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JUSTIN BATEMAN.....	CEO
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SUE MINALL.....	Finance Assistant
LOUISE SCOTT .....	Office Cleaner
RICHARD GILES .....	Community Services Manager
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KATHY NOBLE .....	Mind Support Worker (Assisted Volunteering)
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NATALIE SMITH.....	Housing Worker
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GRAHAM SHARP.....	Housing Cleaner/Gardener
MARIA WRIGHT .....	Counselling Co-ordinator

## SESSIONAL STAFF

### Community Services Bank Workers

KERRIE-ANNE SULLIVAN	SALLY MELHUIISH	KAY BURDEN
JANE MENDOZA	CATHERINE JANES	VICKY WHITE
CHRISTIANAH JAYEOLA	MICHELLE MADDIX-OKIKADE	

### Group Facilitators

SUE MINALL	KAY CORDINGLEY	MARIA WRIGHT
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# CHAIR'S REPORT

Welcome to this year's Annual Report. The Board of Trustees offers its thanks to all Service Users, Volunteers and Staff for your continuing creativity and energy in sustaining the range of activities and branches of the organisation, and your commitment to the aims, objectives and values of DGS Mind. Although our role as Trustees doesn't involve us in participating in the day to day running of services, we recognise the hard work and application that their provision represents, and our aim and hope is to support and nurture the same goals and ideals.

We are very aware of the planning time, people-skills, and management forethought that must be put into the setting up of one-off events too. Like the World Mental Health Day multicultural song and dance extravaganza, celebrating the rich contribution made to society by many different cultural traditions, which may often be dismissed or marginalised. Or, like the Mindful Money Day, which, while being informative and productive for those who took part, in terms of increasing an awareness of mental health issues, and financial issues, has also suggested some constructive ideas for future working, very fitting and appropriate to our times.

The world we live in continues to confront harshening economic storms, and these have a concrete impact on charities at the organisational level, in that we face an ever-tightening grip on our funding, as do the public services. At the individual level, many service users and their carers are now anticipating having to negotiate the currents of significant welfare reforms, while concurrently dealing with the introduction of new strategies of service delivery, like taking ownership of personal budgets. The provision and exploration of initiatives to support people in developing the self-help expertise in order to respond positively to such changes are very much part of Mind's ethos, as are initiatives to increase public awareness and understanding of mental health.

Fifty years ago, in 1961, the then Minister of Health announced a major step forward in mental health policy, in a speech to the annual conference of the National Association for Mental Health, when he spoke of the future closure of mental hospitals. "There they stand", he said, "isolated, majestic, imperious, brooded over by the giant water-tower and chimney combined...". He concluded his speech by suggesting that such changes would not be brought about, "unless the endeavour is sustained by a widespread public understanding and resolve." Whether you are a member of staff, a volunteer, or a service user, you will be playing a valuable part in this challenging endeavour.

I'd like to take this opportunity to welcome and congratulate Justin Bateman on his recent appointment as our Chief Executive Officer. And to thank Phil Matthews, who is standing down as co-chair this year, for his consideration and support throughout the period of our co-chairmanship.

JOHN BURKE, Co Chair

# CHIEF EXECUTIVE

During the last twelve months the organisation continued to consolidate the progress it has made: an overall strategy to take us through the next 3 years was agreed by the Board of Trustees in Autumn 2010, and presented at the AGM later that year. This Strategy is designed to see the organisation through the foreseeable future, in an environment that we know will bring cuts in funding but also opportunities for new work and fresh funds. Reductions in funding are already impacting on us in ways which we cannot ignore, and which demand a strategic response:

In **Community Services**, the Primary Care Trust decided to withdraw the longstanding grant it has contributed each year, and as a result we had to lose 2 longstanding members of staff, and cover their redundancy payments. However, by careful restructuring of our Community Services Team, and alternative deployment of volunteers, we were able to absorb this reduction in staff with only a slight reduction in the volume of work undertaken by the Community Services Team: the Allotment Group, which was used by only a small handful of service-users, unfortunately had to be disbanded. Still, we have been able to develop a Hearing Voices group, as requested at the last AGM, and have plans in hand to start a Recovery Group, for people who have been through, and moved on from our more therapeutic services, but still require some peer support to sustain their progress.

