

# **BRISTOL & DISTRICT TRANQUILLISER PROJECT**

Company Limited by Guarantee No: 5126531  
Registered in England and Wales

Registered Charity No: 1104033



## **ANNUAL REPORT**

### **2010 - 2011**

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**Founder:** Valerie Stevens

**Patron:** Professor C H Ashton, D.M., F.R.C.P, of Newcastle University

### **EXECUTIVE COMMITTEE/DIRECTORS:**

Yasmin Neky Msc	Chairman
Jacque Jones	Vice Chairman
Jocelyn Mignott	Vice Chairman
William Liew	Treasurer
Rose Ashley (till 24.1.11)	
Victoria Greenhouse	
John Gunn BA, FCA	
Valerie Stevens	

### **STAFF MEMBERS:**

Jayne Hoyle BSc, MSc, CPsychol	Project Manager (from 1.7.11)
Ian Singleton, BA (Oxon)	Senior Project Worker
Roy Jones	Project Worker
Iris Murch	Administrative Assistant
Bianca Edwards	Administrative Assistant

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# BRISTOL & DISTRICT TRANQUILLISER PROJECT ANNUAL REPORT 2010-2011

## INTRODUCTION

### PROBLEMS WITH BENZODIAZEPINES

- Benzodiazepines are the most commonly prescribed minor tranquillisers and sleeping pills.
- The main ones are diazepam (valium), temazepam, nitrazepam (mogadon) and lorazepam (ativan).
- They are highly addictive drugs, and their side-effects and withdrawal symptoms can lead to breakdown and temporary mental illness.
- There were 11.5 million prescriptions of benzodiazepines by community pharmacists in 2010 in England alone.

Benzodiazepines were prescribed by doctors from the early 1960's, when they were unaware of the dependence potential. In January 1988 the Committee on Safety of Medicines issued an advice note to all doctors, stating that benzodiazepines were indicated only for 2 -4 weeks and only for severe anxiety or insomnia. The message has been reinforced by regular warnings from Chief Medical Officers since then.

There are estimated to be at least 1½ million people in England taking benzodiazepines regularly, most of whom are undoubtedly addicted. Around a third of patients are still being prescribed benzodiazepines for longer than the 2 – 4 week guideline, despite continued warnings from the Department of Health.

No effective national campaign has ever been undertaken to help people withdraw from these drugs. Bristol is one of the few areas in the country to acknowledge and try to remedy the situation and deserves huge credit for this.

### PROBLEMS WITH OTHER PRESCRIBED PSYCHOTROPIC MEDICATION

There has been a rapid increase in recent years in the prescribing of psychotropic medication other than benzodiazepines, especially of antidepressants:

- Prescribing of antidepressants has quadrupled over the past 20 years.

- In 2010 over 42 million prescriptions for antidepressants were issued by community pharmacists in England. This number is increasing by 10% every year and there is no sign of this trend changing.
- It has been estimated that around 4 million people in England are taking antidepressants regularly.
- There has also been a big increase over the past 15 years in the prescribing of the newer sleeping pills such as zopiclone, zolpidem and zaleplon. GPs issued around 10 million prescriptions for sleeping pills in 2009. Roughly half of these were for the 'Z' drugs and half for benzodiazepines.

These newer drugs can cause side-effects and withdrawal symptoms that are every bit as bad as those caused by benzodiazepines.

- Over the past decade the Committee on Safety of Medicines has received an unprecedented number of reports about dependence-related problems with the SSRIs and some other new antidepressants.
- The SSRI and other new antidepressants account for 5 of the 6 top drugs for which withdrawal reactions have been reported worldwide.
- The highest number of adverse reactions have been reported with paroxetine (seroxat). The second highest number are with venlafaxine (efexor).

New guidelines for the prescribing of antidepressants were issued by the National Institute of Clinical Excellence in December 2004. These urged GPs not to prescribe antidepressants to people with mild to moderate depression unless all other treatments failed.

### OBJECTIVES OF THE PROJECT

1. To assist those involuntarily addicted to benzodiazepines to understand and cope with their addiction, to plan and make a safe withdrawal and to lead normal lives without recourse to any psychotropic medication.
2. To help those taking other psychotropic medication, in addition to benzodiazepines, to come off this medication where appropriate.
3. To inform, advise and support the families and friends of those affected.
4. To inform and advise those professionally involved in the problems of involuntary benzodiazepine addiction.

5. To educate people about alternatives to prescribed medication and to carry out preventative work to help people avoid becoming addicted to prescribed medication.

### SERVICES PROVIDED BY THE PROJECT

1. One-to-one prescribed drugs counselling especially for those new to the Project and those undergoing particular difficulty.
2. Withdrawal groups at the Project led by counsellors but with a strong user involvement.
3. Outreach facilities for those unable to come to the Project, including withdrawal groups, home visits and visits to hospitals and health centres.
4. Drop in availability at the Project for those in particular need.
5. A help-line open 4 days a week.
6. A programme of visits, talks, workshops, seminars etc for doctors and other professionals within the Bristol area.

### THE WAY THE PROJECT WORKS

The Project provides a safe, supportive atmosphere where people can discuss the problems caused by involuntary benzodiazepine addiction or by other prescribed psychotropic medication with our prescribed drugs counselling staff and volunteers.

At initial meetings clients come to understand better the symptoms caused by long-term dependence on benzodiazepines or other prescribed drugs and usually start to consider withdrawing from the medication. No-one is pressurised to withdraw, but they are encouraged to do so, and the majority of the counselling staff and volunteers are living proof that such withdrawal is possible.

New clients are also encouraged to participate in withdrawal groups where they can share experiences and information with those who are undergoing the same withdrawal process. Once the clients have started to withdraw they are encouraged to take control of their own withdrawal programme by deciding when and how much to withdraw. Our counselling staff are always on hand to discuss and advise on their withdrawal programme.

The Project's philosophy is that withdrawal from benzodiazepines or other prescribed psychotropic medication should be gradual and clients are advised initially on how to plan a sustainable programme which does not overload them. Clients are supported

throughout the withdrawal process, and also for a considerable length of time after withdrawal. Many clients have taken benzodiazepines or other psychotropic medication for much of their adult lives. Recovery is usually gradual and many life skills need to be learned or relearned.

