

THE
WELL
WOMAN
CENTRE



Annual Report
2015

Well Woman Medical and Counselling Services 2015

Family Planning Services:

- Combined oral contraceptive pill, the mini pill and Nuvaring
- Intrauterine devices, including Mirena, Copper and Flexi
- Implants (Implanon) and injectable contraception (Depo Provera)
- Evra (contraceptive patch)
- Emergency contraception and post-coital coils

Women's and General Health Services:

- Pregnancy testing and blood testing
- Initial infertility investigations
- Post termination medical check-ups
- Breast examinations
- P.M.S. and Menopause consultations

Screening and Sexual Health Services:

- Cervical smear testing CervicalCheck (the National Cervical Screening Programme) and Biomnis
- Screening for Sexually-Transmitted Infections (Men's STI screening is available in Pembroke Road and Liffey Street)
- Chlamydia testing
- Cryotherapy
- HPV typing

Counselling:

- Non-directive pregnancy counselling, and post-termination counselling available in all centres, free of charge
- General counselling available in all centres (including sexual abuse, depression, relationship issues, stress, low self-esteem)
- Counselling in Pembroke Road to support women with Hepatitis C
- In Pembroke Road Consultant Psychiatrist Dr Eimer Philbin Bowman deals with issues including phobias, panic attacks, depression, eating disorders, psycho-sexual problems and vaginismus

More information on services or opening hours can be obtained by visiting our website, www.wellwomancentre.ie or by phoning any Well Woman centre.

City Centre

35 Lower Liffey Street
Dublin 1
872 8095 / 872 8051

Northside

Northside Shopping Centre
Coolock, Dublin 5
848 4511

Ballsbridge

67 Pembroke Road
Ballsbridge, Dublin 4
668 1108 / 660 9860

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A Message from our Chairwoman



No organisation operating in the not-for-profit sector has failed to feel the impact of austerity over the past 10 years or so, and Well Woman has certainly had our share of challenges. Since Ireland's economy crashed, the climate in which the Dublin Well Woman Centre operates has changed utterly, with serious pressure on personal income leading to a fall in discretionary spending, demographic changes through emigration, and reductions in public funding streams. Against the backdrop of this pressure on public funding and personal spending, and the damage done in 2013 by revelations about governance deficiencies in a small number of charities, public confidence in the not-for-profit sector has continued its slow recovery.

Well Woman had already taken a number of difficult decisions to respond to these challenges, rationalising clinic coverage, and implementing two periods of short-term working in 2011 and 2013. With the understanding of our staff, we brought in a pay-cut in 2012; a pay freeze has applied since.

During 2014, it became apparent that these measures, combined with the fact that due to the 'pinch' of the recession women were putting off attending their doctor, had not been enough to stabilise the organisation and

ensure we remained open to provide our important women's health expertise.

The Board began a series of consultations around a more impactful restructuring of the Dublin Well Woman Centre, which we implemented during 2015. From March, we dramatically reduced opening hours in Pembroke Road and Coolock, which had both been running at a loss. We also restructured the middle management tier within the organisation, eliminating the role of Clinic Manager and moving to a 'Best Practice' Operations Manager model. This has not only reduced operating costs, it has ensured a consistent management focus across the three clinics, and created efficiencies in processes and stock-ordering.

As a result of our many efforts, and thanks to the co-operation of staff, the organisation returned to surplus in 2015, and we are confident that the difficult decisions taken were necessary, and will remain relevant.

Perhaps the biggest challenge – and opportunity – for any business is the significant increase in the pace of change, which will only get faster as the digital world advances. During 2015, the Board formulated a comprehensive Digital Marketing Strategy which will be implemented over the coming year. The strategy, prepared taking advantage of the expertise of a team of post graduate digital marketing students at Fitzwilliam College, defines a detailed road-map to exploit the benefits of digital technology to grow Well Woman and reach the Millennial generation, and GenZ beyond them. Starting with a completely redesigned website, it will be followed by online advertising and various SEO strategies. At time of writing, we have begun to implement this strategy.

The changing digital world also brings with it the necessity to focus on our brand and customer experience. In Summer 2015 we conducted our 2nd annual Patient Satisfaction Survey. Despite the tough decisions we had taken, it was hugely gratifying to see such high levels of patient satisfaction – some 93% of Well Woman patients are happy to recommend us to a friend, colleague or family member. From my own job as Head of Insights & Planning at Dublin Airport I know that this is a very high score indeed and know it positions us well to take business advantage...

Our patients are clearly very engaged with our brand. Those who responded to the survey also made a number

of constructive recommendations on steps we can take to improve the quality of our services to patients, and these are being included in our medium-term development plan. As we now seek to actively drive growth in our patient numbers, we will be using the goodwill of existing patients to grow awareness of the many valuable services Well Woman offers. A summary of the survey is contained elsewhere in this report.

The Dublin Well Woman Centre takes seriously its responsibilities as a recipient of public funding. We welcome the long-overdue establishment of the Charities Regulator, and will work positively to meet that office's standards for charities. Not only does this require that Well Woman, like all other funded charities, observes the highest standards of governance – it pushes us to continue to 'keep our eye on the ball' where women's healthcare is concerned and to keep our expertise relevant to and for women. Our services must be evidence-based, and they must respond to what women really need from a primary healthcare provider.

