

threshold

Annual Report

08/09





about us

THRESHOLD MANAGEMENT COMMITTEE MEMBERS

Mr Paul Simpson (Chairman)
Mr Robert Lamrock (Vice-Chairman)
Mr Jack Savage
Dr Henrietta Campbell
Miss Freda Robinson
Lady Elizabeth Bloomfield
Mr Anthony Harbinson
Dr Philip McGarry
Mr John Park
Ms Joan Boyd
Dr Ian Bownes
Mr Adam Alexander
Mr Stephen Kingon

GENERAL PURPOSES & HUMAN RESOURCES COMMITTEE

Mr Anthony Harbinson (Chairman)
Mr Jack Savage
Mr Robert Lamrock
Mr John Park

PROFESSIONAL PRACTICES COMMITTEE

Miss Freda Robinson (Chair)
Dr Ann Long
Dr Philip McGarry
Dr Oliver Shanks
Dr Jim Campbell
Dr Michael Donnelly

AUDITORS

Crawford Sedgwick & Co.,
38 Hill Street
Belfast BT1 2LB

BANKERS

Ulster Bank Ltd
11-16 Donegall Square East
BELFAST BT1 5UB

REGISTERED ADDRESS

McBrien House
432 Antrim Road
BELFAST BT15 5GB

SOLICITORS

F.J. Orr & Co.
14 Montgomery Street
BELFAST BT1 4QT

mission statement

To be at the threshold of developments in mental health for people at risk or recovering from mental illness so that they are enabled to live full and independent lives in the community.

Registered Charity No. XN91835
Company No. IP346



chairmans report

In this, my first year as Chairman of Threshold, I have had time to reflect on the long association I have had with the organisation since it's inception in 1990. I have watched it emerge into one of the forerunners of innovative mental health services in Northern Ireland.

From humble beginnings, the organisation has gone through a myriad of change and is now recognised for its work with those suffering from severe mental ill-health, drug and alcohol addiction and providing counselling services for young and adolescent children. Another very important aspect of our work is in our research; we provide evidence based data on all of our services, which proves we are making a difference to those who need our help.

We continue to work towards achieving the highest standards set by government agencies such as RQIA and NISCC and pride ourselves both on our standards and our workforce.

We welcome the setting up of the new Charities Commission and believe that through regulation we can continue to not only improve our

services but also ensure public confidence in what we do.

In times of shrinking budgets and 'capped funding', Threshold has continued to strive to provide these services without reducing our standards and believe that the work we do does provide 'value' as demanded from our funders.

We acknowledge the support we receive from the DHSS&PS and the Northern Ireland Housing Executive, the Trusts and to the many contacts we have within our local housing associations.

As always, we continue to provide the best service to those in our care and look forward to consolidating our services in these difficult economic times. Challenging times, perhaps, but not without its rewards.

Mr Paul Simpson
Chairman

chief executive's report



This indeed has been a challenging year for Threshold, with the second year of 'capped funding; from our main income stream – Supporting People funding from the N.I. Housing Executive – putting pressure on our running costs. However, I am delighted to report that the strong demand across all of our services has meant that we have been able to cover all of our expenditure without any impact on our services.

Our residential therapeutic communities continue to offer effective psycho-social environments for the severely mentally ill patients in our care. Our outcome data continues to provide evidence that this patient population benefits from being in our service. This along with our Floating Support Service, which helps people with mental health problems remain in their own homes, means that we reach nearly 150 people with our therapeutic work. Our Childrens' Service continues to achieve good outcomes in our four sites in Strabane, Enniskillen, Omagh and Glengormley, helping those children with moderate emotional

and behavioural difficulties. Similarly, the Drug Outreach Service in Ballymena, Antrim and the Portrush/Portstewart/Coleraine triangle area continues its good work in making effective contact with those on the periphery of society and signposting to mainstream services.

Professionally we continue to write up and disseminate our clinical and research work with over 30 publications in peer reviewed journals. This along with our on-going professional contacts with the American Group Psychotherapy Association and Association of Therapeutic Communities ensures we continue to benchmark our work against best practice, nationally and internationally.

I would like to take this opportunity to thank staff for all of their sterling work over the year and members of the Management Board and the Sub-Committees for supporting our work.