In some cases clients may participate in the work of the Project as volunteers after withdrawal. This often assists those who have been out of work for some time to develop the skills and discipline needed for a return to full-time work outside the Project

## COMMITTEE, STAFF AND VOLUNTEERS

The Project puts the highest emphasis on personal experience of the effects of psychotropic medication. The majority of our staff, volunteers and Committee have considerable first-hand experience of the effects of benzodiazepines and other psychotropic drugs. Many of our staff have worked in the field of prescribed drug addiction for over 20 years and they have built up considerable expertise on a wide variety of prescribed psychotropic drugs. Our patron, Professor Ashton, is an internationally respected expert on both benzodiazepines and antidepressants and she provides the Project with invaluable professional advice on these drugs.

## REVIEW OF THE YEAR 2010-2011

### CHAIRMAN'S REPORT

It is hard to believe that yet another year has passed by. The Project, as always, has been busy with its various activities. On offer have been and continue to be one to one counselling, telephone counselling to an increasing volume of clients, the running of support groups, campaigning to raise awareness of the danger of some prescribed drugs within the community and amongst GPs, taking in and mentoring volunteers who have successfully come off prescribed drugs or are on the way to doing so, and at the same time, raising money from various sources in order to carry on and build upon the work that is already being done.

It has been my pleasure and privilege to have been the Chair for the Project over the past two years. Many changes have taken place during this time and have been smoothly negotiated. This is due to the unstinting application of the people who run the Project, their dedication and faith in the work that they do and their unwavering efforts to try and combat the devastation that addiction to these drugs causes in the lives of innocent people and their families. Their own personal experiences with these drugs enable them to reach out, hold on to and help their clients back to some kind of normality in their lives. More and more attention is being given to doing upstream work – raising awareness amongst young people is in the pipeline, for example, - whilst

continuing to fight the lack of government support in reducing the distribution of these particular drugs is an ongoing and still uphill effort. On a brighter note, the Project has come of age and now boasts a website which has generated more interest in its work and will no doubt result in more clients for the Project.

It is therefore with deep regret that I have to announce my resignation from my position as Chair. Changing circumstances in life bring about changes in where one continues to live and work and these changes too have to be negotiated to the satisfaction of all concerned. For me this includes more travel for longer and longer periods and it is therefore fairer to the Project to have as Chair someone who is more available to them. The Project has a very capable and dedicated Committee and the gap will be quickly and expertly filled. It has been a pleasure to work with the various members of the Committee and it is the Project's good fortune to have them working on its behalf.

This also means giving up my most enjoyable and fulfilling position as Supervisor for the Project. This is a position that I have held for over six years. What started out as supervision for the counsellors quickly turned into organisational supervision as well. I have learnt an immense amount from this work, not least about the danger of the drugs mentioned in this report. I have learnt that even with the toughest cases, with the right support and belief in ourselves and in those who are there to help us, much can be achieved. I have been amazed to learn that there are not many cases at all that the Project gives up on as hopeless. The length of time that support is offered is also something that is difficult to find in other Projects. I am sure that many of the Project's clients will bear witness to that. I can leave this position knowing that the Project has a greater understanding of its role, has good boundaries in place, and a definite sense of direction to aim for. The Project has grown in confidence as have the people who work within it.

All that remains for me is to state is that I wish the Staff– Jayne, Ian, Roy, the Administration Staff, Bianca and Iris, and all the volunteers the very best for the future and to thank them for their loyalty and friendship to me. I have truly felt one of the family and I look forward to continuing to be a friend to the Project. To all of those who support the work of the Project, whether it is through money or time, many thanks and long may you continue to do so.

With my very warmest wishes to all,

Yasmin Neky  
Chair 2010 – 2011



# **PROJECT REPORT**

## **INTRODUCTION**

This was a challenging year for the Project following on from the major changes to the Committee and staff in the previous year. The main change this year was that Jayne Hoyle took over as Project Manager, a role she quickly settled into. Despite the changes the overall number of clients helped stayed steady compared with the previous year and the number of helpline calls climbed considerably.

## **EXECUTIVE COMMITTEE**

We are extremely grateful to our Chair Yasmin Neki for steering us so successfully through a year of great change. She was a constant source of support, strength and good advice to the staff and Committee and helped us to face the many challenges that the year brought. The Project could not have had a better or more skilful chair than Yasmin and we could not have managed without her calm authority.

Thanks are also due to all other members of the Committee for their dedication and support of the staff during the year. William Liew deserves a special mention for his expert stewardship of our finances and also for his good advice on the various issues facing the Project.

We were sad that Rose Ashley decided to stand down in January 2011 because of other commitments. She was an active member of the Committee who was especially valued because of her knowledge of the problems faced by clients taking prescribed psychotropic medication. We wish her well in whatever she takes on in future.

We were very pleased that Anthony R Burton MBE agreed to join the Committee from April 2011. Tony has been a great supporter of the Project over many years, regularly attending our Annual General Meetings and other events and even organising and funding the Project's annual outing this year. Tony was also the guest speaker at this year's AGM. He has considerable experience of the workings of the mental health system and a deep insight into the effect of psychotropic medication. He has also been a great supporter of other charities in the Stroud area.

## **STAFF AND VOLUNTEERS**

Jayne Hoyle took over from Ian Singleton as Project Manager on 1 July 2010 after her 3 month probationary period was completed. Ian had served as temporary Project Manager for this period. Jayne settled quickly into the Project, as she already had a background in mental health and knew all about prescribed psychotropic medication.

The Project was very fortunate to take on such a talented and experienced person as Manager.

Thank are due to Ian and Roy Jones for keeping the helpline and other work going through Jayne's probationary period. Iris Murch also played a huge role in keeping the administrative work going through the year and for showing kindness and consideration to the clients. Thanks are also due to Bianca Edwards for her increasing mastery of the finances and her constant willingness to undertake any task, however difficult. A final thank you is due to Mo O'Connor who had retired from the financial administrative position but who stayed on call to help with frequent advice about a range of issues during the year.

