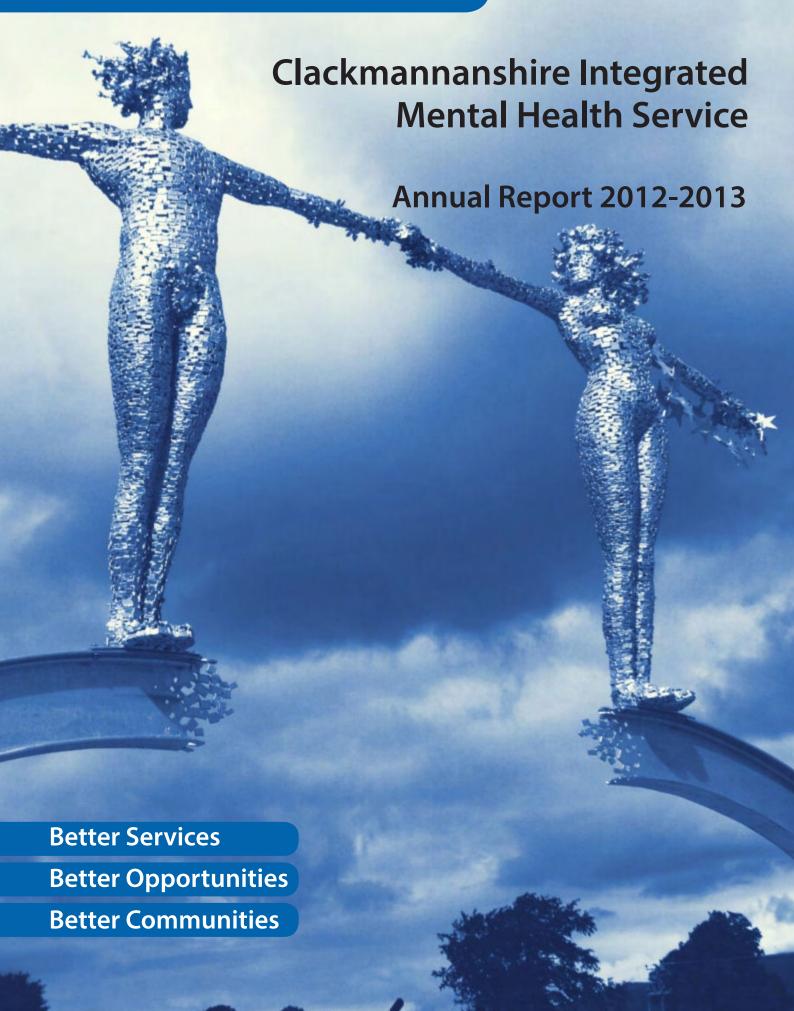
Making Clackmannanshire Better



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Foreword



Hello and welcome to the Integrated Mental Health Service 2012-2013 Annual Report for Clackmannanshire and what represents my first foreword for the service following on from Jane Menzies' many introductions within similar reports over recent years. No pressure then in setting the scene and offering further insight regards the here and now!

Well since commencing my secondment in May 2012 as Service Manager for Partnership in the "Wee County" it has been my great pleasure to have observed at first hand the genuine commitment, dedication and professionalism shown by staff across the whole of range of services available.

Significantly, this report encapsulates such sentiment with reference to examples of best practice demonstrated by staff as well as acknowledging external recognition through attainment of the Customer Service Excellence Award, yet again. Notably, it is humbling that all this success does not lead to complacency as staff simply view themselves as going about their normal service and duties as opposed to doing anything additional or out of the ordinary.

This report, in keeping with previous years, illustrates how the integrated service is maintaining effective service delivery by continuing to support the mental health and well-being of individuals with a range of complex and mild to moderate difficulties who come into contact with the services available. The overview provided is by no means exhaustive as the array of services and supports available really are enormous and a credit to health and social care integration and partnership working between health, local authority and third sector partners.

Furthermore, initiatives focusing on employability, keep-well, housing, training and extending the availability of stress control, wellness recovery approaches, mental health first aid training and information and technology support are all helping to advance health maintenance, outreach, recovery, early intervention and preventative health agendas as well as consolidate inter-agency and partnership working locally.