In our **Supported Housing** services, we have received notification that in April 2012, we will experience a drop in income of probably around £40,000 and this now too requires planning to ensure our 27 tenants continue to receive high-quality support.

In our **Counselling** service, in March 2011, finances obliged us to increase the client-fees for our low-cost service. We have experienced no drop in demand as a result of this increase: indeed, we now run some 29 counsellors, serving up to 90 people at any one time.

For our **Carers'** service, we have received news that our funders, Kent County Council, wish at some point to cease to give contracts to run such a specialist service: we are therefore working with other local voluntary organisations to bid for the overall service as a consortium. If successful, this will allow us to still deliver the specialist mental health service within the consortium.

There are also more subtle ways in which cutbacks impinge on our income: where we have for some time rented out a room one afternoon a week to provide an access point for an agency working with homeless people, this agency has had to now cancel the arrangement due to their own funding cuts.

# Dartford, Gravesham & Swanley Mind

BALANCE SHEET AS AT 31<sup>ST</sup> MARCH, 2011

	2011		2010
	£	£	£
<b>FIXED ASSETS</b>			
Investment Property		170,000	170,000
<b>CURRENT ASSETS</b>			
Debtors	9,302		9,256
Cash at Bank	<u>52,059</u>		<u>57,164</u>
	61,361		66,420
<b>CREDITORS:</b>			
Amounts due in 1yr	(15,668)		(39,559)
<b>NET CURRENT ASSETS</b>		<u>45,693</u>	<u>26,861</u>
<b>TOTAL ASSETS LESS CURRENT LIABILITIES</b>		<u>215,693</u>	<u>196,861</u>
<b>CHARITY FUNDS</b>			
Restricted Funds		11,752	14,853
Unrestricted Funds		<u>203,941</u>	<u>182,008</u>
		<u>215,693</u>	<u>196,861</u>

These financial statements were approved by the Trustees on 12th December 2011, and signed on their behalf by P Matthews and J Burke (Co-Chairs)

# Dartford, Gravesham & Swanley Mind

STATEMENT OF FINANCIAL ACTIVITIES AND INCOME AND EXPENDITURE  
ACCOUNT FOR THE YEAR TO 31<sup>st</sup> MARCH 2011

	Restricted Funds 2011	Unrestricted Funds 2011	Total Funds 2011	Total Funds 2010
<b>Incoming Resources</b>				
<b>From generated funds</b>				
Voluntary Income	6,120	3,503	9,623	20,786
Activities for generating funds	—	4,307	4,307	3,751
Investment Income	—	6,989	6,989	7,195
<b>From charitable activities</b>	—	546,177	546,177	524,516
<b>Total Incoming Resources</b>	<b>6,120</b>	<b>560,976</b>	<b>567,096</b>	<b>556,248</b>
<b>Resources Expended</b>				
Fundraising Expenses	—	—	—	—
Investment Management Exp	—	481	481	684
Charitable Activities	4,471	533,861	538,332	514,599
Governance Costs	4,750	4,701	9,451	7,735
<b>Total Resources Expended</b>	<b>9,221</b>	<b>539,043</b>	<b>548,264</b>	<b>523,018</b>
<b>Net Income/(expenditure)</b>	<b>(3,101)</b>	<b>21,933</b>	<b>18,832</b>	<b>33,230</b>
Gain/(Loss) revaluation of assets	—	—	—	10,000
Net Movement of Funds	(3,101)	21,933	18,832	43,230
Total Funds brought forward	14,853	182,008	196,861	153,631
<b>Total Funds Carried Forward</b>	<b>11,752</b>	<b>203,941</b>	<b>215,693</b>	<b>196,861</b>
<b>Bankers:</b>	<b>Company Registered No.</b>		<b>Auditors:</b>	
CafCash	05093370		Hedley Dunk	
Kings Hill	Charity Registered No.		Trinity House	
West Malling	1103790		3 Bullace Lane	
Kent			Dartford	
ME19 4TA			DA1 1BB	



However, we are sustained through these difficult times by the knowledge that the services we do deliver are of the highest quality, when rigorously assessed by external evaluators. This year we retained our Investors in People Award, which looks at how well we manage, support and supervise staff and volunteers.

Our Supported Housing Service once again retained the highest 'A' grade in the Quality Assessment Framework (QAF), and our Mentoring Service achieved the Accredited Provider Award given by the Mentoring and Befriending Foundation.