Our volunteers were a big help once again this year. Tom continued to compile statistics for us on the computer and turned his hand to a number of other technical tasks. Polly and Rose gave invaluable support to clients on the helpline for much of the year and Polly also did vital work on the computer. We were delighted when Polly told us that she was returning to paid employment towards the end of 2010. We were very sorry to lose her as a volunteer. We would also like to thank Phillip Drew for once again coming to our rescue to solve seemingly insurmountable computer problems and also procuring two good quality computers for us. Finally we would like to thank Babs, Moira, Ruth and Emma Blacker for helping in the production of leaflets and Sue for helping the Project once again with the supply of key items. We cannot emphasise enough how vital the role of volunteers is in taking pressure off the staff and also enabling tasks to be carried out which would not otherwise be undertaken. We are grateful to all our volunteers who helped us during the year.

## CLIENTS

1. Over the past year we helped 51 clients at the Project, 10 at Knowle, 7 at Southmead and 183 over the telephone helpline, a total of 251. 47 of those at the Project commenced withdrawal (92%), as did 16 of those in the outreach groups (94%) and 132 of those in touch by helpline (72%). In all 195 out of 251 commenced withdrawal (78%).
2. Over the past year 70 clients came off benzodiazepines, 56 off antidepressants and 8 off non-benzodiazepine sleeping pills. 101 clients came off all their medication (40%). 23 of these were at the Project, 9 in the outreach groups and 69 on the helpline.
3. Of the 68 clients seen face-to-face over the past year 19 were male (28%) and 49 female (72%). 15 were under 40 (22%), 26 were between 40 and 60 (38%) and 27 were over 60 (40%).
4. We had a total of 140 new clients during the year.

5. We helped 2 Asian clients during the year.
6. Over the year we carried out an average of 3 counselling sessions a week and had 5 sessions available for drop-ins.

#### HELPLINE

- Over the year a total of 3,136 calls were recorded at the Project. This was a rise of 46% on the number of calls recorded in the previous year (2,113).
- The average monthly number of calls was 261, as against 179 in the previous year.
- 2,945 of the calls were taken by staff and 191 by volunteers.
- 57% of the calls were from people over 60.
- We also received an increasing number of emails during the year from people finding out about the Project on the internet. The numbers will be totalled separately in future years.

#### SOUTHMEAD GROUP

We were deeply saddened by the death during April 2010 of Ken Everett, husband of Pat who had attended the group for the past few years. He was a loyal supporter of the Project and has been much missed by everyone in the group and by all those who knew him. Our condolences go out to Pat. This was a big blow to the group. However it managed to continue during the year despite this and efforts were made at the end of the year to advertise for new members in the local area.

#### KNOWLE OUTREACH GROUP

This was once again a very successful group with several members coming off all their medication during the year and others making good progress towards this. The atmosphere of self-help and mutual support was again very strong and this no doubt contributed in no small measure to their success. The overall numbers remained high, despite some members not being able to come regularly during the year.

#### HELPING OLDER PEOPLE (HOP)

The year from 1 October 2009 to 30 September 2010 was the third year of the fourth 3 year scheme specifically designed to help additional older people involuntarily addicted

to benzodiazepines, other sleeping pills or antidepressants. During the year we helped a total of 66 clients, another record for the HOP scheme. 21 of these were helped face to face and 45 were helped via the telephone helpline. The number of clients commencing withdrawal was again around the 80% level.

We would like to thank the following organisations and individuals who specifically helped to fund the work of the HOP scheme during the year 1 April 2010 to 31 March 2011:-

Mrs T Smith  
The James Tudor Foundation  
The John James Bristol Foundation  
The Lark Trust  
The St Monica Trust

This totalled approximately £20,000. Just after the end of the financial year we also received funding from the Bristol Masonic Charities and the Truemark Trust.

We are entirely dependent on the work of outside funders for the HOP scheme and we cannot stress how highly we value their generosity in permitting this work to continue.

Visits were paid to the following local organisations under the HOP scheme, to distribute our literature and explain our services:-

Bethany Baptist Church, Henleaze  
Bolton Disability, Henleaze  
Care and Repair  
Filton & District Servicemen's Social Club  
Filton Pensioners Association  
HSL Disability, Southmead  
Horfield Reformed Church  
Princess Royal Carers Trust, Fishponds

#### MONITORING AND EVALUATION

From quarterly surveys it emerged that the clients are very satisfied with the overall service provided by the Project and that they consider that the Project is meeting their needs.

1. In the groups, a majority of clients felt either very involved or quite involved in the running of the group.
2. One-to-one clients said that they find the sessions helpful or very helpful.

3. On the helpline 10% of clients who responded to our survey call the helpline every day, 37% of callers phone the helpline a few times a week, and 53% phone the helpline less than once a week. The overall satisfaction level was very high.
4. Suggested improvements to the services were for the helpline to be made available 7 days a week, that more groups be set up in other areas of the city, and that workshops be provided on relaxation, stress management, dependency and coping strategies.

### EDUCATION/VISITS

1. Over the year we provided particular assistance to 4 GPs on withdrawal from benzodiazepines and antidepressants.
2. We wrote to all GPs, practice managers, mental health teams and pharmacists in the Bristol area with details of our services.
3. We also contacted other voluntary sector groups, local colleges, day centres, libraries, churches day centres, advice centres and social clubs to provide details of our services and distribute information about the Project.

### MAIN PROJECT FUNDING

Once again we would like to express our gratitude to the Bristol Primary Care Trust for continuing to provide the bulk of our funding for our main activities in the Bristol area. Without this the Project would have been totally unable to achieve the results it has managed in this and all previous years.

We would like to take this opportunity to thank all those individuals and organisations who helped to fund the Project during the year. Details of all major contributions can be found on the back cover. We would like to say a special thank you to the Linnet Trust for their generous donation towards the end of the year. There were also a number of smaller contributions, including contributions by clients at groups and one-to-one counselling sessions and also members, which are not individually listed but which are invaluable to the Project.

### GROUP SUPERVISION

Besides her role as Chair, Yasmin Neki continued to give supervision to the counselling team this year. Supervision was vital this year for the staff, given the number of changes and challenges that they had to face. Yasmin was unfailingly supportive and helped us to sort out a number of very difficult issues. In this as in her role as Chair she was invaluable to the Project.