In addition, the Integrated Mental Health Service having been established in 2003 finds itself being viewed as a forerunner for health and social care integration. This has resulted in contributions being sought to present at national government conferences on integration as well as influencing developments within Stirling along similar lines and the wider approach adopted by the Community Health Partnership for Forth Valley.

The phrase "look about you" is synonymous with Clackmannanshire and for many this also conveys a message to appreciate what you have around you! Interestingly, only the other day I heard personal testimony from an individual who had advised that they had been a recipient of the full range of supports offered by the Integrated Mental Health Service for Clackmannanshire over a number of years and there was immense appreciation expressed for all the support received in aiding recovery, positive mental health and well-being. So without further prelude I commend the reader to turn the pages, reflect and take stock of what offers a further instalment of the journey and progress so far!

Best wishes and kindest regards.

Phil Cummins Service Manager Partnership

Vision, Mission and Core Values

Our Vision

A healthy Clackmannanshire, where positive mental health is promoted, and individuals, families and communities feel supported, included and valued.

Our Mission

To provide an efficient, accessible, recovery-based mental health service for all who need it.

Our Core Values are about PEOPLE:

Person-centred & Individualised

Equality & Accessibility

Openess & Respect

Partnership & Involvement

Living, Learning & Recovery

Excellence & Innovation

Service Overview and Objectives

The Integrated Mental Health Service is a joint working initiative dating from 2003 between Clackmannanshire Community Health Partnership (CHP) and Clackmannanshire Council Social Services. We also have strong partnerships and links with other mental health professionals, voluntary organisations and our local service user network (Klacksun). The service was established to:

- Formalise existing joint working
- Improve information sharing and communication
- Reduce barriers and improve continuity of care

The service also aspired to greater efficiency through:

- Improved coordination of resources
- Reduced duplication
- Pooled budgets
- Increased service user involvement

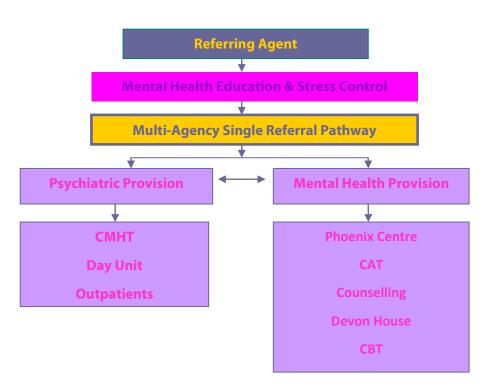
By working in partnership we can share information and resources to provide co-ordinated mental health services to meet the needs of people in Clackmannanshire.

We operate a Single Referral Pathway to ensure that all mental health referrals are directed to one point. This means that a decision can be made quickly to make sure the person being referred goes directly to the correct team. As a result of working together, we are able to reduce waiting times, provide a wider choice and see people quicker.

The diagram below shows how referrals are processed through the Single Referral Pathway:

The service strives for continuous improvement and excellence and has been recognised for its successes in many ways, including the achievement of Customer Service Excellence and a gold COSLA Award for Service Innovation and Improvement in 2011.

Our overall aim is to provide the best service we can, using our staff and resources in the best way possible to help people with mental health issues.



Our Services



Carsebridge House



Mental Health Resource Centre

The aims of the integrated service are progressed by a number of teams offering a range of community mental health supports. The teams provide early interventions and support for individuals with common mental health problems to longer term support for individuals with more complex mental illness. All teams equally contribute to the successes we have achieved.

Our services are provided chiefly from two buildings; Carsebridge House and the Mental Health Resource Centre within Clackmannanshire's Community Health Care Centre.

Carsebridge House

Support for People with Mental Health Issues

Carsebridge House provides a base for the Phoenix Centre, Community Access Team and the Supported Employment Service.

The teams in Carsebridge House provide support for people who have a wide range of mental health problems. This includes one-to-one support, guided self-help and a variety of groups. Support is also available to help people access a range of community activities as well as employment, education, training and voluntary work

Klacksun (Service Users Network) has it's own equipped office space within the premises allowing members to be actively involved in user involvement activities such as developments, planning and joint working.