Most exciting perhaps was receiving the highest award in the Quality Management in Mind process. Receiving this award, given only after days of intense scrutiny by National Mind, meant that we were the smallest Local Mind Association ever to receive this accolade.

And speaking of size, there is a level of income which an organisation such as ours really needs to achieve to function well, and to retain its good procedures and quality structures. With the reductions we are experiencing, it would be wise to be taking on new contracts where the opportunity presents itself.

The changes being experienced within statutory agencies mean that they are being more prepared to externalise parts of their provision – especially where this can be done in a more cost-effective way. As a mental health organisation, we need to be open to working with types of clients that we have not previously specialised in – for instance, young people or offenders with mental health issues – if this is where new funding lies. Already we have expressed interest in a number of tendering operations being conducted by agencies such as Kent County Council and Kent Probation. Success in acquiring even one of these contracts will help our organisation develop in new and exciting ways.

On a personal note, having worked on a self-employed basis as Interim Chief Executive for some time, I was delighted to be taken on as the employed Chief Executive following a competitive recruitment and interview process.

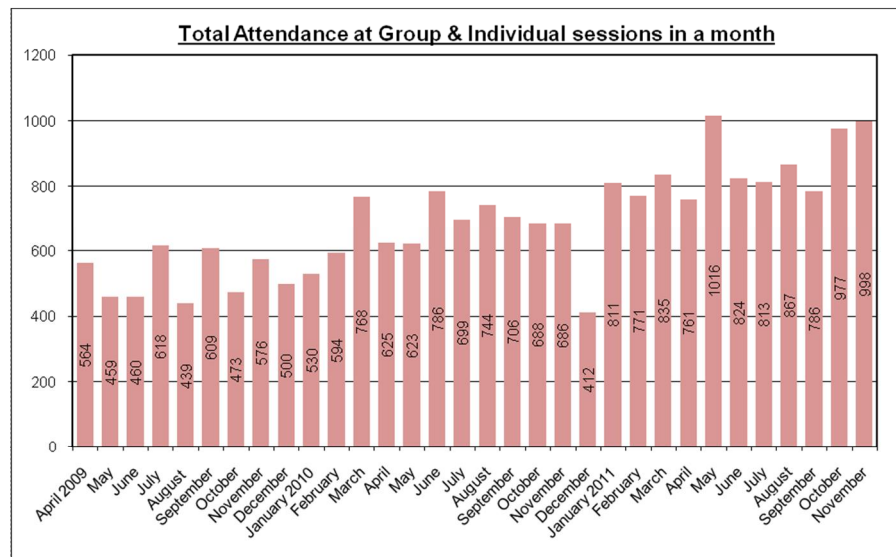
JUSTIN BATEMAN

# COMMUNITY SERVICES

We have continued over the year to provide a wide range of activities, Coping with Life courses, self-management groups, self-help groups, the BAME forum and various individual services. We believe strongly in the wisdom of providing a range of services, conscious that there is no “one-size-fits-all” in mental health work: some people use our services for a short time (eg just a 6-week Coping With Life Course). Others have an intense involvement for a number of months (eg with the Time for Change group or mentoring) while others tend to be more regularly involved, eg with the open sessions.

During the year we have moreover continued to add to our portfolio of community services; setting up an LGBT (Lesbian, Gay, Bi-sexual and Transgendered) support group, as well as running a facilitator-led Hearing Voices group; introducing complimentary therapy (Reiki, Indian Head Massage) to our open sessions in Swanley, and organising popular new activities such as the Cook and Eat sessions in Gravesend. We are currently planning a Recovery Group, which will provide some support to help people consolidate the gains they have made in their individual journeys to recovery.

We have experienced a recent influx of new service-users to community services, often referred or signposted by their GPs, and as the charts below illustrate, the number of Community Sessions we offer, as well as the number of people participating in these, has grown year on year. These graphs, which show the volume of work since April 2009, when we introduced modernised community services, give a clear indication of the longterm success these have had.



# FINANCIAL REPORT

At the time of writing, we have a vacancy for a treasurer, following the decision of our most recent one to step down from the Board of Trustees. However, as the summarised accounts on the following 2 pages show, we managed to finish the year April 2010 – March 2011 with a surplus of £18,832. This is good news indeed, especially in view of a greater surplus recorded in the previous year, and provides some cushion against the uncertainties in the national financial situation.