Well Woman's partner relationship with the H.S.E. is a hugely valuable facet of our work. We are proud to deliver GMS services in Coolock, along with crisis pregnancy services (in partnership with the H.S.E. Crisis Pregnancy Programme) and CervicalCheck cervical screening services in all our locations.

In day-to-day service delivery, Well Woman's success is built on a massive team effort. To all of our dedicated doctors, nurses, counsellors, and administration staff, many thanks.

In the strategic development of the organisation, the Board of Directors and its Finance Committee deserve generous recognition for the tremendous amount of time, expertise and commitment they gave to the organisation and its senior management during 2015. I would like to extend particular thanks to our Chief Executive and Medical Director - their commitment during challenging times has been hugely important.

Finally, I am proud to be Chairwoman of the Well Woman Centre and part of the team, and to witness our resilience and determination to model the best standards in women's healthcare, as well as advocating for our patients. I look forward to our continued development and success in the coming year.

Jan Richards,
Chairwoman
June 2016

Chief Executive's Report

One of the positive developments in 2015 was working with digital marketing students from FitzWilliam College on a Digital Marketing Strategy to renew awareness of the Well Woman brand, and drive traffic to our website, with particular focus on our core services – cervical screening, sexual health screening, and the fitting of LARCs. At time of writing (June 2016) an exciting new website is under development, and will be launched over the summer.

We conducted our 2nd Patient Satisfaction survey; a summary of the results is contained elsewhere in this report. It is clear that patients hold the Dublin Well Woman Centre in high esteem, bearing out the organisation's core values:

- **Excellence** is at the heart of what we do. It drives us to innovate and to lead when it comes to new developments, and to take inspiration from other, leading healthcare organisations, nationally and internationally.
- We are **non-judgemental** in our treatment of patients and clients; our approach upholds the right of each woman to make health decisions appropriate to her, and her needs.
- Our **client-centred** approach respects our patients and clients; we support the choices women make about their sexual and reproductive health, and offer our services in the most accessible way possible.
- We are **caring and supportive** in what we do; Well Woman doctors, nurses and counsellors connect with patients and clients in a relationship of equals.

Following on from the survey we adopted a Patient Charter, which spells out the rights and entitlements our patients and clients may expect when they come to us. The Charter has been well received, and is prominently displayed in each of our clinics.

Our #TimeToTest initiative in January 2015 – part of European Cervical Cancer Prevention Week – was successful in encouraging business to facilitate female staff needing time to attend for cervical screening appointments. We also had an active presence at a number of Student Sexual Health initiatives on 3rd level campuses throughout the year.

What was more difficult in 2015 was the continuing economic challenge, and the manner in which women have been compelled – due to pressures on discretionary spending – to reduce or discontinue coming to a doctor to discuss a healthcare problem as often is needed.

We had been faced with a number of very difficult decisions around restructuring in the latter part of 2014, and much of the first half of 2015 saw their implementation. They were necessary in order to secure the future of the organisation, and the fact that a not-for-profit organisation that is relevant to women, and looks to constantly argue the case for women's health gain, has endured in the teeth of a deep recession, is cause for celebration.

Against the backdrop of public and political focus on governance deficits in the not-for-profit sector, it is important to remember that the services provided by not-for-profit organisations are valuable, and important to Irish society.

The need for good governance has presented each of us active in the social economy with an opportunity to get our own houses in order. Good governance must be at the heart of everything a social enterprise does; in this regard, Well Woman is committed to working constructively with the Charities Regulatory Authority.

As far as vindicating the reproductive rights of Irish women, we still have a long road to travel. After lengthy delay, guidelines to healthcare professionals on implementing the highly-restrictive Protection of Life during Pregnancy Act, 2013, were finally published during 2015.

That Act is a response – after many years – to the narrow parameters of the Supreme Court's 1992 judgement in the 'X' case. As such, it does not recognise any right to an abortion in cases of pregnancy resulting from rape or incest, or when continuing with the pregnancy would constitute a serious risk to a woman's long-term health.

The continuing debate over abortion in this country further demonstrates the 'chill' effect upon healthcare professionals of Article 40.3.3. While we work collaboratively with other progressive organisations towards repeal of the 8th Amendment; Well Woman's role in advocating for women with a crisis pregnancy will continue.

Writing as far back as 2006, I said that Well Woman wanted to see policy-makers engage with stakeholders before implementing a national strategy, which would deal with all aspects of sexual health – education and prevention, awareness and services.

During 2015, the long-awaited National Sexual Health Strategy was published. The Strategy sets out a road-map to healthcare providers, defining standards in education and prevention, best practice testing in primary care and hospital-based clinics, laboratory testing and monitoring of outcomes, and there is a welcome sense of 'Land, Ho!' in having the document to hand. However, it is important that it is matched by an increase in funding to underpin sexual health services.

It is clear that Ireland's sexual health needs have changed, with most people now having a number of sexual partners throughout their lives. People live longer and consequently remain sexually active for longer, and both women and

men are now more exposed to more sexually transmitted infections than ever before. Quality services must be in place to meet these needs.

I must thank my colleagues in the management team, and all of our staff for their dedication to our patients, and their loyalty to what Well Woman represents.

Finally, warmest thanks must go to our Chairwoman Jan Richards, and to Well Woman's Board of Directors. Jan and the Board gave me extraordinary support and guidance during 2015, for which I am most grateful.

