationship problems associated with anorexia, bulimia and binge-eating disorders are addressed within this programme which focuses on personal development and self-assertiveness.

**Depression Recovery Programme** focuses on assisting individuals with clinical depression develop a deeper understanding of their depression and personal factors that may influence their well-being. It provides psychotherapeutic approaches, goal setting and stress management strategies and aims to counteract maintenance cycles in depression.

**Bipolar Affective Disorder Programme** provides psycho-education and supportive interventions to facilitate insight and self-management of a person’s bipolar affective disorder and so promotes well-being and reduces the risk of relapse.

**Young Adult Programme** focuses on treating and supporting young people with common mental illnesses and problems in the 18-24 age range through a structured group programme which focuses on mental health literacy, health promotion and healthy lifestyles as well as family/vocational/educational interventions.

**Alcohol & Chemical Dependence Programme** offers an integrated and stepped approach to the treatment of addictions from in-patient to out-patient over a one-year addictions treatment package at SPUH.

Its purpose is to help service users with alcohol/chemical abuse dependence achieve abstinence through a multi-modal programme including didactic lectures, individual counselling, life skills training and access to services such as psychology, OT and nursing.

**Dual Diagnosis Programme** provides treatment and support for individuals who have a co-occurring psychiatric disorder with significant history of substance abuse through education about mood disorders, appropriate use of medication and interaction between non-prescription drugs and/or alcohol and mood disorders.

**Anxiety Disorder Programme** caters for a wide variety of anxiety disorders; the programme offers a combination of psychiatry, pharmacology, psychology and cognitive therapy to help individuals manage their disorder.

**Evergreen Programme** is based on the ‘psychiatry of later life’ and specialises in the mental health care of the elderly and particularly on depression and dementia in later life.

**Psychosis Recovery** is a 3-week recovery-orientated programme providing psycho-education around recovery strategies and specialist cognitive behaviour therapy skills to help service users cope with the distressing symptoms of psychosis.

**Memory Clinic** provides multi-disciplinary assessments for people experiencing memory difficulties and allows for comprehensive investigation and initiation of treatment, where appropriate on an in-patient or out-patient basis.

**Mood & Anxiety Programme** is facilitated in St. Edmundsbury Hospital; the programme consists of workshops on anxiety, depression and bipolar affective disorder and includes a recovery model based on a lecture series called ‘Managing Change’.

**Living through Distress** is a skills-based programme which is designed to assist individuals to reduce self-harming behaviour and manage their emotional distress. The programme is facilitated by Clinical Psychologists and is offered to in-patients and day-patients and includes, over a 12-month period, weekly individual therapy and 2.5 hour weekly skills group.
human resources and IT

Progress has continued on the implementation of our Human Resources Strategy, which has seen ongoing investment in training, a strengthening of our recruitment processes, the introduction of a staff performance review system and constructive communication structures established with the various Unions.

SPUH now employs over 600 staff, over half of which are clinicians (in a broad range of disciplines) who work in multi-disciplinary teams to facilitate a holistic approach to the treatment and care of those suffering from mental illness. Nursing staff are the principal conduit through which support and evidence-based care is provided to service users in all parts of their care journey through the Hospital.

Through our association with Trinity College, a number of undergraduate psychiatric nurses train with us each year during their Bachelor of Nursing Science degree programme while we have contributed to the development of the Master’s Degree in Child & Adolescent Nursing with TCD.

The HR strategy supports our staff members through continuous professional training and development and so ensures they are suitably qualified to meet the demands of their challenging roles. That SPUH continues to maintain its high standards and achieve its Mental Health Commission ‘Approved Centre’ status is a testament to the skills, commitment and effort which our staff put into their working lives all year round.

We have also engaged wholeheartedly in a strategic IT plan to support our operational procedures, with the objective of revamping and upgrading our internal systems so that our IT management system is fully integrated across all of the Hospital’s activities. We have strengthened our IT infrastructure and our IT Department and have plans to continue the enhancement of our IT systems into the future.

“We are constantly looking at ways of improving what we offer and our staff members are the key component in letting us achieve those goals”

Brendan Power, HR / IT Director

“You really make great friends here and also have amazing memories. Everything gets better, you just have to want to get better. Sometimes life’s hard but the struggle to get back up again is the test, but it always gets better”

Carol, Longford
Research and Training

When a Memorandum of Understanding with Trinity College Dublin was signed in 2009 and the Hospital officially became St. Patrick’s University Hospital (SPUH), it strengthened the relationship which already existed between the two organisations and heralded a new direction and energy in the way in which the Hospital approached Research and Training.