In keeping with the requirements of the Charity Commission, the Board of Trustees reviewed the organisation and the risks it faced, in August 2010, and planned methods to control or mitigate these risks.

Our current auditors, Hedley Dunk, Chartered Accountants, gave an unqualified report, which means that they have full confidence in the accuracy of the figures given.

We would like to take this opportunity to thank all those organisations and individuals who have made financial donations to support the work we do:

Andrew Morgan

John Kelleher

Colin and Pauline Annetts (in memory of their daughter Zoe)

Mavis Firkins

Donations in memory of Robert Ford

Robert Whitelegg

Donations in memory of Joyce Lewis

Donations in memory of Irene Gambrell

John Churchill

Jagjit Gill

Mrs K Whittington (in memory of Margaret Hayler)

The Station Tearoom, Shoreham, Kent

Crown Paints

Loch Fyne

Tesco Gravesend

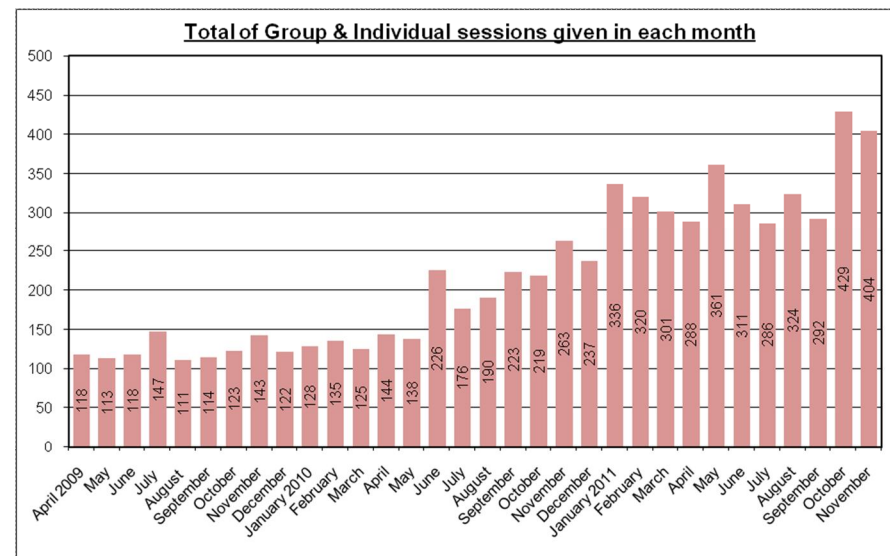
# VOLUNTEERING

“Isn’t the organisation getting a little top-heavy with volunteers?” Asked one of the service users at the recent interviews for the post of CEO, and the question, though unexpected, is an interesting one. Undoubtedly volunteers are crucial to the range and scope of the services provided by DGS Mind: without them we would have no Counselling or Mentoring Service, nor could our admin section cope with the large numbers of people we deal with on a day-to-day basis without the work capably absorbed by our admin volunteers. However, there is a balance to be struck, for using volunteers also draws on the resources of the organisation: all volunteers have a right to adequate support systems (in DGS Mind they all have named staff supporters, meeting them regularly as individuals or in groups); all have a right to training opportunities (in DGS Mind the 3 day training course as a minimum); all require a proper screening and selection process, Criminal Records Bureau checks, expenses and the paperwork to do this: all have the right to expect a brief friendly chat as they pass through the office.

We have this year introduced volunteers into our Supported Housing Service and our Carer’s service, and during the year we have increased our volunteer army from 60 to 80, who in total give us something in the region of 240 hours per week – over 10,000 hours a year, equivalent to well over £100,000 per annum if we were to try to cost this voluntary contribution. However, we also need to accept that this is getting very near the maximum we can hope to support and still ensure each volunteer has a quality experience with us. Whilst we have an item in our strategy to apply for any funding opportunities for a volunteer coordinator, no such funding opportunity has so far come to our attention, but we will remain alert to any such initiative.