Dr Raman Kapur
C.E.O.

What is a Therapeutic Community (TC)?

One of the most recent definitions of a 'therapeutic community' is of a setting whereby people with severe mental illness can be treated with:

'personal respect and everyday relationships [are managed] in [a] calm, emotionally containing environment'.

Kennard (2008, p.14)

This definition encapsulates what is best in contemporary mental health practice in caring and supporting people with emotional turbulence and distress caused by mental illness, whatever the age group of the individual. In establishing a therapeutic environment, whether it is in a residential or non-residential environment, there are several processes that are essential for good outcomes:

- Reliability and consistency of staff
- Calm and thoughtful atmosphere
- Attention to the detail of how an individual thinks and feels about him/herself and others
- Structured activities
- Attention to group processes

All of these processes, combined with a psychodynamic/psychoanalytic understanding of a 'disturbed state of mind' are key ingredients towards a successful outcome. If these conditions are effectively created, people suffering from mental illness report experiences of being understood and looked after in a secure environment. For many years Psychiatrists, Clinical Psychologists and Psychoanalytic Clinicians have advocated this simple but effective approach in working with people suffering from 'difficult and disturbed' states of mind. At Threshold all of our efforts are towards creating and sustaining this environment with people with severe mental illness.

what we've been up to

Over the past year our residential units and other outreach services have been busy organising trips and outings for those within our care. Here are a few of their stories:

KHARAMINN HOUSE, EGLANTINE LANE, PORTRUSH



Kharaminn residents have been busy setting up a photography group, after successfully applying for a grant from a local organisation called the Coleraine and Rural Urban Network. With the grant a new digital camera was purchased with the aim of holding an exhibition of our work with the theme of 'The world through the eyes of someone with mental illness'.

A group of residents went to Belfast to purchase a digital camera. The first few sessions were spent familiarising ourselves with our new purchase! We then organised a number of group sessions, going around Portrush taking a



large number of photographs for the exhibition. After a couple of months and a few hundred photographs later, we began the unenviable task of trying to select the final twenty photographs for our exhibition! We wanted to choose those we felt most highlighted the issues around mental health.

We then had to spend some time digitally altering the pictures with Photoshop before we had them professionally developed.

We were able to obtain permission to stage the exhibition at the Library here in Portrush and after sending out lots of invitations to family and friends and other organisations, the exhibition was officially opened by the Deputy Lord Mayor, Councillor William Creelman.

The photography group has given us confidence to look at the world around us with 'new eyes' and we hope it has helped others to see the world as we do. We learnt new skills along the way and we forged new friendships; it was certainly a worthwhile experience!



DUMBARTON HOUSE – OUR TRIP TO MOVILLE IN DONEGAL



Five of us planned a trip to Moville in Donegal, we were doing to stay at

the Redcastle Hotel for two nights. Off we went to Magilligan and then got the ferry across the lough to Moville. The hotel was set back off a golf course and was pretty big, it even had its own helicopter pad!

Our rooms were beautiful; the hotel was right at the sea and they had music channels in the room; one of us even had a balcony. The



first night we went to a nice pub in the town and we had dinner. The next day we were up early for breakfast in the hotel restaurant, it was very nice and there was plenty to choose from for breakfast! Then we went off on a shopping

trip to Derry, to the Waterside shopping centre.



Everyone split up and went to different shops, then we all met up later and

went for lunch. Back at our hotel we got ready for our 3 course evening meal. The food and the service was very good, afterwards we went back to our rooms to chill out and relax.



On the last morning we got up early and had a

good breakfast. As we set off for home we stopped in Moville to buy presents and rocks

for family.

When we got off the ferry at Magilligan we went for a long walk on the beautiful



beach and collected shells and driftwood. It was a very nice trip, it wasn't really long enough and we would love to go back for a long weekend!



THE DRUG & ALCOHOL OUTREACH SERVICE

We are outreach workers, which means that we seek out and go to the client instead of them coming to us. This has many positive benefits in that people are generally more relaxed and at ease in their own environment and tend to be more forthcoming about their problems. It is easier to build up relationships with them and offer a series of benefits to them.