We continue to fully participate in the University’s Psychiatric Rotational Training Programme and also contribute to undergraduate education and training in a number of mental health disciplines such as occupational therapy, clinical psychology and nursing.

In another initiative, an academic post-graduate Department of Psychiatry has been established at Trinity which has developed new research programmes in conjunction with other academics in the College’s Institute of Neuroscience. This, in turn, has provided research support for projects led by consultant principal investigators in SPUH.

In addition, we continue to work on a 3-year project designed to measure quality of care in the context of the Irish mental health service. Funding was awarded jointly by the Health Research Board and the Association of Friends of St. Patrick’s. A comprehensive programme of research and practical presentations was displayed at the recently revived ‘Founder’s Day’ at St. Patrick’s.

Research and Training

Professor Declan McLoughlin,
Consultant Psychiatrist and Research
Professor in Psychiatry at Trinity College Dublin

We put significant emphasis on outcomes-based research and we are currently developing an internal database of outcomes norms used within the Hospital. We are also developing diagnosis-specific measurements and introducing the Clinical Global Impressions (CGI) scale throughout the Hospital, which rates illness levels and responses to intervention.

“The staff are all amazing and they treat you like young adults and not children. And the bonds you make here with the other young people are remarkable. You will leave here feeling like you’ve known them forever”

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

2010 was a challenging year, especially for an independent not-for-profit organisation with limited financial resources. However, significant progress was made in continuing to consolidate our financial position through revenue growth and cost containment while continuing to deliver quality services.

**FINANCIAL RESULTS**

During the year, approximately 3,000 people availed of in-patient and day care services and there were in excess of 5,000 visits to the community-based Dean Clinics. Overall income amounted to €59.9M (+6.7% v 2009) and total expenditure amounted to €55.6M (+2.4% v 2009), resulting in an operating surplus for the year of €4.32M (+ €2.36M v 2009). Growth in income was largely driven by an increase in rates charged for services.

The Net Operating Surplus (after interest and net pension charges) amounted to €3.26M compared to €0.184M in 2009. The significant improvement can be attributed to lower charges for bad debts, the results of the ongoing programme of reducing costs and lower pension finance charges due to an increase in the expected return on plan assets. The programme of reducing costs and achieving better value for money without compromising services delivered positive results during 2010 and will continue throughout 2011.

Our Balance Sheet improved during the year due mainly to a €7.1M reduction in the deficit of the defined benefit pension scheme from €-19.8m in 2009 to €-12.6M. This improvement can be attributed to an increase in the fair value of plan assets of the scheme and changes in the underlying valuation assumptions (under Financial Reporting Standard (FRS) 17) compared to 2009.

However, it should be noted that the funding deficit for the defined benefit scheme is significantly higher than the FRS 17 deficit. In addition, there was an increase in fixed assets and an improvement in net current assets driven by a reduction in the bank overdraft at year-end.

Bank borrowings reduced during the year as scheduled interest and capital repayments were made. Total bank borrowings (including overdraft) at the year-end amounted to €5.4M, representing an improvement from 2009 of €3.7M, due mainly to a reduction in the use of overdraft facilities at year-end. Total bank borrowings (excluding overdraft) amounted to €5.4M of which €4.9M is repayable after one year.

The Willow Grove Adolescent Centre

“Don’t worry about other young people, they are the nicest people ever and are very non-judgemental and full of advice and consideration. Just be yourself, don’t think you need to hide who you really are inside”

Michael, Tipperary
During the year, capital expenditure amounted to €2.9M, a large proportion of which relates to the completion of the new child and adolescent centre “Willow Grove”, which opened in May 2010. Other capital expenditure related to the continuous upgrading and refurbishment of facilities.

Overall, our net asset position at year-end amounted to €14.3M compared to €3.4M in 2009, representing an improvement of €10.8M.

Extracts from the audited financial statements for the year ended 31 December 2010 are set out later in this report. The complete audited financial statements and accompanying notes are available on our web site.

OUTLOOK 2011

Although the economic environment remains challenging, our financial position will continue to be consolidated in 2011. Services are being expanded where feasible, most notably via the new child and adolescent unit and the Dean Clinics.

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.

As an independent not-for-profit organisation, it is vitally important that continued prudent financial management is exercised to ensure the long-term sustainability of our organisation as it continues to fund the implementation of its strategic objectives, most important of which is to provide the highest quality services to people suffering from mental ill-health.