Alison Begas
Chief Executive,
June 2016

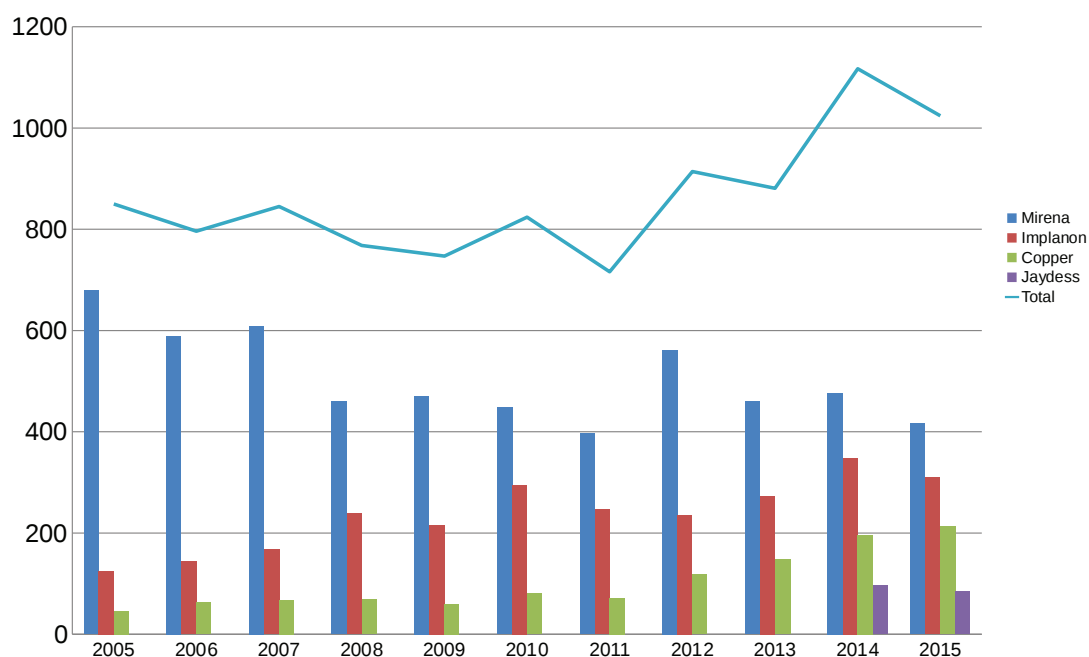
Medical Director's Commentary and Report

It was difficult to maintain the same level of access to services due to the significant reduction in opening hours and clinical staff in both the Pembroke Road and Coolock clinics. Inevitably the number of patients seen and the number of tests taken were lower than previous years. However staff continued to deliver the service with friendly professionalism as evidenced by the Patient Satisfaction Survey described on page 14.

LARCs in Well Woman

Long Acting Reversible Contraception is a popular choice for many women. Mirena and Jaydess are intrauterine hormonal systems. Implanon is a hormonal implant fitted under the skin on the inner aspect of the upper arm. We stock two non-hormonal copper intrauterine devices in the clinic. Women like the convenience of not having to remember to take a pill every day and the fact that contraception is very quickly reversed when the device is removed. There has been a marked increase in the number of women who choose to have non hormonal contraception in the form of a copper coil.

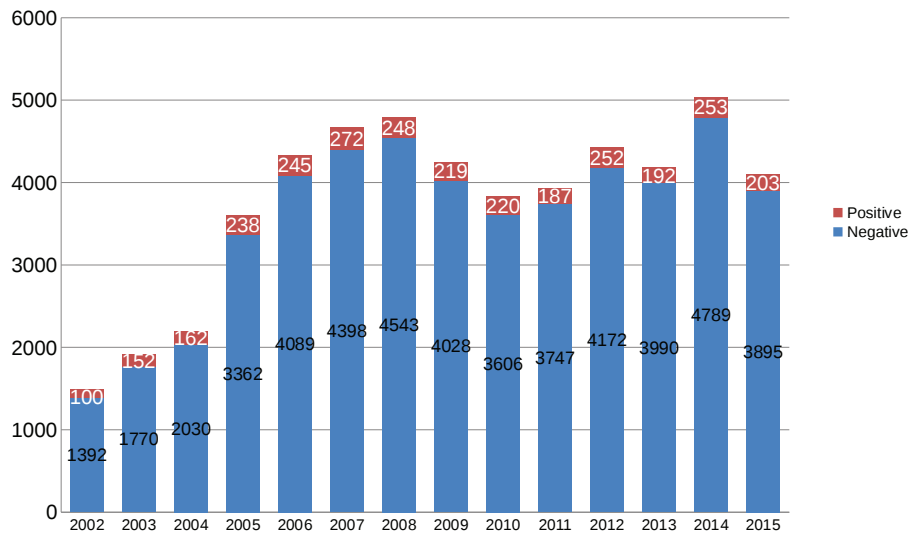
LARCs in Well Woman



Chlamydia Tests

We recommend chlamydia testing to all our patients who have had a change in sexual partner within the last year. Most men and women with a chlamydia infection have no or very minor symptoms so screening is the only way to know if there is an infection. Women with a chlamydia infection may get irregular vaginal bleeding and both men and women can experience pain on urination. Undiagnosed infection for women in particular can have long-term detrimental effects on fertility, increase the risk of ectopic pregnancy and cause chronic pelvic pain.