The Scottish Association for Mental Health, our Third Sector partner, also provides services from Carsebridge House (Devon House and Counselling Service).

Mental Health Resource Centre

Support for People with Psychiatric Disorders

The Mental Health Resource Centre is a new, purpose-built building which accommodates our Day Unit service and Community Mental Health Team as well as Consultant Psychiatrists, Psychologists, Art Therapy and the Rehabilitation Team who we work jointly with to provide our services.

The teams within the Mental Health Resource Centre offer assistance to people with severe and complex mental health issues. Support is based on individual needs and includes developing positive coping skills and promoting positive mental health and well-being. This may be provided through individual or group therapy, at home or in the resource centre.

Partnership Working & Links with Other Organisations

Partnership working is key to everything we do and ensures our services meet customer need. The integration however is not solely internal and we could not function without a wider range of stakeholders:

- GPs and Primary Care
- Carers services
- NHS and Council colleagues (Housing, Education, Acute Services)
- Job Centre Plus and Clacksworks
- Clackmannanshire
 Healthier Lives
 Anticipatory Care Project

A Liaison and **Development Group** is in

place to ensure managers and service users meet regularly and that user views are integral to all that we do. This allows us to jointly discuss service need, review or create service policies and develop new strategies.

The Service Developments & Improvements section offers more information on achievements to date, many taken forward exclusively by service users themselves.

Klacksun Service User Network

Klacksun is a key part of the integrated service, but it is also key that it works independently and challenges our work where appropriate. The integrated service funds this facility to ensure that the voice of users is heard and influences our practice. Klacksun is led by an Involvement Development Worker and has an office and meeting space within Carsebridge; a small budget is provided for expenses, activities and projects. Klacksun considers itself as the 'voice that counts'; it contributes to, develops and challenges services, with the shared aim of improving them. Examples of their work include:

- Contributing to national consultations
- Leading work across Forth Valley on User Involvement expenses
- Influencing the national processes for Mental Health Nurse recruitment
- Working alongside Stirling University regarding Nurse and Social Work student induction processes
- Producing regular newsletters offering mental health related news and information
- Full involvement in staff recruitment and practices
- Establishing a website committed to user involvement www.klacksun.org.uk
- Undertaking training and offering awareness sessions as well as one-to-one support in creating Wellness Recovery Action Plans

We have a unique relationship with the Scottish Association for Mental Health (SAMH) who share our premises, performance monitoring processes and referral pathyway. SAMH provide two core local services.

o Devon House

A day service provision for individuals with severe and enduring mental illness.

o Counselling Service for People with Mild to Moderate Difficulties

Support for individuals who are experiencing adverse life events, life cycle transitions, sexuality issues or coping with illness.

Service Developments & Improvements

DEVELOPING & IMPROVING PARTNERSHIPS

Health Maintenance

Joint working has shown beneficial in cases where individuals have more than one severe illness and have care delivered by more than one specialist team. An example of this was demonstrated in the Pharmaceutical Journal in December 2012, where an individual attending the Health Maintenance Clinic at the Mental Health Resource Centre was being treated for a psychotic illness as well as another serious illness.

Multi-disciplinary teams worked jointly in the best interests of the individual, ensuring that there was careful consideration and planning in place to allow continuation with the best anti-psychotic treatment whilst undertaking other treatment. The planning ensured that they were able to manage the potential risks and monitor the safety of this complex treatment plan.

The results of this carefully managed plan was a successful outcome for the individual, whose mental health remained stable, allowing continued support in the community and participation in various social activities.

Employers Engagement Event

This event invited local employers as well as local employability partners to raise awareness of support provided.

Sylvie McCleary, Team
Manager and Alan Gordon,
Employment Resource Worker
represented the service at
the event in Alloa Town Hall
on 27th November 2012 and
provided local employers with
a new Employers Support
Guide.

Redesign of Commissioned Services

In Autumn 2012 a working group was set up to review the service specifications for counselling services for mild to moderate mental health and community support services for adults with more severe mental illness. These services are commissioned by Integrated Mental Health Service and complement existing services.