## MEMBERSHIP

Rates for this year were £30.00 for life membership, £8.00 for waged and £4.00 for unwaged or low waged. At the end of the year there were 102 members, of which 57 were lifetime members, 21 full members and 24 honorary members. In all this raised £234.00 for Project funds. We are grateful to all members for their continued support.

## BENZODIAZEPINES AND THE ALL PARTY PARLIAMENTARY GROUP

The All Party Parliamentary Group for Involuntary Tranquilliser Addiction was set up in 2008 to raise awareness of involuntary addiction to benzodiazepines and to lobby NHS services for greater help for those affected. It wants the NHS to give specialist help to enable patients to withdraw safely from these drugs and to prevent future addictions.

The Group issued a statement in February 2011 drawing attention to the continuing problems with benzodiazepines. It stated that:-

*'Successive Governments have allowed this public health crisis to continue and one of the problems is that pharmaceutical companies strongly influence Government health policy.'*

It went on:-

*'The Department of Health has ignored expert scientific advice presented to them showing the dangers of benzodiazepines for 30 years. Correspondence from the Department to patients, academics and MPs demonstrates that the Department's energies have been mostly focussed on denial, feigned action and concealment. In response to these concerns the Department has sent formulaic letters with stock phrases such as 'the Department considers addiction to prescribed medication to be an important issue' yet no action ever follows.'*

The statement concluded:-

*'Professor Ashton, Emeritus Professor of Clinical Psychopharmacology at Newcastle University, a world expert on benzodiazepine use and withdrawal, has repeatedly asked the Department of Health to take action. Professor Ashton ran a withdrawal clinic in Newcastle from 1982-1994 with a success rate of nearly 90%. At a recent meeting with the Public Health Minister none of her advisers from the Department had even heard of Professor Ashton, even though her successful taper method is used worldwide.'*

*Effectively benzodiazepines are government delivered drugs, their main function being to feed the chemical addiction created by the health system with a drug that cures nothing.'*

The group has called for publicly funded health bodies to be forced to carry out research into the dangers of benzodiazepines which they say have destroyed the lives of hundreds of thousands of people.

Their demand comes as the Medicines & Healthcare Products Regulatory Agency (MHRA), the same safety watchdog, admitted issuing 26 new licences for Lorazepam (Ativan), despite the fact that it no longer holds any safety information about the drug. No one knows when the safety information was last reviewed. Jim Dobbin, Chair of the All Party Group, said that the MHRA's policy of destroying drug safety information was

*'absolutely frightening' and 'irresponsible.'*

He concluded:-

*'The Government needs to get every one of these organisations into the same room so that they can stop blaming each other, stop passing the buck, and start listening to the victims. The cost to the individual and their families is huge; the cost to the taxpayer is horrendous. We want the Government to order a proper review into these drugs.'*

## REPORT ON MENTAL HEALTH IN WOMEN

Almost a third of women over 18 have taken antidepressants, according to research published in January 2011 by Platform 51 (the Young Women's Christian Association). According to their survey of more than 2000 girls and women in England and Wales, around two thirds have had mild to moderate mental health problems, equivalent to 15.2 million girls and women nationally. Penny Newman, Chief Executive of Platform 51, said:-

*'Millions of girls and women are facing mental health problems and they are telling us they are not getting the support they need.'*

She added:-

*'Our study reveals generations of women in crisis. Women are often the lynchpins of their families and their communities, and if three in five of them aren't meeting their potential, they lose out, their family and friends lose out and so does the wider society.'*

The study found that at least 13% of women experiencing mental health problems had quit a job while 44% had taken some time off work. More than a quarter had been off work for at least a week with these problems. The study also found that women with mental health problems attempt to cope with their distress in damaging ways. More than a quarter drink too much and many isolate themselves from friends and family. Almost half had not left their homes for a long period and more than a quarter had lost friends. One in five had built up debt, one in ten had self harmed (a figure that rises to 35% for women aged 18 to 24) and almost 30% had been emotionally or physically abused – one in four admitted having felt suicidal as a result. Around one in three women with lower level mental health problems had never sought professional help. Of those who did seek help, almost two thirds felt doctors were too ready to prescribe drugs.

## GOVERNMENT STRATEGY ON MENTAL HEALTH

In February 2011 the Government unveiled a strategy, outlined in the White Paper ‘No Health Without Mental Health’, to put mental health treatment on the same footing as physical illness or injury and to end the stigma attached to depression and other conditions. The strategy makes clear that the Government wants doctors to stop simply prescribing pills to patients with a range of conditions including eating disorders, self harm, addictions, attention disorders and post natal depression. Instead they are targeting a massive take-up of personalised services, including one-to-one counselling and group therapy.

The Government hopes to help up to one million mental health sufferers back to health by the next general election, by which time more than 75,000 people currently out of work with these problems would be back in employment. Mental health problems are currently estimated to cost the economy £105 billion a year. The Government has promised to provide therapists for the 1-2 million people suffering from work-related stress, depression and other mental problems. It is setting aside £400 million to fund this activity.

## ANTIDEPRESSANTS

An antidepressant prescribed in the UK over the last 13 years is ineffective or potentially harmful, according to a study published in the British Medical Journal in November 2010. The drug, Reboxetine, works no better than a placebo, say the scientists, who accuse the manufacturer, Pfizer, of failing to disclose the results of trials which show its inadequacies.

The revelations come from the German Institute for Quality and Efficiency in Healthcare. Its independent scientist scrutinised the data on Reboxetine because of doubts that have been raised about its effectiveness and the fact that the US licensing authority, the Food & Drugs Administration, refused it a licence in 2001. Published



trials and reviews of the data had all shown the drug to be effective. But the German Institute found that 8 out of 13 significant trials had not seen the light of day.

The Institute accused the manufacturers of publishing only the positive results from the drug, as follows:-

*'Data on 74% of patients included in our analysis was unpublished, indicating that the published evidence on Reboxetine so far has been severely affected by publication bias.'*

The Institute has called for changes in European law to make it mandatory for all clinical trials to be published. They argue that all trial data should be disclosed – even when the trials fail and the drug is not approved.

In a separate study, findings published in the Canadian Medical Association Journal showed that women taking SSRIs and other newer antidepressants whilst pregnant significantly increase their chances of suffering a miscarriage. The study was led by Dr Arnick Berard of the University of Montreal and looked at 5,124 women who had suffered miscarriages. The scientists found an increased risk of 68% with the newer forms of antidepressant. Those taking Seroxat (Paroxetine and Efexon (Venlafaxine) had increased risks above this level.