CORPORATE GOVERNANCE & INTERNAL CONTROL OVERVIEW

We are committed to maintaining the highest 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.

The Governors have overall responsibility for internal control procedures and for reviewing their effectiveness. Together with the management team, they expend significant time on improving internal controls, assessing risks that may impact on the organisation, eliminating such risks where possible and thereby ensuring the continued financial well-being and reputation of the Hospital.

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

During the year ended 31 December 2010, the Board met eleven times and the Audit & Finance Committee met five times.

Frank Byrne, Finance Director
Income & Expenditure Account
for the year ended 31 December 2010

<table>
<thead>
<tr>
<th></th>
<th>2010</th>
<th>2009</th>
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</thead>
<tbody>
<tr>
<td>Income - continuing operations</td>
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</tr>
<tr>
<td>Maintenance and treatment fees</td>
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<td>55,760</td>
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<td>Other income</td>
<td>621</td>
<td>523</td>
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<tr>
<td><strong>Total income</strong></td>
<td><strong>59,892</strong></td>
<td><strong>56,283</strong></td>
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<tr>
<td>Expenditure</td>
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<tr>
<td>Salaries and wages</td>
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<td>(39,760)</td>
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<tr>
<td>Establishment and administration expenses</td>
<td>(7,901)</td>
<td>(7,578)</td>
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<tr>
<td>Other operating costs</td>
<td>(3,380)</td>
<td>(5,722)</td>
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<tr>
<td>Depreciation</td>
<td>(1,374)</td>
<td>(1,265)</td>
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<td><strong>Total expenditure</strong></td>
<td><strong>55,572</strong></td>
<td><strong>54,325</strong></td>
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<tr>
<td>Operating surplus - continuing activities</td>
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<tr>
<td>Interest payable and similar charges</td>
<td>(231)</td>
<td>(194)</td>
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<tr>
<td>Pension finance charge</td>
<td>(823)</td>
<td>(1,580)</td>
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<tr>
<td><strong>Surplus for the year</strong></td>
<td><strong>3,266</strong></td>
<td><strong>184</strong></td>
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Statement of Total Recognised Gains & Losses
for the year ended 31 December 2010

<table>
<thead>
<tr>
<th></th>
<th>2010</th>
<th>2009</th>
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</thead>
<tbody>
<tr>
<td>Surplus for the year</td>
<td>3,266</td>
<td>184</td>
</tr>
<tr>
<td>Difference between expected and actual return on scheme assets*</td>
<td>3,153</td>
<td>6,510</td>
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<tr>
<td>Experience gains and losses on scheme liabilities*</td>
<td>831</td>
<td>1,892</td>
</tr>
<tr>
<td>Effect of changes in actuarial assumptions*</td>
<td>3,595</td>
<td>2,589</td>
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<td><strong>Total recognised gains and losses for the year</strong></td>
<td><strong>10,845</strong></td>
<td><strong>11,175</strong></td>
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*Defined Benefit Pension Scheme

Note of Historical Cost Surplus and Deficit
for the year ended 31 December 2010

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<thead>
<tr>
<th></th>
<th>2010</th>
<th>2009</th>
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<tbody>
<tr>
<td>Reported surplus for the year</td>
<td>3,266</td>
<td>184</td>
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<tr>
<td>Difference between historical cost depreciation charge on Hospital buildings and the depreciation calculated on the relevant amount</td>
<td>378</td>
<td>378</td>
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<td><strong>Historical cost surplus for the year</strong></td>
<td><strong>3,644</strong></td>
<td><strong>562</strong></td>
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### Balance Sheet