The working group, along with service users, identified service gaps and areas where existing services could be improved to meet the needs of the community.

The tender was advertised at the end of 2012 and the panel, which included service users, awarded the contract to SAMH in the spring.

Early Years Interventions

Through working in partnership with the Early Years services, the Integrated Mental Health Service was successful in achieving funding from the Early Years Change Fund to recruit a temporary Community Mental Health Worker. This post will provide support to vulnerable young parents and families with children under 5 years old, with a particular focus on those affected by mental health problems, substance misuse and other chronic social difficulties. In addition to this, the Community Mental Health Worker will also carry out preventative work with young people.

Early Intervention is aimed at improving life changes of vulnerable families and their children by building their confidence, understanding, self-belief and ability to make changes.

New Developments & Improvements

RAISING AWARENESS AND PROMOTION POSITIVE MENTAL WELL-BEING

Support for College Students

In September 2012 Emma McEwen, Community Mental Health Worker and James Mackenzie, Involvement Development Worker represented the Integrated Mental Health Service to new students enrolling at Forth Valley College (Alloa campus).

During the event, they handed out self help materials, booklets and guides to the new students to help them prepare for the start of a new year of education and all the stresses and problems they may face over an academic year.



Staff from the Phoenix Centre along with Devon House staff, Klacksun members and nursing students participated in a Health Awareness Event at the college in February 2013 to promote positive mental health.





Raising Awareness in the Community

Staff from the Integrated Mental Health Service along with Klacksun members participated in an awareness raising event in Asda and Morrisons, two of Clackmannanshire's busiest supermarkets, during Mental Health Awareness Week in October 2012.

Taking a twist on the practice of bag packing for charity, participants packed the bags of shoppers in order to hand out self help and promotional material for local services. These include bookmarks with top tips to positive wellbeing and information on local stress control classes and were handed out to almost 2000 shoppers.

Support for University Students

In October 2012, Klacksun members held a mental health awareness event at Stirling University with the aim to raise awareness of mental, provide information and decrease stigma.



In March 2013, Emma McEwen, Community Mental Health Worker and Klacksun members held a "marketplace" with information on access to mental health support for the university teachers and pupils and self-help / online resources.



New Developments & Improvements

STAFF TRAINING AND DEVELOPMENT

Staff Qualifications

Congratulations to our staff who completed formal qualifications this year:

- o Natalie Currie, IMHS Support Assistant achieved the European Computing Driving Licence (ECDL) at the end of 2012.
- o Ruth Murray, Mental Health Resource Centre Manager completed the Nursery and Midwifery Workload and Workforce Planning module at Stirling University in Spring 2012.
- o James Mackenzie, Involvement Development Worker achieved SVQ Level 4 in Management early in 2013 through his part-time employment with Stirling Street Pastors.

Wellness Recovery Action Plan

Ian Hammond and Alan Gordon from the Community Access Team undertook Wellness Recovery Action Plan (WRAP) training in April 2012. This training has helped them to develop skills which they can use to assist service users in developing their own action plans for recovery.

Behavioural Activation for Depression Awareness

lan Hammond, Alan Gordon and Garry Jackson from the Community Access Team and Tracy Binnie, Senior OT within the Community Mental Health Team undertook a training course on Behavioural Activation for Depression Awareness in November 2012.

Mental Health Awareness

James Mackenzie, Involvement Development Worker undertook the Scottish Mental Health First Aid (SMHFA) and Applied Suicide Intervention Skills Training (ASIST) courses. These courses are mandatory for staff within the service whose role does not require a mental health qualification and helps improve awareness and knowledge on mental health problems.

Lone Working

Audrey Williams, Ian Hammond and Alan Gordon from the Community Access Team and Tracy Binnie, Senior OT within the Community Mental Health Team attended Lone Working training which helped staff to improve their awareness of the Lone Working Policy and to assess, manage and minimise risks

Emergency First Aid

Garry Jackson, Community Access Worker undertook **Emergency First Aid** training in February 2013. This training is a statutory requirement which is HSE approved. It covers recording of incidents and accidents, assessing the situation in an emergency, minor injuries and administer first aid to a casualty who is unconscious; requires cardio pulmonary resuscitation (CPR); is choking; is wounded or bleeding or is in shock.