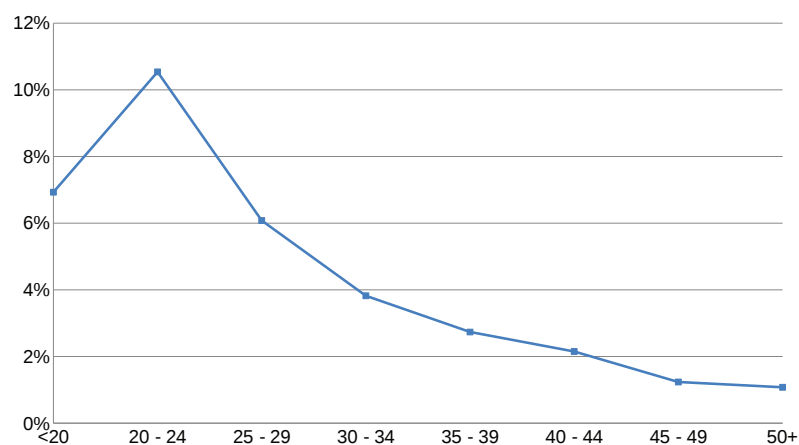
Chlamydia Tests



Percentage Chlamydia Positive by Age Group

In 2015 over 10% of women in their early twenties tested positive for chlamydia. Only 100 of the 4000+ tests were taken in the under 20 age group so the lower rate in that age group may or may not be a true reflection of the infection level in that population.

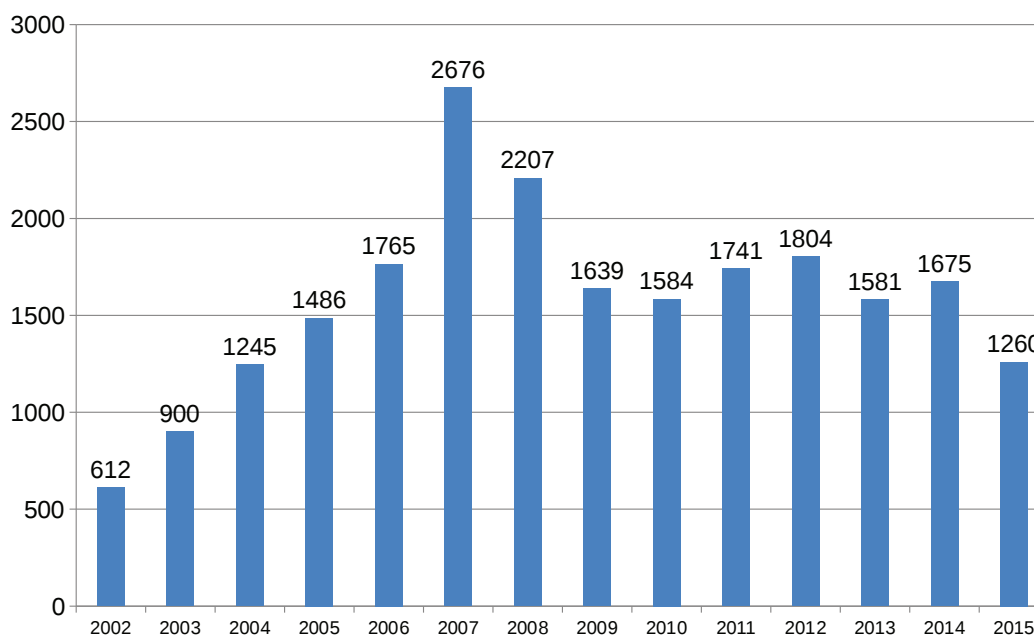
Percentage Chlamydia Positive by Age Group 2015



Full Screens

A Full Screen is a check for a number of sexually transmitted infections – HIV, hepatitis B, hepatitis C, syphilis, chlamydia, gonorrhoea, and trichomonas. Generally all of these infections may be silent so the person is not aware they have a problem until the infection becomes serious enough to cause disease. The number of people requesting this service has decreased dramatically. This may be partly due to our reduced opening hours but online testing services may also have had an impact.