## The Student Unit

DGS Mind has continued to provide placements for social work students studying for MA and BA degrees. With a maximum of 4 students per year, undertaking 100 day placements, this greatly enhances in particular the individual work we are able to provide to service users, while also bolstering the whole range of services we provide. Students have come from Christchurch Canterbury, the University of Kent and the Open University, and feedback indicates that these academic institutions, as well as the students themselves, appreciate the breadth and depth of the placement experience they are able to get with us. As we have qualified staff able to provide the professional supervision required, this also means we can claim the higher rate of fees for such placements, which adds a welcome funding stream to our overall income.



## Coping with Life Courses

These 6-week courses covering Anxiety, Depression, Assertiveness, Stress and Self-esteem, and based on a CBT (Cognitive Behavioural Therapy) model, are delivered by staff who have been trained to deliver the course, and are run every 3 months. They consistently receive good feedback from participants, and how been shown to be attractive to people who wish to use just this part of a range of services, without becoming regular attenders at, say, the open sessions.

## Time for Change Group

The intensive group has continued to run twice a week on a 10-weekly cycle: especially people with a diagnosis of personality disorder, or people prone to self-harm, have found this group particularly beneficial and it runs now at full capacity.

## BAME Forum

The Black, Asian and Minority Ethnic Forum was conceived as a way of proving a bridge between the needs of service users and our mainstream services. It has now evolved to work with people from these ethnic backgrounds on an individual basis, as well as in the group setting.

## Drop-ins/Activity Sessions at Swanley, Gravesend and Dartford

The original distinction between drop-ins and activity sessions is becoming increasingly blurred as service-users now expect activities at all such sessions. We have continued to provide two such "open" sessions, each week in each of the 3 towns, and have retained sessions on Saturdays and early evenings.

Sessions last 3 hours each, within which period there is time for a range of various participative activities. We are delighted that attendances at Swanley open sessions, which were problematic in the past, have now risen to satisfactory levels.

Our repertoire of themed activity sessions continues to grow. To date we have variously offered sessions on:

- |                           |                          |
|---------------------------|--------------------------|
| Creative Writing          | Healthy Living           |
| Learning to use Computers | Express Yourself         |
| Arts and Crafts           | Music Group              |
| Cookery                   | Relaxation               |
| Photography               | Discussion Group         |
| Literacy and Numeracy     | The Life Stories Project |
| Film Group                | Planning Social Events   |
| Gardening                 | Allotment Group          |
| Cook and Eat              | Complimentary Therapies  |

## Self Help Groups

Two self help groups continue to meet: The OCD ( Obsessive Compulsive Disorder) Group and the LGBT (Lesbian, Gay, Bisexual and Transgendered) Group

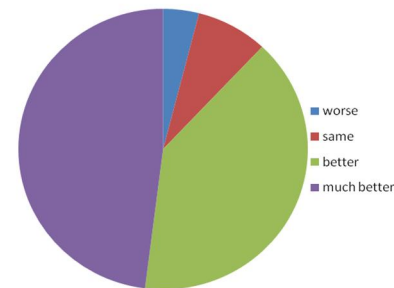
## Assisted Volunteering

Assisted Volunteering supports people with mental health issues to become volunteers in other organisations, with all the benefits of increased role and status, and gains in confidence, self-esteem, well-being and social inclusion. Take up of this service has been slow, and we need to identify the causes and encourage greater use.

## Individual Work

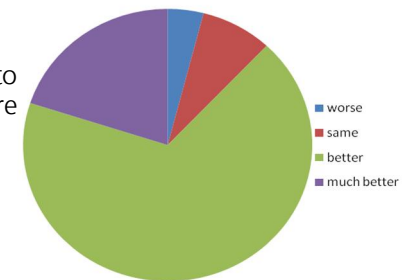
Under this heading we include short term and one-off work – for instance, helping a client through a DLA assessment – as well as longer term work using the Recovery Star as the model of choice.

## Problems/Symptoms



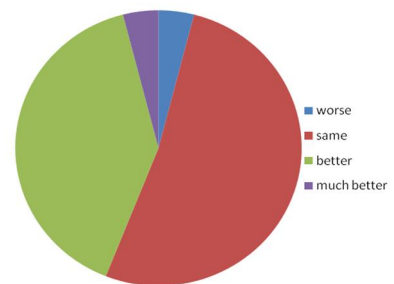
Almost 90% of clients were more positive regarding their problems and symptoms.