Celebrating Success

Principles into Practice Awards

The Principles into Practice Awards help identify, share and celebrate good practice across Scotland. The principles that are set out in mental health and incapacity law are all about respect for the individual. They challenge us all to keep the whole person at the centre of policies, decisions and 'taken for granted' practice. These principles apply to the care and support of people with mental illness, learning disability, or related condition.

In November 2012 we submitted an application for the category Service User Participation and Influence (Peoples' Choice Award) to demonstrate how services, projects and teams have embraced the principles in their work and how this has improved outcomes for individuals. We were required to demonstrate a clear commitment to developing services that place the needs, views and rights of individual service users and carers at the heart. This included:

- Commitment and flexibility in their approach to service-user participation in care and treatment.
- Service development and delivery that responds directly to service-user involvement.
- A positive impact on individuals and the quality of services provided for people with mental illness, learning disability and related conditions.

We were delighted to be short-listed as one of the 3 finalists for this category.

Although we did not win the award it gave us an opportunity to share the work that we do in partnership with our service users and Klacksun members.

The adjacent picture shows staff and Klacksun members during their presentation of the work achieved in partnership with service users at the awards event in March 2013.



Customer Service Excellence Award

Following achievement of this award in 2010, we are required to undertake a further assessment each year to ensure we are continuing to meet the requirements and improving our services.

The Customer Service Excellence standard is a quality improvement tool which focuses on outcomes the service actually provided to the customer.

The assessment focuses on:

- **Customer Insight**
- The Culture of the Organisation
- **Information and Access**
- Delivery
- Timelines & Quality of Service

In September 2012, we were assessed against 19 elements of the Customer







Service Excellence standard. We are pleased to report that we were successful in maintaining the Customer Service Excellence Award.

We fully met the requirements for all elements, as well as being recognised for good practice in 2 elements thus achieving compliance plus for those particular elements.

Performance and Montoring

An extensive performance framework is in place monitoring all aspects of care, ensuring standards are maintained and improved where possible. Regular reports are considered at both management meetings and in the Quality Forum.

Performance reports and balanced scorecards are updated regularly and we use this information to tell us about our service user needs and the demand for specific provisions. This ensures resources are directed to where need is evidenced and issues can be addressed easily and in good time.

Who do we receive referrals from?

In the year 2012-13 we received a total of 1895 appropriate referrals, 1402 were from external services and 493 were referred internally:

Primary Care	1279
Social Services	10
Intensive Home Treatment Team	23
Inpatient Care	15
Other	75
Internal referrals	493

Internal Referrals

26%

IHTT

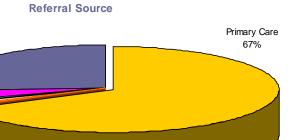
1%

Other

4%

Inpatient Care

1%

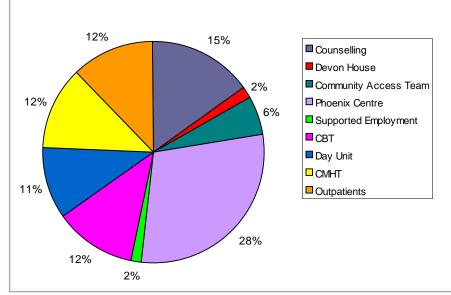


What services do people need?

Social Services

By collating data and producing regular reports, we are able to monitor which services people are being referred to. This allows us to determine where we need to place our resources and to identify if we need to make any changes.

The chart below shows the percentage of referrals going to each service in the last year.