Last year a study found that expectant mothers who took Seroxat were three times as likely to have a baby with a heart abnormality and those who took Prozac were four times as likely as other women not taking medication.

## ANNUAL GENERAL MEETING

The Annual General Meeting was held on Wednesday 6 October at the British Aerospace Welfare Association (BAWA) Leisure centre in Southmead Road, Bristol. Once again BAWA very generously waived the fee for the use of these excellent facilities, for which we are extremely grateful to them.

The guest speaker this year was Anthony R Burton MBE, who is well known to many of us at the Project for his involvement in and support for Project activities over the past few years. The theme of his talk was 'Psychotropic Medicines – What cost to carers? – a personal story'. Tony spoke about the years he had spent caring for his wife and daughter and of the various treatments they had been given for mental illness. He spoke of the lack of understanding he had often felt from the medical staff and said that family members in his position should be given much more information about the medication being given. The best advice he could give was to talk to others in a similar situation. He had learned so much from speaking to other service users over the years.

In conclusion, Yasmin Neki thanked Tony for his very moving speech which had resonated strongly amongst the audience.

#### ANNUAL OUTING

The Project's annual summer outing took place on Wednesday 23 June 2010 to Weston-Super-Mare. The clients, volunteers and staff who went enjoyed a wonderful day out in brilliant sunny weather. Very many thanks are due to Tony Burton, who organised the trip himself, and to the driver from Stroud Voluntary Community Transport who took us there and back. In Val Stevens honour the trip was named the 'Val Stevens Summer Outing' and she was present with us in spirit on the day.

#### DEVELOPMENT PLAN 2011/12

The Annual Project Development Plan was agreed by the Committee to cover the year 1 April 2011 to 31 March 2011. The Plan has six targets for the year, as follows:-

1. To raise £24,000 to continue the HOP scheme in 2011/12.
2. To raise £20,000 to employ a new youth worker in 2012/13.
3. To advertise our services more fully to GPs, practice staff, community and voluntary sector staff.
4. To continue our existing withdrawal groups.
5. To carry out a programme of visits and talks to target client groups.
6. To encourage more clients to become volunteers.

The major risk for the Project would be the reduction, or loss, of our PCT funding. A programme is under way to make more widely known the value to the local community of our existing work and also to increase the work we do on the preventive side.

Jayne Hoyle  
Project Manager

Ian J Singleton  
Senior Project Development Worker

**COMPANY REGISTRATION NUMBER 5126531**

**BRISTOL & DISTRICT TRANQUILLISER PROJECT  
COMPANY LIMITED BY GUARANTEE  
FINANCIAL STATEMENTS  
31 MARCH 2011**

**Charity Number 1104033**

**ELLIOTT BUNKER LIMITED**

Chartered Accountants  
3-8 Redcliffe Parade West  
Redcliffe  
Bristol  
BS1 6SP

# BRISTOL & DISTRICT TRANQUILLISER PROJECT COMPANY LIMITED BY GUARANTEE

## FINANCIAL STATEMENTS

YEAR ENDED 31 MARCH 2011

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Detailed statement of financial activities	Error!
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# BRISTOL & DISTRICT TRANQUILLISER PROJECT COMPANY LIMITED BY GUARANTEE

## TRUSTEES ANNUAL REPORT

YEAR ENDED 31 MARCH 2011

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The trustees, who are also directors for the purposes of company law, present their report and the unaudited financial statements of the charity for the year ended 31 March 2011.

### REFERENCE AND ADMINISTRATIVE DETAILS

<b>Registered charity name</b>	Bristol & District Tranquilliser Project
<b>Charity registration number</b>	1104033
<b>Company registration number</b>	5126531
<b>Registered office</b>	88 Henleaze Road Henleaze Bristol BS9 4JY

### THE TRUSTEES

The trustees who served the charity during the period were as follows:

Y Neki (Chair)  
J Mignott  
J Jones  
W Liew  
J Gunn  
V Greenhouse  
R Ashley

V Stevens was appointed as a Trustee on 12 April 2010.

A.R. Burton M.B.E was appointed as a Trustee on 13 April 2011.

**Secretary** Mr I Singleton

**Bankers** Lloyds TSB Bank plc  
55 Corn Street  
Bristol  
BS99 7LE

### STRUCTURE, GOVERNANCE AND MANAGEMENT

All major decisions concerning the organisation are taken by the trustees at quarterly Management Committee meetings. Day to day management of the organisation is delegated to the project manager, who is directly responsible for this to the Chairman of the trustees. Trustees are subject to election and re-election at Annual General Meetings by the members of the organisation.

The board of directors keeps the skills requirement for the board under review. In the event that a director retires or additional directors are required, the board of directors considers the recruitment of new directors.

### PUBLIC BENEFIT

The trustees confirm that they have referred to the guidance contained in the Charity Commission's general guidance on public benefit when reviewing the Trust's focus and objectives

# BRISTOL & DISTRICT TRANQUILLISER PROJECT COMPANY LIMITED BY GUARANTEE

## TRUSTEES ANNUAL REPORT *(continued)*

### YEAR ENDED 31 MARCH 2011

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#### OBJECTIVES AND ACTIVITIES

The organisation has the following main objectives and activities:-

1. To help clients to withdraw successfully from benzodiazepines at a suitable pace.
2. To encourage clients to withdraw successfully from other psychotropic medication, mainly antidepressants.
3. To inform and advise those professionally involved in the problems of involuntary benzodiazepine addiction.

#### ACHIEVEMENTS AND PERFORMANCE

There was a high level of activity during the year. The overall number of clients helped was 251, with 78% withdrawing from their medication. The helpline, group work and individual counselling were maintained at the Project and the outreach groups continued at Knowle and Southmead. The third year of the fourth scheme specifically aimed at helping additional older people (HOP) ended on 30th September 2010. A total of 66 older people were helped under the scheme. A new scheme began on 1st October 2010.