We would assist and support them through very difficult physical, social and psychological problems and we would tend to be very eclectic in our approach. It is sometimes very handy to be able to unblock a toilet, groom a dog, and recite the alphabet backwards while standing

on your head, not necessarily all at the same time! It does mean that we bring a wide variety of skills to the job . The aim of our work is to help the clients to come to some understanding of their difficulties and point them in the direction that would be most beneficial to them, whether that be hospitalisation, better quality of life or simply reducing the harm that they are causing both to themselves, their families or their community.

We work closely with the statutory agencies, medical staff, probation board, judicial system, social workers and addiction teams as well as police specialist teams and other interested parties. We work under the umbrella of the Health Board in carrying out their plans for drug and alcohol treatment and help in the formulation of new systems to better reflect the



Michelle Jordan and John Keenan - Drug and Alcohol Outreach Team

work that is being done on the ground, as it is still fairly rare for outreach teams to neatly fit into the reporting systems of statistics, as our work is more qualitative than quantitative in approach. We have our own statistical tool in place which shows us that we are indeed working with the most vulnerable people in this field and our efforts are making a difference to their lives and health generally. Last year we brought together a number of clients to review our work with them and they said:

“Since I met Threshold I have managed to see things different and I am getting stronger and stronger.”

“Human companions are essential. Different folks need different things but we all need someone and often there is nobody. Sometimes we are brought together to take part in activities and we are not even aware that it is good for us until later.”

“I believe I would have been lost if Threshold had not been there when I needed it.”

“Then my mother died and that was a low time and the fact that someone was there helped me. I am hopeful now and want to help others who are struggling too.”

“Sometime you just want to share something. It is something that is important to me and often I don’t have the words to express it.”

“The service is invaluable as it offers a hope for everyday living for addicts.”

For our health and well-being we are limited to dealing with 30 people at any one time but sometimes it is so obvious that there is not enough of us to go around.

The Outreach Team

NEW ALCOHOL OUTREACH SERVICE, BALLYMENA



Hugh, PSNI Community Liaison Officer & Susan Harvey, Alcohol Outreach Worker, Threshold.

Our new Alcohol Outreach service based in Ballymena town was officially launched in March 2009. We have secured funding for this service for a two year period from the Ballymena Community Safety Partnership and the Northern Health & Social Services Trust . The initiative



Ms Karen Moore, Ballymena Community Safety Partnership, Susan Harvey Threshold and Dr Raman Kapur, CEO, Threshold.



Mr John Best, N.I.O., Susan Harvey, Threshold and Dr Raman Kapur, CEO, Threshold.

has been set up to try and reduce the number of on-street drinkers in Ballymena town centre and encourage them to join in the group activities and endeavour to help them seek help or assistance with their addiction by introducing them to services that specialise specifically with alcohol and drug addictions.

To highlight the service a special 'introduction' morning was held at All Saints Parish Centre, in Ballymena. The event was attended by representatives from the Northern Ireland Office, PSNI, Victims Support, Ballymena Borough Council, NIACRO, CAB and family and friends of users of the service who welcomed the added addition of a service that targeted alcoholics and their families and who could assist them through difficult times by introducing them to a range of professionals trained to deal with these problems.

ANNUAL BOSTON/THRESHOLD GROUP PSYCHOTHERAPY CONFERENCE

For over 12 years now members of the American Group Psychotherapy Association and Threshold have joined forces to share expertise in the areas of trauma, abuse, conflict and addiction with professionals working in the field within Northern Ireland. Our two day conference, held in August of each year in the lovely setting of Cultra Manor House in Holywood, Co Down, has, once again, proved to be an outstanding success. A very innovative and interesting programme attracted delegates from all over Ireland, England and even Slovakia! Feedback from the delegates who attended was very positive, with many already looking forward to the next conference in August 2009.