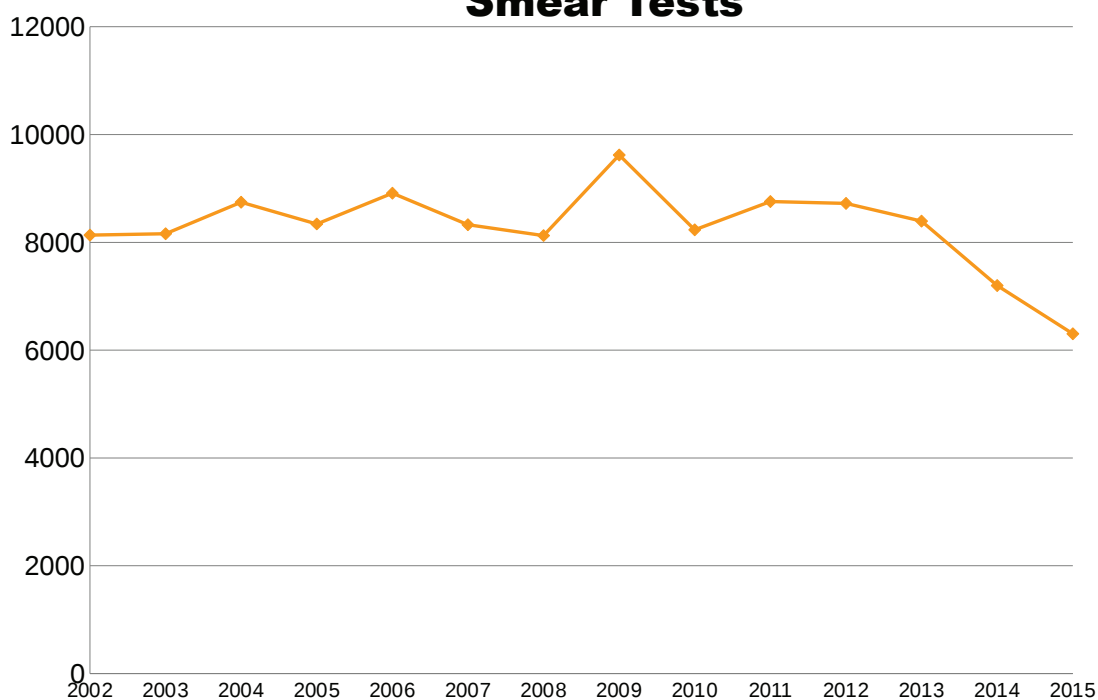
Full Screens



Cervical Smear Tests

The number of smear tests taken annually was relatively stable – apart from a spike in 2009 at the introduction of the Cervical Check Screening Programme – up until 2013. Since then there has been a significant decrease in the number of women having tests in the clinic. In the last two years Cervical Check has introduced Human Papilloma Virus (HPV) typing into the management algorithm for follow up of abnormal smear tests. This has reduced the need for repeat testing when minor abnormalities are found and also for annual smear tests post treatment of more significant abnormalities.

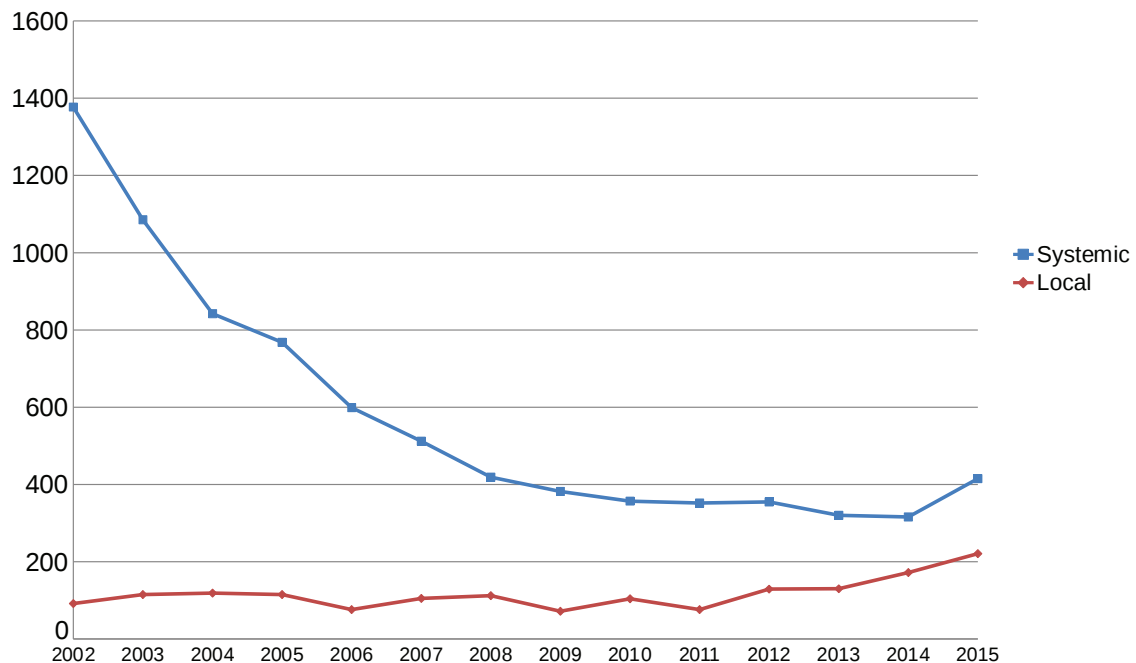
Smear Tests



HRT Prescriptions

The only service in which we have seen an increase is the number of Hormone Replacement Therapy (HRT) prescriptions we issued during 2015. The number of women using HRT dropped dramatically following results from the Women's Health Initiative study in 2002 and the Million Women Study in 2003.

HRT Prescriptions



However both studies had significant flaws, and in more recent years it has been accepted that for most symptomatic perimenopausal women the benefits of HRT outweigh the risks. In the clinic we discuss personal medical history, family history, lifestyle including diet and exercise before considering treatment. For those who are suitable for HRT, it can be prescribed in patch, tablet or gel form with the progesterone component also available in the form of the Mirena intrauterine system. Women with significant vaginal symptoms can also have local vaginal pessaries in addition to their systemic HRT. Older women for whom systemic treatment may not be appropriate often find local vaginal treatment extremely useful.