#### FINANCIAL REVIEW

Total incoming resources remained similar in comparison with the previous year. Grants increased whilst donations fell, with expenditure increasing, resulting in a deficit of £10,634. This was accounted for by a deficit of £4,509 on the HOP fund and a deficit of £6,125 on the general fund. The Trustees are actively reviewing the charity's cost base. There are adequate funds in hand for future contingencies.

#### RESERVES POLICY

The trustees have examined the charity's requirements for reserves in the light of the main risks to the charity. They have established a policy whereby the unrestricted funds not committed or invested in tangible fixed assets held by the charity should be between three and six months expenditure. Budgeted expenditure for 2011/12 is £65,000 on unrestricted funds and therefore the target is £16,500 to £32,500 for the general reserves. The reserves are needed to meet the working capital requirements of the charity and the trustees are confident that at this level they would be able to continue the current activities of the charity, in the short term, in the event of a significant drop in funding.

The level of general reserves as at 31st March 2011 available to the charity is £36,577, just above the target level. The trustees consider that this is a prudent level, given the current prevailing economic conditions. They approve the strategy of maintaining this level of reserves through planned operating surpluses from unrestricted funding sources. The charity is also continuously exploring additional alternate funding sources and assessing the extent to which existing activities and expenditure could be curtailed should the major income source cease.

#### PLANS FOR FUTURE PERIODS

Plans for the year ahead include:-

1. Raising and maintaining funds for the current HOP scheme
2. Raising funds to employ a Youth Worker
3. Continuing with the existing withdrawal groups, individual counselling and the telephone helpline.

#### RESPONSIBILITIES OF THE TRUSTEES

The trustees (who are also the directors of Bristol & District Tranquilliser Project for the purposes of company law) are responsible for preparing the Trustees Annual Report and the financial statements in accordance with applicable law and United Kingdom Accounting Standards (United Kingdom Generally Accepted Accounting Practice).

# BRISTOL & DISTRICT TRANQUILLISER PROJECT COMPANY LIMITED BY GUARANTEE

## TRUSTEES ANNUAL REPORT *(continued)*

### YEAR ENDED 31 MARCH 2011

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Company law requires the trustees to prepare financial statements for each financial year which give a true and fair view of the state of affairs of the charitable company and of the incoming resources and application of resources, including the income and expenditure, of the charitable company for that period. In preparing these financial statements, the trustees are required to:

- select suitable accounting policies and then apply them consistently;
- observe the methods and principles in the Charities SORP;
- make judgements and estimates that are reasonable and prudent;
- state whether applicable UK Accounting Standards have been followed, subject to any material departures disclosed and explained in the financial statements;
- prepare the financial statements on the going concern basis unless it is inappropriate to presume that the charitable company will continue in operation.

The trustees are responsible for keeping proper accounting records that disclose with reasonable accuracy at any time the financial position of the charitable company and enable them to ensure that the financial statements comply with the Companies Act 2006. The trustees are also responsible for safeguarding the assets of the charitable company and hence for taking reasonable steps for the prevention and detection of fraud and other irregularities.

#### **INDEPENDENT EXAMINER**

N Michael BA FCA

Elliott Bunker Limited has been re-appointed as independent examiner for the ensuing year.

Registered office:  
88 Henleaze Road  
Henleaze  
Bristol  
BS9 4JY

Signed by order of the trustees

MR I SINGLETON  
Charity Secretary

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# **BRISTOL & DISTRICT TRANQUILLISER PROJECT COMPANY LIMITED BY GUARANTEE**

## **INDEPENDENT EXAMINER'S REPORT TO THE MEMBERS OF BRISTOL & DISTRICT TRANQUILLISER PROJECT**

**YEAR ENDED 31 MARCH 2011**

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I report on the accounts of the charity for the year ended 31 March 2011 set out on pages 6 to 12.

### **RESPECTIVE RESPONSIBILITIES OF TRUSTEES AND INDEPENDENT EXAMINER**

The charity's trustees (who are also the directors of Bristol & District Tranquilliser Project for the purposes of company law) are responsible for the preparation of the accounts. The charity's trustees consider that an audit is not required for this year (under section 43(2) of the Charities Act 1993 (the 1993 Act), as amended by section 28 of the Charities Act 2006) and that an independent examination is needed.

Having satisfied myself that the charity is not subject to audit under company law and is eligible for independent examination, it is my responsibility to:

- examine the accounts (under section 43(3)(a) of the 1993 Act, as amended);
- to follow the procedures laid down in the General Directions given by the Charity Commission (under section 43(7)(b) of the 1993 Act, as amended); and
- to state whether particular matters have come to my attention.

### **BASIS OF INDEPENDENT EXAMINER'S STATEMENT**

My examination was carried out in accordance with the General Directions given by the Charity Commission. An examination includes a review of the accounting records kept by the charity and a comparison of the accounts presented with those records. It also includes consideration of any unusual items or disclosures in the accounts, and seeking explanations from you as trustees concerning any such matters. The procedures undertaken do not provide all the evidence that would be required in an audit, and consequently I do not express an audit opinion on whether the accounts present a 'true and fair view'.

### **INDEPENDENT EXAMINER'S STATEMENT**

In connection with my examination, no matter has come to my attention:

(1) which gives me reasonable cause to believe that in any material respect the trustees have not met the requirements to ensure that:

- proper accounting records are kept (in accordance with section 386 of the Companies Act 2006); and
- accounts are prepared which agree with the accounting records, comply with the accounting requirements of section 396 of the Companies Act 2006 and with the methods and principles of the Statement of Recommended Practice: Accounting and Reporting by Charities; or

(2) to which, in my opinion, attention should be drawn in order to enable a proper understanding of the accounts to be reached.



**BRISTOL & DISTRICT TRANQUILLISER PROJECT  
COMPANY LIMITED BY GUARANTEE**

**INDEPENDENT EXAMINER'S REPORT TO THE MEMBERS OF BRISTOL & DISTRICT  
TRANQUILLISER PROJECT *(continued)***

**YEAR ENDED 31 MARCH 2011**

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N Michael BA FCA  
Elliott Bunker Limited  
Independent examiner

3-8 Redcliffe Parade West  
Redcliffe  
Bristol  
BS1 6SP

.....