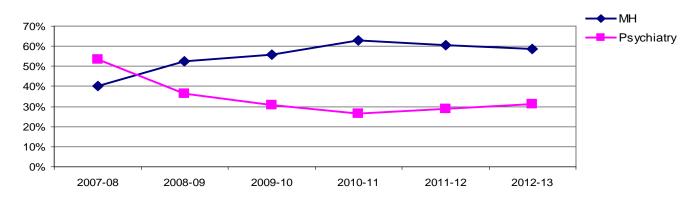


Performance and Montoring

Shifting the Balance of Care

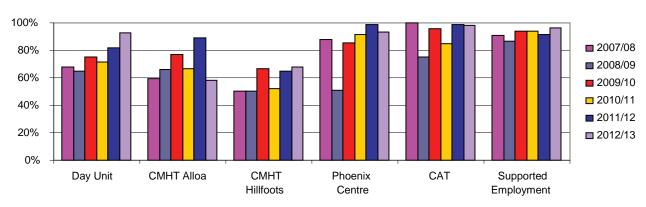
Prior to redevelopment, it was acknowledged that too many referrals were being directed to psychiatric services. To address this, the referral process was reviewed, service directories outlining available teams were published and alternatives such as CBT and Counselling were provided. As a result we have now achieved and maintained significant reduction in the referral rate in line with our target and the national 'Shifting the Balance of Care' strategy. It is generally accepted that service users are better served accessing lower tier provisions where possible.

Percentage of referrals to psychiatry & community based mental health services



How well do we meet our timeframes?





The referral process offers clear timeframes for the referrer to decide when we should respond (within either one week or 6 weeks depending on whether the referral is urgent or routine).

The adjacent chart shows how well services within the Integrated Mental Health Service have met those timeframes over the last 5 years.

Evaluation

The Integrated Mental Health Service uses formal and informal methods to obtain feedback on how service users, staff and stakeholders feel about our services. This includes surveys and various evaluation methods as well as informal ways such as comments made by service users, group members or people at meetings. We use this feedback to evaluate our services and identify areas where we can make improvements.

Some examples of the feedback we have received over the last year are as follows:

STAFF SURVEY

The response to this year's staff survey was less positive than previous years and there was a lower response. This may be due to the impact of some changes across the service resulting in low staff morale and managers will look at ways to improve this. Some of the responses are shown opposite.

This has, however, not affected the service we provide and we are pleased to report that there continues to be a high level of satisfaction in the services we provide, as demonstrated below in our annual service user, carer and stakeholder survey results as well as our service evaluations results.

- 86% of staff fully understand the role and responsibility of their job
- 100% are clear on the purpose, aims and objectives of the tasks they carry out
- 93% are clear on the standards expected in all areas of their job
- 69% encouraged and supported in taking on new responsibilities and tasks
- 62% feel encouraged to strive for excellence and improvement
- 71% feel encouraged to contribute to service development and planning
- 57% they get the training and development they need to carry out their jobs effectively

STAKEHOLDERS SURVEY

Services and Information:

95% feel the service is easy to access

95% feel the range of services is adequate to meet client needs

74% feel the information provided about services is sufficient and easy to obtain

81% feel the information provided is accurate and easy to understand

Communication and the Single Referral Pathway:

83% rated the Single Referral Pathway as good - excellent

100% rated client related communication as good - excellent

61% rated general communication as good - excellent

The Overall Service:

100% feel satisfied with the overall service

This year we distributed our 3rd annual survey to obtain views on how our main stakeholders feel about our overall services. The survey was sent out to all GPs, partners and agencies that we have established close links with.

We are pleased to report that the level of satisfaction with client related communication and the Single Referral Pathway has risen following the slight drop shown in last year's results.

There has been a drop in the level of satisfaction with general communication and to address this, we have already started the process of re-establishing visits to GP practices in the area.

Evaluation

CARERS SURVEY

In past years we have recognised that identifying and supporting people who care for someone with a mental health problem is an area where we need to improve.

This is a key priority in our Service
Development Plan and some of
the work we have done includes
developing a Support for Carers,
Relatives and Friends leaflet which is
included in the Information Checklist
we use to ensure service users receive
one to pass on to the key person in
their life. We also promote carers
support in the Council's newsletter
The View which is circulated to all
households in Clackmannanshire.

We sent our annual survey to all current known carers/key persons (19) and received 4 (21%) responses this year.