Dr Shirley McQuade,
Medical Director
June 2016

Counselling Services: An Overview

General Counselling:

Our general counselling service is available to anyone who recognises the benefits of confidential, professional therapy. During 2015 we continued to feel the impact of austerity, with fewer numbers of clients attending for general counselling. We are aware of the need to keep our counselling fees at a competitive level, and are in fact one of the more affordable providers in the city centre. Despite this, pressure on discretionary spending often means there is little or no financial resource available to them to enter into a counselling relationship.

It is still possible, due to lack of legislation, to offer counselling services without appropriately trained therapists, which leaves clients open to potentially serious harm. At Well Woman we meet all professional and ethical criteria with ongoing training, supervision and workplace support for our counsellors, all of whom are IACP-accredited.

Consultant Psychiatrist Dr Eimer Philbin Bowman offers services which deal with vaginismus, eating disorders and phobias in our Pembroke Road clinic.

Crisis Pregnancy Counselling:

Our counselling service supports the client's right to make decisions regarding her pregnancy around the options of parenting, adoption and abortion. Counselling is client-led, non-directive and legally compliant.

Crisis pregnancy can result from failed contraception, a change in relationships, rape or incest. A planned, wanted pregnancy can also become a crisis through change of circumstances in the client's life: a job loss, a relationship breakdown or the diagnosis of a serious foetal abnormality.

Clients are welcome to attend alone, with their partner or with family members. The client's rights are uppermost throughout the session, but time is given to support the people who attend with her. The client is welcome to attend for as many counselling sessions as she needs to explore this personal dilemma.

The Protection of Life During Pregnancy Act, 2013, defined the circumstances where an abortion may be lawful, as well as the complex processes through which an assessment must be made by healthcare professionals. It has a very narrow focus, however, and does not allow abortion in circumstances of rape or foetal abnormality, or where a woman's health will be adversely impacted by continuing with her pregnancy.

We have found that since the introduction of this Act some clients assume that abortion is now readily available to them. Further distress is experienced when it is brought to their attention that there are strictly limited circumstances in which it may be permitted.

Many clients also express concern that they are financially unable to continue with a pregnancy. It is of great concern that clients need to put their financial position before their ethical or personal well-being in this critical time.

The HSE Crisis Pregnancy Programme continued to provide training modules in conjunction with NUI Maynooth on crisis pregnancy. This training has been further extended by the introduction of 'Master Classes' which bring deeper learning to specific aspects of crisis pregnancy, and reflect the wider cultural and religious realities of modern Ireland.

The combination of financial pressure, and the emotive political and social debate on abortion in Ireland can lead clients to avail of inappropriate medication via the internet, or to travel for termination without support from services in Ireland. This is a worrying dimension to the care of women with crisis pregnancy. Should they self-medicate, or travel for termination without an opportunity to explore all the options available to them, they can experience further isolation, and there are obvious health risks in taking unlicensed medication sourced online.

During 2015, the H.S.E. Crisis Pregnancy Programme launched its Self-Assessment Framework of quality management and continuous improvement. This applies to all funded organisations, and it has challenged all of us. It can only, however, be a positive development, and one which should provide reassurance to women seeking services.

Post Termination Counselling

Debate at political level, as well as media coverage of abortion, also impacted on clients who had experienced termination, bringing them back to therapeutic support to re visit their experiences and work through the emotions they feel.

Whilst women do not avail of abortion aftercare services in the numbers we would hope to see, we note from our statistics an increase in clients using both medical and counselling services. We have also seen a small increase in the number of men using our post-abortion counselling service; this is a welcome indication that anyone touched by the experience of termination can be supported through appropriate counselling supports.

Hopefully this suggests that the still present stigma of abortion in Ireland and the secrecy for clients when they return to family, friends and work conditions, is lessening.

The H.S.E. Crisis Pregnancy Programme maintained its promotional commitment to ensure wide media awareness for women of the availability of support services in Ireland. Termination remains an emotive issue however, and it is of utmost importance that a client can attend a Well Woman clinic and be assured of confidential and professional counselling. It is also of relevance to our multi-national clients who may have very little support in this country.

Well Woman liaises with other professional service providers, facilitating information and knowledge flow to maintain best practice. Similarly, continued engagement with our funders, the HSE Crisis Pregnancy Programme, and partaking of ongoing training, ensures professional development for our counsellors, bringing best practice to our service.

Catherine Clements
Head of Counselling Services,
June 2016

Patient Satisfaction Survey: Summer 2015

In Summer 2015 we conducted our 2nd Annual Patient Satisfaction survey, to measure the level of happiness – or otherwise – felt by our patients, and to seek their feedback and suggestions as to service improvements they would like to see us make.

A survey questionnaire was sent to every patient who had attended any of the three Dublin Well Woman Centre clinics from 1st January through 30th June 2015, a total of 5,030 patients (a lower number than in the same period in 2014, due to reduced opening hours in two of our clinics).

The response rate of 32% - which represented over 1,600 patients - was a very positive indicator of how engaged clients are with the Dublin Well Woman Centre.

There was a good spread of respondents in terms of age category, including:

- 18.83% in the 18 – 25 range
- 46.85% in the 26 – 35 age range
- 20.62% in the 36 – 45 age range

Key highlights include the following:

- 95% of respondents felt that the Dublin Well Woman Centre understands their health needs.
- 90% felt they were treated with courtesy and respect by Reception staff.
- 85% were able to get an appointment at a time that suited them.
- 80% indicated that the Clinic Nurse listened to them with 80% indicating that the Clinic Nurse was friendly and helpful.
- 93% said they would be likely to recommend the Dublin Well Woman Centre to a friend, family member or colleague.