COMMUNITY OF COMMUNITIES

Threshold has been a member of 'Community of Communities' now for a number of years. Coming under the auspices of the Royal College of Psychiatrists, Community of Communities operates a standards-based quality improvement programme bringing together therapeutic communities both nationally and internationally. They do this by engaging them in service evaluation and quality improvement using methods and values that reflect their therapeutic philosophy. Member communities are found within health, education, social care and prison settings. For Threshold that means becoming involved in an annual cycle of both self and peer reviews, using sector specific service standards of best practice. We encourage our residents to become fully involved in this process and also to engage fully in visiting other communities to carry out peer reviews. As we are the only residential therapeutic community here in Ireland this involves travelling to England, which for some residents, means boarding a plane for the very first time in their lives! Membership of the Community has increased awareness among staff and residents of the importance of involvement in all areas of community living and has had a very positive and empowering effect on our residents.

finances

BALANCE SHEET AT 31 MARCH 2009

	Notes	<u>2009</u> £	<u>2008</u> £
FIXED ASSETS			
Tangible fixed assets		212,770	203,881
CURRENT ASSETS			
Debtors		128,555	89,300
Cash at bank and in hand		556,662	577,048
		<u>685,217</u>	<u>666,348</u>
CURRENT LIABILITIES			
Creditors: due within one year		(228,013)	(227,005)
NET CURRENT ASSETS		<u>457,204</u>	<u>439,343</u>
TOTAL ASSETS LESS CURRENT LIABILITIES		<u>669,974</u>	<u>643,224</u>
CREDITORS: DUE AFTER MORE THAN ONE YEAR		<u>(76,731)</u>	<u>(79,137)</u>
NET ASSETS		<u>593,243</u>	<u>564,087</u>
Deferred income		30,334	30,629
CAPITAL AND RESERVES			
Share capital		21	21
Reserves		562,888	533,437
		<u>593,243</u>	<u>564,087</u>

INCOME AND EXPENDITURE ACCOUNT
YEAR ENDED 31 MARCH 2009

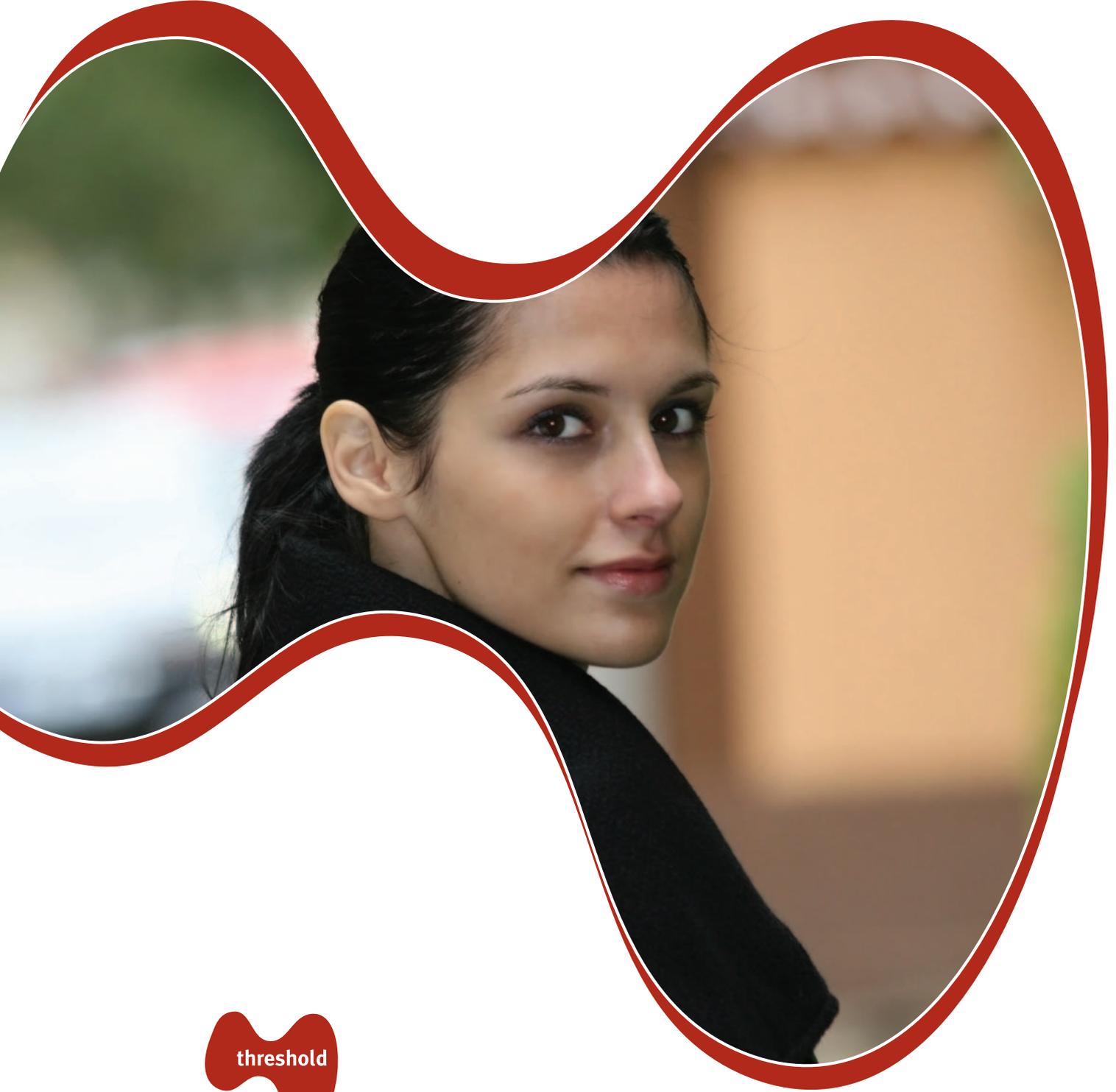
	<u>2009</u> £	<u>2008</u> £
INCOME	2,396,430	2,316,288
Less: operating costs	<u>(2,384,222)</u>	<u>(2,271,731)</u>
Operating surplus	12,208	44,557
Interest receivable and other income	17,243	16,180
SURPLUS FOR THE YEAR	<u><u>29,451</u></u>	<u><u>60,737</u></u>