75% feel they are **supported in their caring role** by the service

100% feel there is **clear information about available services**

75% feel that the **assistance** provided meets some or all of their needs

25% feel that carers in Clacks **need additional support or help**

100% feel the **support they receive** from the service **has helped them to continue their role as a carer**

The main **support that carers have found most useful** are:

Advice / information - 50%

· Counselling / emotional support - **50%**

Social activities - 50%

· Training and learning - 50%

We sent our annual service user survey out to 150 randomly selected people and received 35 (23%) responses.

82% said they received clear information

94% said they get **a good response** when they contact us

84% feel they **don't have to wait too long** for the service

84% said they have been **fully involved** in deciding the service they receive

92% feel they can rely on the service

84% feel there is a good range of services available

97% feel they are **given choices** about the type of service they will receive

94% feel the service is of a good quality

94% feel they are **treated with dignity and respect** by the service

86% feel they got help when they needed it

90% say services have made them feel safer

83% say services have helped them to lead **a more** independent life

70% feel services have helped them **feel part of the community**

81% say they have been **offered a clear plan** describing the services they will receive

SERVICE USER SURVEY

The results of this year's survey were again very similar to our previous surveys, showing a good level of satisfaction in almost every area.

We continue to make efforts to ensure our service users see a written assessment of their needs and this year has shown some improvement from previous years with 50% saying that they had seen this. One of the ways we have done this is through the introduction of an Information Checklist which will help ensure that everyone using our services will receive the same standard information, including a written assessment of their needs.

This is the last year that we will do an annual service user survey as we have now incorporated questions from this survey into our "Tell Us What You Think" evaluation system. This means that more service users will be given the opportunity to feedback on a wider range of aspects about the service.

Evaluation

TELL US WHAT YOU THINK

Tell Us What You Think is our system to evaluate the service user experience.

The system was developed following consultation with service users and ensures that every service user is given the opportunity to give feedback using their preferred method.

Service users are given the opportunity to give feedback when they complete the service provided, or every 6 months for those receiving a service for longer periods.

The results of the evaluations for the reporting period 2012-13 are shown:

The Service Provided:

90% said they **discussed and agreed the service** that would be provided with their keyworker

78% felt the service has **helped them** with the problems they needed support with

Information Provided:

98% felt the information provided was accurate

94% felt it was easy to understand

96% felt they were given all the information needed and given it at the right time

The Venues

100% said the venue was **clean and suitable for the activity**

96% said the venue was comfortable

The Overall Service:

93% rated the overall service as good - excellent

STRESS CONTROL CLASSES

How well was the course presented:

100% of participants rated **the presentation of the course as satisfactory-excellent**

How good were the materials and information provided:

100% rated the materials provided as satisfactory-excellent (booklets, relaxation CD, question box and the information table) 100% felt the information provided was accurate and given to them at the right time

99% felt the information was easy to understand and 98% felt they were given everything they needed

How was the venue and timing of the course:

100% were satisfied that the venue as clean, 98% said it was comfortable and 99% said it was suitable for the activity. 98% were satisfied with the timing of the course

How effective was the course:

96% of participants who completed the course **felt their ability** to manage stress had improved

99% said they would **recommend** the course to someone else who may be suffering from stress

100% rated the overall course as good-excellent

Stress Control Classes continue to be very popular with a wide range of people from the community accessing the course.

There were 6 courses held throughout the reporting period 2012-13. The results of the evaluations for these courses show high satisfaction in all areas for the majority of people who attended.

Success Stories

Recovery Journeys

"Recovery is being able to live a meaningful and satisfying life, as defined by each person, in the presence or absence of symptoms. It is about having control over and input into your own life. Each individual's recovery, like his or her experience of the mental health problems or illness, is a unique and deeply personal process."

Scottish Recovery Network

Colin's Story

I have had mental health problems all my life since high school. I have experienced recovery and lapse in a rollercoaster ride since then. ME developed in my mid 30's and in my mid 40's I became an alcoholic. For the last 4 and a half years I have been sober through the support of Alcoholics Anonymous though I still suffer from bouts of anxiety and depression. At that point I approached my GP and asked to see the mental health team.