Whereas most of the questions were qualitative, we used the final question to ask them for *their* recommendations as to what the Dublin Well Woman Centre can do to improve the quality of our service to patients.

Most of the verbatim comments were very positive. Some patients expressed concern over the openness of our Reception desk, or frustration over delays in getting through by phone when they initially sought to make contact with us for an appointment. This is a selection of what they told us:

I cannot rate the Dublin Well Woman Centre highly enough. I recommend to all my friends and have never had a bad experience. All members of staff are extremely friendly, bubbly, helpful and informative. They always put me at ease during appointments and there is a very nurturing atmosphere in the whole place. All they are short of doing is giving you a big hug! I wouldn't go anywhere else.

I've always found your customer service to be excellent. The environment is welcoming, respectful and professional. I've been asked helpful and thoughtful questions, offered advice and made positive changes thanks to the guidance of your doctors and nurses. I've always felt 100% cared for - in a way which no GP has done for me. I genuinely sing the praises of the Well Women Clinic...

Very impressed with the service I was provided with.

I have always been very happy with the service provided as I feel your knowledge and understanding of woman needs is excellent and very reassuring.

Really good experience considering it was a smear test. Haven't been in a few years, will definitely continue getting done there from now on.

None. Very efficient service and professional, friendly staff. It was my first smear test and I was very nervous and the nurse could not have been more understanding, patient and kind.

I have never had a bad experience here. Everyone is lovely and efficient. Only critical point is that at times the doctor can be very quick to move you on and out of the office.

I find the Well Woman Centre perfect in every way. Have never had even the slightest problem with it and never came away without feeling like I was being well looked after.

Get a PR Firm behind you promoting Women's Services as you operate a fantastic service for Women.

I wouldn't go anywhere else when I have gynecological problems. I always feel safe in your hands.

Just wanted to say your nurse was amazing!!! Such a lovely, warm-hearted and kind woman. I was very worried / upset going in and she made the whole experience bearable and normalised everything. So thank you.

I attended for a free cervical check smear and I was extremely well looked after by a brilliant doctor.

I feel the receptionists could be friendlier as I sometimes feel awkward dealing with them. Also when making last appointment I was on hold on the phone for nearly ten minutes. Any doctor I've dealt with has been excellent though, so I would continue to attend because of the excellent service from the doctor.

All round great service, very hospitable, extremely welcoming and concentrates 100% to patients. Could not improve if they tried. Perfect.

It's really nice to have a doctor who is not native in English - in my case, as I'm French, it was really nice to deal with Doctor Sandra, it made communication much easier !

You provide an excellent service - it was the first time I explained my symptoms to a doctor and they fully understood where I was coming from.

The feedback received was hugely valuable, and was discussed by the Board of Directors and senior management, who will use it to drive continuing improvement in the Dublin Well Woman Centre. We are grateful to all our loyal patients for their feedback.

Alison Begas
Chief Executive
June 2016

Board of Directors 2015

Ms Jan Richards

Jan is currently Head of Insights and Planning at Dublin Airport where she is responsible for managing the Dublin Airport brand and for the research programme – over 30,000 interviews/pa.

Previously, Jan was the Senior Planner with MCCP Planning and Insights, where she worked with client companies in brand development and positioning, qualitative research and insight generation. Jan worked in advertising in London, Budapest and Dublin for 16 years; she was Planning Director of Owens DDB in Dublin for 2 years, and also lectured in Marketing and Communications at Fitzwilliam College, and as a guest lecturer with D.I.T. She also facilitates on the adoptive parenting courses run by the H.S.E. for prospective adopters.

Breda Brown (retired from the Board, June 2015)

Breda is co-founder and Director of Unique Media, a media consultancy firm which provides a range of services including Public Relations, crisis management, media training, digital / social media management, advertising, creative, production and broadcast consultancy. Prior to establishing Unique Media, she worked as a print and radio journalist with a number of media outlets in Ireland. She holds a BA in Communication Studies and MA in Journalism, both from Dublin City University.

Breeda Cunningham (retired from the Board, December 2015)

Breeda is a Chartered Accountant, who trained with PricewaterhouseCoopers. During her time in practice she was involved in the audits of banks, stockbrokers, manufacturing and distribution companies. Post qualifying Breeda has worked for a number of large organisations including an investment bank in London and an insurance company and insurance broker in Ireland. Breeda currently works in Dillon Eustace where she assists clients in interpreting and adhering to regulatory obligations.

Pat Edmondson

Pat acts as Partnership Development Manager leading corporate fundraising for Ireland's fastest growing educational charity for youth, Young Social Innovators. She is an experienced business development professional with over 20 years' experience applied across multiple sectors including not-for-profit, biopharma / biomedical, technology, engineering and the service industries in Ireland and internationally. Over her career Pat has held

manager and director level sales and marketing positions with a number of blue chip corporations, served as a mentor for Dublin City Enterprise Board and owned her own business. Pat holds an undergraduate Science Degree and an MSc. in Manufacturing Engineering from Trinity College Dublin. She also has qualifications in Business Management and Business Innovation from both TCD and DCU.