# BRISTOL & DISTRICT TRANQUILLISER PROJECT COMPANY LIMITED BY GUARANTEE

## STATEMENT OF FINANCIAL ACTIVITIES (INCORPORATING THE INCOME AND EXPENDITURE ACCOUNT)

YEAR ENDED 31 MARCH 2011

	Note	Unrestricted Funds £	Restricted Funds £	Total Funds 2011 £	Total Funds 2010 £
<b>INCOMING RESOURCES</b>					
Incoming resources from generating funds:					
Voluntary income	2	68,632	20,673	89,305	86,607
Investment income	3	264	–	264	799
Other incoming resources	4	75	–	75	–
<b>TOTAL INCOMING RESOURCES</b>		<b>68,971</b>	<b>20,673</b>	<b>89,644</b>	<b>87,406</b>
<b>RESOURCES EXPENDED</b>					
Charitable activities	5/6	(74,157)	(24,947)	(99,104)	(95,941)
Governance costs	7	(939)	(235)	(1,174)	(1,151)
<b>TOTAL RESOURCES EXPENDED</b>		<b>(75,096)</b>	<b>(25,182)</b>	<b>(100,278)</b>	<b>(97,092)</b>
<b>NET OUTGOING RESOURCES FOR THE YEAR/NET EXPENDITURE FOR THE YEAR</b>					
	8	(6,125)	(4,509)	(10,634)	(9,686)
<b>RECONCILIATION OF FUNDS</b>					
Total funds brought forward		42,702	25,881	68,583	78,269
<b>TOTAL FUNDS CARRIED FORWARD</b>		<b>36,577</b>	<b>21,372</b>	<b>57,949</b>	<b>68,583</b>

The Statement of Financial Activities includes all gains and losses in the year and therefore a statement of total recognised gains and losses has not been prepared.

All of the above amounts relate to continuing activities.

# BRISTOL & DISTRICT TRANQUILLISER PROJECT COMPANY LIMITED BY GUARANTEE

## BALANCE SHEET

31 MARCH 2011

	Note	2011 £	2010 £
<b>FIXED ASSETS</b>			
Tangible assets	10	1,003	1,253
<b>CURRENT ASSETS</b>			
Debtors	11	557	687
Cash at bank		57,652	67,970
		<u>58,209</u>	<u>68,657</u>
<b>CREDITORS: Amounts falling due within one year</b>	12	<u>(1,263)</u>	<u>(1,327)</u>
<b>NET CURRENT ASSETS</b>		<b>56,946</b>	67,330
<b>TOTAL ASSETS LESS CURRENT LIABILITIES</b>		<u>57,949</u>	<u>68,583</u>
<b>NET ASSETS</b>		<u>57,949</u>	<u>68,583</u>
<b>FUNDS</b>			
Restricted income funds	13	21,372	25,881
Unrestricted income funds	14	36,577	42,702
<b>TOTAL FUNDS</b>		<u>57,949</u>	<u>68,583</u>

The trustees are satisfied that the charity is entitled to exemption from the provisions of the Companies Act 2006 (the Act) relating to the audit of the financial statements for the year by virtue of section 477, and that no member or members have requested an audit pursuant to section 476 of the Act.

The trustees acknowledge their responsibilities for:

- (i) ensuring that the charity keeps adequate accounting records which comply with section 386 of the Act, and
- (ii) preparing financial statements which give a true and fair view of the state of affairs of the charity as at the end of the financial year and of its profit or loss for the financial year in accordance with the requirements of section 393, and which otherwise comply with the requirements of the Act relating to financial statements, so far as applicable to the charity.

These financial statements were approved by the members of the committee on the ..... and are signed on their behalf by:

Y NEKY (CHAIR)

Company Registration Number: 5126531

The notes on pages 8 to 12 form part of these financial statements.

# BRISTOL & DISTRICT TRANQUILLISER PROJECT COMPANY LIMITED BY GUARANTEE

## NOTES TO THE FINANCIAL STATEMENTS

YEAR ENDED 31 MARCH 2011

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### 1. ACCOUNTING POLICIES

#### **Basis of accounting**

The financial statements have been prepared under the historical cost convention and in accordance with applicable United Kingdom accounting standards, the Statement of Recommended Practice "Accounting and Reporting by Charities" issued in March 2005 (SORP 2005) and the Companies Act 2006, and in accordance with the Financial Reporting Standard for Smaller Entities (effective April 2008)

#### **Fund accounting**

Unrestricted funds are available for use at the discretion of the trustees in the furtherance of the general objectives of the charity and which have not been designated for other purposes. Restricted funds are funds which are to be used in accordance with specific restrictions imposed by donors or which have been raised by the charity for specific purposes. The costs of raising and administering such funds are charged against the specific fund. The designated fund comprises an unrestricted fund that has been set aside by the trustees for a particular purpose.

#### **Resources expended**

All expenditure is accounted for on an accruals basis and has been classified under headings that aggregate all costs relating to the category. Where costs cannot be directly attributed to a particular heading, they have been allocated to activities on a basis consistent with use of the resources. The charity is not registered for VAT and accordingly expenditure is shown inclusive of VAT.

#### **Fixed assets**

All fixed assets are initially recorded at cost.

Major expenditure on tangible fixed assets over £1,000 is capitalised. The cost of other items is written off as incurred.

#### **Depreciation**

Depreciation is calculated so as to write off the cost of an asset, less its estimated residual value, over the useful economic life of that asset as follows:

Equipment - 20% reducing balance basis

# BRISTOL & DISTRICT TRANQUILLISER PROJECT COMPANY LIMITED BY GUARANTEE

## NOTES TO THE FINANCIAL STATEMENTS

YEAR ENDED 31 MARCH 2011

### 1. ACCOUNTING POLICIES *(continued)*

#### Incoming resources

All incoming resources are included in the SOFA when the charity is legally entitled to the income and the amount can be quantified with reasonable accuracy. The following specific policies are applied to particular categories of income.

Voluntary income is received by the way of donations and grants and is included in full in the statement of financial activities when receivable. Where grants are awarded to cover a number of years they are recognised in the year of receipt and any balance carried forward at the year end to fund future years activities, these are treated as restricted as appropriate.

Investment income is included when receivable.