#### at 31 December 2010

#### Extract from Financial Statements

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<tr>
<th></th>
<th>2010</th>
<th>2009</th>
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<tbody>
<tr>
<td></td>
<td>€’000</td>
<td>€’000</td>
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<tr>
<td><strong>Fixed assets</strong></td>
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<td></td>
<td>26,464</td>
<td>24,946</td>
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<td><strong>Financial assets</strong></td>
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<td>26,550</td>
<td>25,032</td>
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<td><strong>Current assets</strong></td>
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<td>Stocks</td>
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<td>93</td>
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<td>Debtors</td>
<td>13,885</td>
<td>17,101</td>
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<td>Cash at bank and on hand</td>
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<td></td>
<td>13,974</td>
<td>17,200</td>
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<td><strong>Creditors: amounts falling due within one year</strong></td>
<td>(8,671)</td>
<td>(13,626)</td>
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<tr>
<td><strong>Net current assets</strong></td>
<td>5,303</td>
<td>3,574</td>
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<tr>
<td><strong>Total assets less current liabilities</strong></td>
<td>31,853</td>
<td>28,606</td>
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<tr>
<td><strong>Creditors: amounts falling due after more than one year</strong></td>
<td>(4,967)</td>
<td>(5,374)</td>
</tr>
<tr>
<td><strong>Net assets excluding pension liability</strong></td>
<td>27,886</td>
<td>23,232</td>
</tr>
<tr>
<td>Net pension liability</td>
<td>(12,631)</td>
<td>(19,822)</td>
</tr>
<tr>
<td><strong>Net assets</strong></td>
<td>14,255</td>
<td>3,410</td>
</tr>
<tr>
<td><strong>Capital and special funds</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Capital account</td>
<td>14,255</td>
<td>3,410</td>
</tr>
</tbody>
</table>
Cash Flow Statement
for the year ended 31 December 2010

<table>
<thead>
<tr>
<th></th>
<th>2010</th>
<th>2009</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Net cash inflow from operating activities</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>€'000</td>
<td>€'000</td>
</tr>
<tr>
<td><strong>Returns on investments and servicing of finance</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Interest paid</td>
<td>(231)</td>
<td>194</td>
</tr>
<tr>
<td><strong>Capital expenditure and financial investment</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Purchase of fixed assets</td>
<td>(2,911)</td>
<td>(1,948)</td>
</tr>
<tr>
<td><strong>Net cash outflow from capital expenditure and financial investment</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>(2,911)</td>
<td>(1,948)</td>
</tr>
<tr>
<td><strong>Financing</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>(Repayment) / Additional bank loans drawn down</td>
<td>(467)</td>
<td>986</td>
</tr>
<tr>
<td><strong>Increase in cash in the year</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>3,289</td>
<td>609</td>
</tr>
</tbody>
</table>

Reconciliation of net cash flow to movement in net debt

<table>
<thead>
<tr>
<th></th>
<th>2010</th>
<th>2009</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Increase in cash in the year</strong></td>
<td>3,289</td>
<td>609</td>
</tr>
<tr>
<td><strong>Repayment / (draw down) of bank loans, net</strong></td>
<td>467</td>
<td>(986)</td>
</tr>
<tr>
<td><strong>Change in net debt resulting from cash flows</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>3,756</td>
<td>(377)</td>
</tr>
<tr>
<td><strong>Movement during the year</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Net debt at start of year</td>
<td>(9,217)</td>
<td>(8,840)</td>
</tr>
<tr>
<td><strong>Net debt at end of year</strong></td>
<td>(5,461)</td>
<td>(9,217)</td>
</tr>
</tbody>
</table>
The need for mental health services is greater than ever before. One in four people in Ireland will suffer from some form of mental illness at some stage in their lives and countless numbers of families and friends are affected by the consequences of mental ill-health.

St. Patrick’s University Hospital has constantly been at the forefront of developments in treating and caring for mental health sufferers but it needs financial support from the public to enable it to fulfil its mission.

As the philanthropic arm of the organisation, the St. Patrick’s Hospital Foundation is responsible for generating the funds needed to provide access to quality mental health care, increase understanding of the importance of mental health and help research into the causes, treatment and prevention of mental illness.

Despite the many challenges facing fund-raisers in the current economic climate, the Fund-raising Department succeeded in creating a surplus in the past year, a remarkable achievement under the circumstances. It was the result of innovative events and activities and a new Transition Year initiative introduced into secondary schools will help to enhance awareness of the issues of mental health and generate much needed funds as well.

“75% of adult sufferers first experience symptoms before the age of 25......20% of deaths by suicide are young people between 15 and 24 years of age, so we want to help reduce those statistics dramatically”

John Saunders, Chairman, St. Patrick’s University Hospital Foundation
St. Patrick’s University Hospital

PO Box 136, James’s Street, Dublin 8
Tel: 01 249 3200

St. Edmundsbury Hospital

Lucan, Co. Dublin
Tel: 01 621 8200

Dean Clinics

Lucan, Co. Dublin
Sandyford, Co. Dublin
Capel Street, Dublin 1
Donaghmede, Dublin 13
Mahon, Cork
Central Referral Line: 01 249 3535

Support & Information Service
Tel: 01 249 3333

www.stpatrickshosp.ie