## Functional



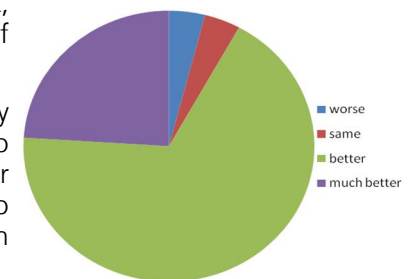
Almost 90% showing improved ability to function, 20% of the whole showing more drastic improvements.

## Risk



When levels of risk to themselves or others were studied, just over half were the same before and after counselling, but we need to take into account that many were not presenting this kind of risk to begin with. What is notable is that 44% could show a reduction in risk levels.

## All Factors



When all factors were taken into account, 92% showed the positive impact of counselling.

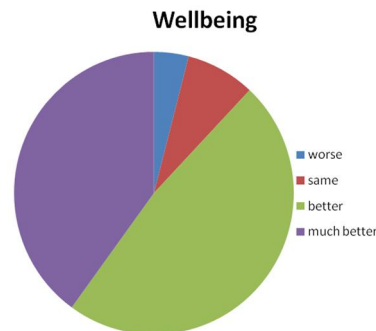
These are remarkable results which any counselling service would be proud to report, and give us the confidence that our counselling service is of very real benefit to the over 200 people it works with within the year.

# COUNSELLING

It was noted in last years' report that we might need to revise the system of client charges for counselling, as it had proved impossible to secure external funding to support the service. In April 2011, we did indeed undertake this exercise, fixing the cost for unwaged people at £7.50 per session, and at a minimum of £12.50 per session for those who were employed. In this sense the Counselling Service is now run on a social enterprise model, in that it must raise enough income from clients to fund its own costs (including overheads), and do this in a sustainable way. However, we are fortunate in receiving a small grant from Sevenoaks District Council, that has paid for the costs of room rent in Swanley, and allowed us to start a counselling service in that location, rather than expecting counselees to travel all the way to Dartford for each session. We now have counselling venues in all of the three towns we cover, offering a local service for local people, and variously available all weekdays, Tuesday and Thursday evenings and Saturday daytime, and have increased the number of Counsellors from 21 to 29.

Running a low-cost counselling service to people in need means that the administration costs have to be kept to an absolute minimum, and at times we have found that the demand for our service places great pressure on the system, and as a mark of quality and good client service we wish to keep to a minimum the time between someone applying for the service and their initial assessment. We were very pleased therefore to secure the services of a Counselling Assistant for a 6 month period, funded through the Future Jobs Fund, who had the time and skill to bring our records up to scratch, and to ensure people were not kept waiting for their initial assessment. Now that the Future Jobs Fund has been dismantled, we once again have had to fall back on the good will and dedication of our volunteers to ensure the service runs as smoothly as it should.

One exercise the Counselling Assistant was able to accomplish was a study of the gains people has made through the counselling they had received from us. This was a study on academic lines, using standardised counselling evaluation techniques. It showed that 88% of clients improved their wellbeing during counselling:



## Mentoring

This service, matching trained volunteers to work with individuals who have declared goals they wish to achieve, this year achieved the Befriending and Mentoring Foundation Quality Award, as an "accredited provider". Although this is undoubtedly a high quality personalised service very much in demand (we currently have a waiting list of 10 people assessed as appropriate for the scheme) we have previously struggled to meet our target of having sufficient volunteer mentors to provide a service to 25 people at any one time. It is therefore good to report that we have achieved this goal and the service is running at full capacity.

## Hearing Voices Group

This small group, started in September 2011, is lead by a facilitator and meets every 2 weeks.

## Options Group

The elected service-user panel, which helps guide and comment on our community services, now also has the function of running the Options Group, which plans social events for the more regular users of our services. It has scored some notable successes this year, especially in arranging the first group holiday to take place without the support of staff or volunteers.

# FEE-PAYING GROUPS

Since April 2010 we have been running some group services on a social enterprise model; this means we finance the cost of these services through participants' contributions, typically £10 per session.

## Anxiety Disorders Groups

These were originally 2 groups specialising in OCD (Obsessive Compulsive Disorder), however we have experienced a drop in applications to this service, probably due to the fact that the CBT service now run by the NHS takes OCD work as one of its key tasks. Although we have broadened the remit of our groups, referrals for one group continue to be low, and in the new year we may well have to discontinue one of the groups.