Pamela Iyer (joined Board November 2015)

Pamela is a solicitor, admitted in England and Ireland and has been practising as a solicitor since 1998. During this time, she has worked in Dublin, London and the Far East in the area of corporate & commercial law, in particular the areas of project finance, public-private partnerships, construction and engineering. She has always worked in private practice including Allen & Overy in London and Arthur Cox in Dublin and in-house, more recently with PM Group. She is studying for a MSc and is also director of Raglan Capital Limited with a particular focus on pharma ventures..

Martha Kavanagh

Martha is head of media relations for a global nutrition company headquartered in Ireland. In this role, she is responsible for corporate and financial communications, reputation management and the group's internal and external digital platforms. Previously, she was a board director and spent ten years with a leading Irish communications consultancy where she led a commercial team and worked across sectors including food, health, retail and leisure. She also worked overseas in a marketing role with an Irish semi-state for a number of years. A graduate of DCU, she holds a BA Applied Languages, a MA in International Relations as well as a diploma in Digital Marketing.

Amelia Sorohan (joined Board July 2015)

Amelia is a solicitor, qualified in Australia and Ireland, who trained with Arthur Cox solicitors in Dublin. During her time in private practice Amelia advised clients on commercial and contract law matters including tendering, confidentiality agreements, termination, insolvency and payment disputes, intellectual property, insurance, limitations on liability, employment law, data protection and regulatory matters. Since leaving private practice, Amelia has worked as in-house legal counsel in the public sector for the Central Bank of Ireland and currently works in the private sector for an international Irish engineering and project management company, PM Group. Her experience also includes acting as a director of a not-for-profit community childcare centre in Jobstown, Dublin. She holds degrees in law, business and womens' studies.

STATEMENT OF COMPREHENSIVE INCOME

For the financial year ended 31 December 2015

	2015	2014
	€	€
INCOME	<u>1,975,797</u>	<u>2,081,963</u>
GROSS PROFIT	1,820,072	1,910,066
EXPENSES		
Staff costs	(1,323,390)	(1,583,968)
General overheads	(325,918)	(344,683)
Depreciation	<u>(66,405)</u>	<u>(71,510)</u>
OPERATING SURPLUS	104,359	(90,095)
Interest payable and similar charges	<u>(8,785)</u>	<u>(9,635)</u>
PROFIT/(LOSS) ON ORDINARY ACTIVITIES BEFORE TAX	95,754	(99,730)
TAX ON PROFIT ON ORDINARY ACTIVITIES	-	-
PROFIT/(LOSS) ON ORDINARY ACTIVITIES AFTER TAX	95,754	(99,730)
RETAINED PROFIT BROUGHT FORWARD	<u>159,327</u>	<u>259,057</u>
RETAINED PROFIT CARRIED FORWARD	254,901	159,327

All recognised gains and losses have been included in the profit and loss account.

On behalf of the Board

MS PAT EDMONDSON
Director

MS JAN RICHARDS
Director

STATEMENT OF FINANCIAL POSITION

As at 31 December 2015

		2015	2014
	Notes	€	€
FIXED ASSETS			
Tangible assets	7	<u>156,120</u>	<u>213,835</u>
CURRENT ASSETS			
Stocks	8	23,469	17,524
Debtors	9	45,708	44,597
Cash at bank and in hand		<u>227,259</u>	<u>70,937</u>
		<u>296,436</u>	<u>133,058</u>
CREDITORS (amounts falling due within one year)	10	<u>(150,966)</u>	<u>(128,150)</u>
NET CURRENT ASSETS		<u>145,470</u>	<u>4,908</u>
TOTAL ASSETS LESS CURRENT LIABILITIES		<u>301,590</u>	<u>218,743</u>
Financed by:			
CREDITORS (amounts falling due after more than one year)	13	<u>46,689</u>	<u>59,416</u>
		<u>46,689</u>	<u>59,416</u>
RESERVES			
Special reserves fund	17	-	-
Profit and loss account		<u>254,901</u>	<u>159,327</u>
		<u>254,901</u>	<u>159,327</u>
		<u>301,590</u>	<u>218,743</u>

On behalf of the Board

MS PAT EDMONDSON
Director

MS JAN RICHARDS
Director

The Well Woman Team

(at December 31st, 2015)

Chief Executive:

Alison Begas

Medical Director:

Dr Shirley McQuade

Administrator:

Post vacant

Accounts Manager:

Siobhan Wright

Bookkeeper:

Rachel Carey

Operation Manager:

Josephine Healion

Doctors:

Dr Fadzilah Ab Aziz

Dr Gillian Darling

Dr Sandra Hubert

Dr Vina Kessopersadh

Dr Lisa O'Neill

Head of Counselling

(Designate):

Catherine Clements

Counsellors:

Anne Feeney

Michele Pippet

Paula Tierney

Nurses:

Betty Coggins

Anne Crawford

Gay Greene

Tanya Kearns

Geraldine Little

Norah McPeake

Shirley O'Malley

Simeon Orr

Receptionists:

Yvonne Dowling

Olive Fanning

Patricia Keogh

Siobhan Laherty

Miriam McCann

Doretta McNally

Angela McNally

Fionnuala O'Flaherty

Andrea O'Neill

Linda Scanlan

THE
WELL
WOMAN
CENTRE

The Dublin Well Woman Centre

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