publications / papers

Below is a list of some of the over 30 papers published by Threshold

1. Cameron, D., Kapur R. & Campbell, P. (2005). Releasing the therapeutic potential of the psychiatric nurse: A Human Relations Perspective. *Journal of Psychiatric and Mental Health Nursing* 12, p.64-74.
2. Cameron, D. (2006). I am arresting you (Therapeutic Community) on suspicion of ineffectiveness, you are not obliged to say anything, but anything you do say may be used in evidence against you. *International Journal of Therapeutic Communities* 27, (4); 453-476.
3. Cameron, D., Maxwell, H, Kapur R. (2007). A 'Bridge' too far for a Residential Therapeutic Community for Personality Disorder in Northern Ireland: Learning from the lived/learned experience - a clinical commentary *International Journal of Therapeutic Communities* 28, (2), 148-161.
4. Hobson, P. & Kapur, R. (2005). On Working in the Transference: Clinical Issues and Research Implications. *Psychology and Psychotherapy; Theory, Research and Practice*. 78, p275-293.
5. Kapur, R. (2005). Dealing with Damage: The Desire for Psychic Violence to Soothe Psychic Pain. In *Psychotherapy and Politics International* 3, (3), p180-193.
6. Kapur, R. (2005). Combating Editorial Racism. *British Journal of Psychiatry*. 187, p.188.
7. Kapur, R. (2006). The Troubled Mind of N.Ireland - is it me or is it you? *International Journal of Forensic Psychotherapy*. 13, p.37-49.
8. Kapur, R. (2008). Kali: The Indian Goddess of Destruction and Containing Castration Impulses in Groups. *Group*, 32.1, 35-43
9. Kapur, R. (2008). Who's the mad one here? Applying Bion's Concept of Psychotic Personality to Staff and Patients. In, Gale J. Realpe. A Pedralli (eds) *Therapeutic Communities for Psychosis*, Routledge. London. pp 52-56.
10. Kapur, R. (2008). Reparation - A New Dawn or False Start in Northern Ireland in *Psychotherapy and Politics International*, 6, (2), 143-151.
11. Kapur, R (2008) Injustice: Acting Out Internal Terrorist States of Mind through Violence and the Possibilities of prevention in Larche. R.A. (Ed). *Global Terrorism: Issues and Developments NOVA*, NY. pp 1212139.
12. Kapur, R. (2009) Understanding Paranoia: Theoretical Commonalities between Psychological and Psychoanalytic Theory in *Advances in Psychology Research*, 68. Nova Publishers, N.Y.





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INVESTOR IN PEOPLE