### 2. VOLUNTARY INCOME

	Unrestricted Funds £	Restricted Funds £	Total Funds 2011 £	Total Funds 2010 £
<b>Donations</b>				
Donations	1,707	–	1,707	3,092
<b>Grants receivable</b>				
Grants Received	4,900	20,673	25,573	20,800
<b>Sponsorship</b>				
Membership	209	–	209	187
<b>Other income</b>				
Main Funding	61,816	–	61,816	61,316
Gift Aid	–	–	–	1,212
	<u>68,632</u>	<u>20,673</u>	<u>89,305</u>	<u>86,607</u>

### 3. INVESTMENT INCOME

	Unrestricted Funds £	Total Funds 2011 £	Total Funds 2010 £
Bank interest receivable	264	264	799

### 4. OTHER INCOMING RESOURCES

	Unrestricted Funds £	Total Funds 2011 £	Total Funds 2010 £
Refund for online submissions	75	75	–

# BRISTOL & DISTRICT TRANQUILLISER PROJECT COMPANY LIMITED BY GUARANTEE

## NOTES TO THE FINANCIAL STATEMENTS

YEAR ENDED 31 MARCH 2011

### 5. COSTS OF CHARITABLE ACTIVITIES BY FUND TYPE

	Unrestricted Funds £	Restricted Funds £	Total Funds 2011 £	Total Funds 2010 £
Charitable Activities	<u>74,157</u>	<u>24,947</u>	<u>99,104</u>	<u>95,941</u>

### 6. COSTS OF CHARITABLE ACTIVITIES BY ACTIVITY TYPE

	Directly undertaken £	Total Funds 2011 £	Total Funds 2010 £
Charitable Activities	<u>99,103</u>	<u>99,103</u>	<u>95,941</u>

### 7. GOVERNANCE COSTS

	Unrestricted Funds £	Restricted Funds £	Total Funds 2011 £	Total Funds 2010 £
Accountancy Fees	<u>939</u>	<u>235</u>	<u>1,174</u>	<u>1,151</u>

### 8. NET OUTGOING RESOURCES FOR THE YEAR

This is stated after charging:

	2011 £	2010 £
Depreciation	<u>250</u>	<u>275</u>

### 9. STAFF COSTS AND EMOLUMENTS

Total staff costs were as follows:

	2011 £	2010 £
Wages and salaries	58,528	71,998
Social security costs	<u>4,134</u>	<u>4,783</u>
	<u>62,662</u>	<u>76,781</u>

#### Particulars of employees:

The average number of employees during the year, calculated on the basis of full-time equivalents, was as follows:

	2011 No	2010 No
Number of staff	<u>3</u>	<u>4</u>

No employee received remuneration of more than £60,000 during the year (2010 - Nil).

**BRISTOL & DISTRICT TRANQUILLISER PROJECT  
COMPANY LIMITED BY GUARANTEE**

**NOTES TO THE FINANCIAL STATEMENTS**

**YEAR ENDED 31 MARCH 2011**

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**10. TANGIBLE FIXED ASSETS**

	Equipment £
<b>COST</b>	
At 1 April 2010 and 31 March 2011	<u>1,528</u>
<b>DEPRECIATION</b>	
At 1 April 2010	275
Charge for the year	<u>250</u>
At 31 March 2011	<u>525</u>
<b>NET BOOK VALUE</b>	
At 31 March 2011	<u>1,003</u>
At 31 March 2010	<u>1,253</u>

**11. DEBTORS**

	2011 £	2010 £
Prepayments	<u>557</u>	<u>687</u>

**12. CREDITORS: Amounts falling due within one year**

	2011 £	2010 £
Trade creditors	88	152
Accruals	<u>1,175</u>	<u>1,175</u>
	<u>1,263</u>	<u>1,327</u>

**13. RESTRICTED INCOME FUNDS**

	Balance at 1 Apr 2010 £	Incoming resources £	Outgoing resources £	Balance at 31 Mar 2011 £
Helping older people	<u>25,881</u>	<u>20,673</u>	<u>(25,182)</u>	<u>21,372</u>

**14. UNRESTRICTED INCOME FUNDS**

	Balance at 1 Apr 2010 £	Incoming resources £	Outgoing resources £	Balance at 31 Mar 2011 £
General Funds	<u>42,702</u>	<u>68,971</u>	<u>(75,096)</u>	<u>36,577</u>

**15. ANALYSIS OF NET ASSETS BETWEEN FUNDS**

	<b>Tangible fixed assets £</b>	<b>Net current assets £</b>	<b>Total £</b>
<b>Restricted Income Funds:</b>			
Helping older people	–	21,371	21,371
<b>Unrestricted Income Funds</b>	<b>1,003</b>	<b>35,575</b>	<b>36,578</b>
<b>Total Funds</b>	<b><u>1,003</u></b>	<b><u>56,946</u></b>	<b><u>57,949</u></b>

**16. RELATED PARTY TRANSACTIONS**

Y Neki, a trustee, received £360 (2010 - £480) from the charity for training services provided. No balance was outstanding at the year end (2010 - £nil). The cost incurred by the charity represents was at an arm's length market value.

No expenses were paid to any other trustee during the year (2010 -£Nil).

The charity is controlled by its trustees.

**17. COMPANY LIMITED BY GUARANTEE**

The company is limited by guarantee. No part of this guarantee has been called up



## **ACKNOWLEDGEMENTS**

The Committee and Staff would like to acknowledge with gratitude the financial assistance to the Project of these organisations and individuals during the past year:-

### **MAIN PROJECT CORPORATE FUNDING**

Bristol Primary Care Trust (Core Funding)  
Lloyd Robinson Family Fund  
Rolls-Royce plc  
The Linnet Trust  
The Planning Inspectorate  
The Needham Cooper Charitable Trust  
Wessex Water

### **MAIN PROJECT INDIVIDUALS**

Barbara and Richard Beck	Anthony R Burton MBE
Sheila Clayton	Joe and Nora Commons
Eileen Holbrook	Lynn Jones
Helen Keen	Rob Mellors
Margaret Nichols	Ann Stoker
Julie Wallis	Lesley and Graham Watson

### **HELPING OLDER PEOPLE (HOP) FUNDING**

Mrs T Smith  
The James Tudor Foundation  
The John James Bristol Foundation  
The Lark Trust  
The St Monica Trust

There were also numerous other individuals who gave smaller donations whose contributions to the Project were invaluable.