I was appointed Audrey, a Community Access Worker. We met once a week and tried a number of different activities from bowling and curling. I enjoyed meeting in the informal settings - cafes and coffee shops which made it easy to talk. Eventually Audrey managed to convince me to go back and try Tai Chi.

I have been back practising now for nearly a year and I am enjoying the class and learning a lot. Audrey is also a musician and I was able to talk to her about an idea for a play focusing on recovery from alcoholism that I wanted to put to music. She was able to give me help and encouragement towards this. Since then I have managed to create and record a radio play that is ready for use. Now this is complete I have handed copies around other members of the AA and hope to maybe see the work played over hospital radio.

My message to others is simply to ask for help when you need it.

Looking to the future I try not to plan too far ahead as I still have a number of physical health issues. I take things a day at a time and focus on that.

Colin

Finance

Pooled Budget

The service is supported significantly by the establishment of Scotland's first Pooled Budget.

- A pooled budget offers opportunity for partners to amalgamate monies in a discrete fund
- A Service Specification outlines approved services covered by the agreement
- The Service
 Development Plan
 outlines service strategic
 and operational
 priorities for a 3 year
 period
- Expenditure is based on the needs of the service users and not directed by boundary or contribution
- A pooled budget is uniquely flexible
- Resources can move freely in response to client need and service demand

In 2012/13 the Pooled Budget experienced an underspend of £18,110 as illustrated in the accounts.

How did we spend our budget?

	Annual Budget £	Expenditure £	Variance £
Staffing Costs	409,850	416,884	7,033
Transport Costs	2,160	3,200	1,040
Supplies & Services	14,110	11,961	(2,148)
Third Party Payments	610,400	599,604	(10,796)
Transfer Payments	0	709	709
Total Expenditure	1,036,520	1,032,358	(4,162)
Income	(598,680)	(612,628)	(13,948)
Net Expenditure	437,840	419,730	(18,110)

Fundraising

Many of our staff are involved personally in raising funds for charity and we would like to give recognition to the work, time and effort they put into this, outwith their working hours. Some of the charities they have supported throughout the year are shown below:

Supporting Street Children in Indonesia

lan Hammond, Community
Access Worker and staff in
Carsebridge House collected
their loose change throughout
the year and, along with
additional staff donations,
helped raised money to buy
a bunk bed for the street
children's charity, Peduli Anak in
Indonesia.

lan used to teach in Indonesia and avidly supports the charity. The picture below shows lan along with some of the children during his visit to Indonesia in July 2012.





Dreams Fund

Congratulations to Sylvie McCleary, Team Manager at Carsebridge House who joined some of her ex-colleagues in Carr Gomm in February 2013 to climb Mount Kilimanjaro, the highest freestanding mountain in the world.

As well as organising a number of fundraising activities, Sylvie trained in Scotland for 6 months to put herself through this difficult personal challenge that pushed her physically, mentally and emotionally.

Sylvie paid all of the costs for the trip on her own and raised an amazing £2000 through fundraising which was donated to the Dreams Fund to help people with disabilities achieve their dreams.

Strathcarron Hospice

In May 2012, some staff within the service participated in Strathcarron Hospice's Sponsored Ladies Midnight Tiara Walk. The 10 mile walk set off from Stirling County Rugby Club's ground at Bridgehaugh at midnight, took them down Causewayhead Road, out to Bridge of Allan, through Cornton then Raploch and through King's Park before finishing back at Bridgehaugh.

Staff who participated in the event were Emma McEwen, Jane Whitfield and Gill Johnson, Community Mental Health Workers; Natalie Currie, IMHS Support Assistant; Sylvie McCleary, Team Manager and Elaine Redmond, CMHT Secretary along with Susan Quinn, Medical Secretary from the Mental Health Resource Centre.



Hawkhill Men's Group

Instead of the traditional card giving at Christmas, staff at Carsebridge House donated their money to the Hawkhill Men's Group in Alloa and raised £100.

Further Information

For further information about our services or any information in this report please contact:

Integrated Mental Health Service

Service Manager Partnership
Integrated Mental Health Service
Social Services
Lime Tree House
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Quality & Support Manager
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Community Mental Health Team and Day Unit

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SAMH Devon House and Counselling Service

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