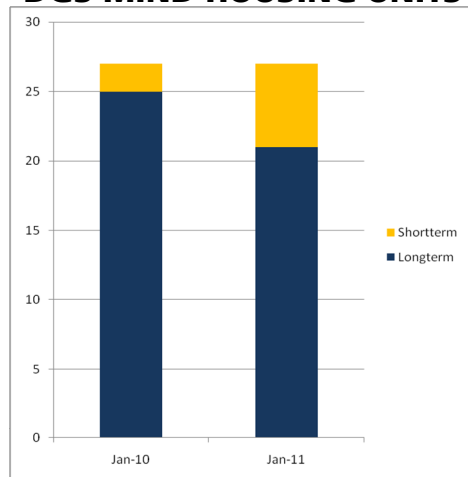
## Anger Management Course

A ten week course led by an experienced therapist, started in October 2010, and run up to 4 times during the year.

# HOUSING

In accordance with our Strategic Plan, and in keeping with changes throughout the whole of the Supported Housing Sector, we have implemented the change from assured tenancies to shorthold tenancies for all new tenants. We are pleased to report that whereas at the time of the last AGM we had two shorthold tenancies available, we now have six.

## DGS MIND HOUSING UNITS



We have nomination rights with both Dartford and Gravesham Councils, which we preserve for those tenants with assured tenancies: given that 6 of the present 21 tenants in assured tenancies have expressed some interest in moving, we shall progressively increase the proportion of units converted to short-term use. However, we are also mindful that our approach to our long-standing tenants must be based on individual need, and that there are several tenants who will need continuing support.

Obviously, working with more movement of tenants increases the workload of housing staff, and this is occurring at a time when the team has been reduced and the funders have signalled that funding will be reduced from next financial year.

In supporting tenants in their empowerment and recovery, we note the significant changes for many: one who left this year to pursue a degree in mental health nursing, one current tenant who is proving to be an accomplished singer and performer (much to the delight of the World Mental Health Day Diversity Evening), and several who are involved in work as volunteers, one with Crisis at Christmas, others through the DGS Mind assisted volunteering scheme.

In a sure sign of increasing independence, several tenants successfully organised their own holidays this year with support from housing staff. Two to Majorca, one to Greece, others to various UK destinations.

We continue to strive to work in conjunction with the various mental health teams also involved in the support of our tenants, knowing from experience that where collaboration is of a high order, good things can be achieved.

# CARING FOR MENTAL HEALTH

Our service for the Carers of people with mental health issues has continued to expand since the last Annual Report. We have continued to run monthly support groups led by our Carers' coordinator in central Gravesend, Temple Hill in Dartford and in Hextable, and in addition have established a further specialist group for those who care for people who are voice-hearers. In total, we are now in touch with over 100 carers, compared to 70 a year ago. We have been successfully working with the weekly carers' social support group to convert this group into a more of a self-help model, and this group now meets alternate weeks away from the DGS Mind Offices, arranging its own social activities. We were delighted to see that at the last ethic monitoring exercise we carried out, as much as 17% of our carers were from Black, Asian and ethnic Minority populations: a sure sign of the success of the BAME worker attached to the service.

We have introduced a Carer's Forum once a month where carers are encouraged to comment on our services, and those of Health and Social Services, and this is attended by one of the Carers who has taken on the role of Carer's representative, and feeds the views and concerns of carers to the appropriate planning meetings. The Carer's representative also sits on the Carers' Break Panel, also established within the year, where decisions are made concerning the amount of funding a carer can receive from the fund we hold to provide a break from their caring role.

Last years' report promised that we would create our own Carers' training programme, and we will be running a series of 8 workshops for carers in January and February 2012.

Kent County Council, who are the key funders for this service, have announced that at some time in the future, they will cease to commission a specialist mental health carers service, but instead will commission services for carers across the board, whoever they are looking after. In responding to this challenge, we have been working to form a consortium of local organisations involved in work with carers, so we might together bid for this generic work, and still deliver the specialist service which we passionately believe is the right of those who care for people with mental health issues.

## Number of Carers worked with each month (Group and 1 to 1)

Jan	Feb	Mar	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec
31	42	38	43	38	20	15	28	17	21	26	27

## Numbers of New Carers referred each month

Jan	Feb	Mar	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec
6	3	4	7	3	1	0	4	5	6	6	5