

Company number: 2954744

Charity Number: 1040496

# Social Action for Health

Report and financial statements  
For the year ended 31 March 2022

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<b>Company number</b>	2954744
<b>Country of incorporation</b>	United Kingdom
<b>Charity number</b>	1040496
<b>Country of registration</b>	England & Wales
<b>Registered office</b>	Brady Arts Centre, 192-196 Hanbury Street, London, E1 5HU

#### **Trustees**

Trustees, who are also directors under company law, who served during the year and up to the date of this report were as follows:

Hannah Stranger-Jones	Chair
Ryan Barnett	Treasurer
Pooja Shah	
Harveen Udhi	Resigned 27 September 2022
Emma Backhouse	Appointed 8 August 2020
Alex Murtough	Appointed 1 December 2021
Karin Pappenheim	Appointed 1 December 2021
Lewis Batkin	Appointed 27 September 2022
Helena Roy	Appointed 27 September 2022

#### **Key management personnel**

Chief Executive	Ceri Durham (interim until May 2021 and substantive thereafter)
Finance Director	Clive Cartwright (until July 2021)

**Accountants** NfP Accountancy Limited. Appointed 1 October 2021

**Bankers** NatWest plc., 403 Bethnal Green Road, London, E2 OAF

**HR and legal** Mentor, 100 West George Street, Glasgow, G2 1PP

**Independent Examiner** Shruti Soni, T/A Charity Accountant

# SOCIAL ACTION FOR HEALTH

## CHARITABLE OBJECTIVES

As set out in our Governing documents, our Charitable Objectives are:

1. **To preserve and protect the good health** of the public within London and elsewhere within England;
2. **The relief of unemployment** for the benefit of the public in such ways as are thought fit, including assistance to find employment; and
3. **To develop the capacity and skills** of members of socially and economically disadvantaged communities **to enable them better to identify and meet their needs** in order to participate more fully in society.

## VISION AND MISSION

**A world where unfair and avoidable health inequalities no longer exist.**

Our mission is to support and address the priorities of those most affected by health inequalities, and to champion the case for wider structural and societal change.

## THEORY OF CHANGE

**Poverty, discrimination, prejudice and inaccessible systems across society are leading to an unequal distribution of good health.**

**The more control people have over their lives, the better their health and wellbeing.**

We provide services and support within communities most affected by health inequalities to:

Increase people's ability to **identify personal priorities** and goals

Increase people's **confidence to make decisions** about their health and wellbeing

Increase people's ability to vocalise their preferences and **act on their decisions**

The increased capacity and better health of individuals leads to a reduction in avoidable health inequalities for them and their communities.

## Welcome from the Trustees and Strategic Update

It is with great pleasure that the Trustees present their report and the financial statements for the year ended 31 March 2022.

Social Action for Health has worked with multi-ethnic communities in east London for over 35 years to address the impact of the health inequalities that are so deeply established within our society. We continue to believe that poverty, discrimination, prejudice, and inaccessible systems across society are leading to an unequal distribution of good health. Following the COVID-19 pandemic, we have seen an increased awareness across society of the social determinants of health, the impact of racism and discrimination on wellbeing. However, we are also seeing the impact of political uncertainty, fuel poverty and the cost-of-living crisis on our staff and beneficiaries, factors only likely to increase the health gap between the richest and poorest in society. In this report, we report on our progress against our 2021-22 priorities, the highlights and challenges and set out our vision of how we will continue to work in line with our charitable objectives and address our priorities.

Reference and administrative information set out on page 1 forms part of this report. The financial statements comply with current statutory requirements, the memorandum and articles of association, the requirements of a directors' report as required under company law, and the Statement of Recommended Practice - Accounting and Reporting by Charities: SORP applicable to charities preparing their accounts in accordance with FRS 102.

## Strategic Direction 2021-22

Financial Year 2021-22 was a year of change for Social Action for Health. Ceri Durham was appointed as substantive CEO, Hannah Stranger-Jones became the new Chair. As the country started to wonder what a post-COVID 19 world might look like, we took the opportunity to reflect on what we do well as an organisation, what we had learned in the pandemic and what kind of organisation we wanted to be going forward.

The entire staff team and trustees were involved in an extensive consultation and design process to agree the strategic direction of Social Action for Health over the next 2-3 years. The strategy and was approved by the Board at the end of September 2021.

The organisation has committed to supporting people in the following health contexts:

1. Long-term health conditions, including people living with cancer, mental health conditions and long-Covid;
2. Pregnancy, birth and early-parenthood, and
3. developing our expertise around youth health.

In each of these areas, Social Action for Health will provide **direct provision of health-related services and support** to beneficiaries who are at the greatest risk of health disadvantage and participate in **research and community engagement** which supports the delivery of those services and allows us to amplify the voices of those most affected. Although the youth health strand is new, the other two contexts build on our existing expertise and ongoing commitment in these areas. They reflect two life-course events when people are most likely to access health services and where the wider social contexts and social determinants of health play out in well-evidenced experiences of preventable health inequalities.

## APPROACHES

We regularly reflect on what works well when supporting our community. Our current approach is underpinned by three key concepts:

### Community

We bring people and organisations together to share experiences and build a community around each of our participants.

We know isolation is damaging to health, wellbeing and self-confidence, so all of our work involves connecting people and nurturing a sense of belonging for all.

### Knowledge

We support people to act on the priorities in their lives by equipping them with knowledge, skills, support networks and experience.

We believe that information should be widely accessible, and support people to share their knowledge and learning to benefit the wider community.

### Holistic Health

We accept the World Health Organisation's definition that "health is a state of complete physical, mental and social wellbeing".

We focus on matters relating to health and wellbeing to support people to develop the skills and abilities they need to make informed decisions in all areas of their lives.

## VALUES

Our values reflect how we work with people across all our projects:

### CURIOSITY

We are always seeking to improve our understanding of what we should offer to the community and how to effect change. We create and celebrate opportunities to share findings and to learn together.

### RESPECTFUL

We support people's right to make informed decisions and have control over their own lives to the greatest extent possible. We do not tell people what they should do.

### ACCESSIBILITY

We believe in breaking down social barriers that prevent access to good health and wellbeing. We consider cultural, language and physical requirements across all our activities.

### EQUALITY

We know how transformative it is to hear from someone with similar experiences and be treated as an equal. We bring people together to share their stories and support one another.

### COLLABORATION

We believe that people and communities are stronger and more effective together. All of our work brings together and builds on the skills and strength of local people and organisations.



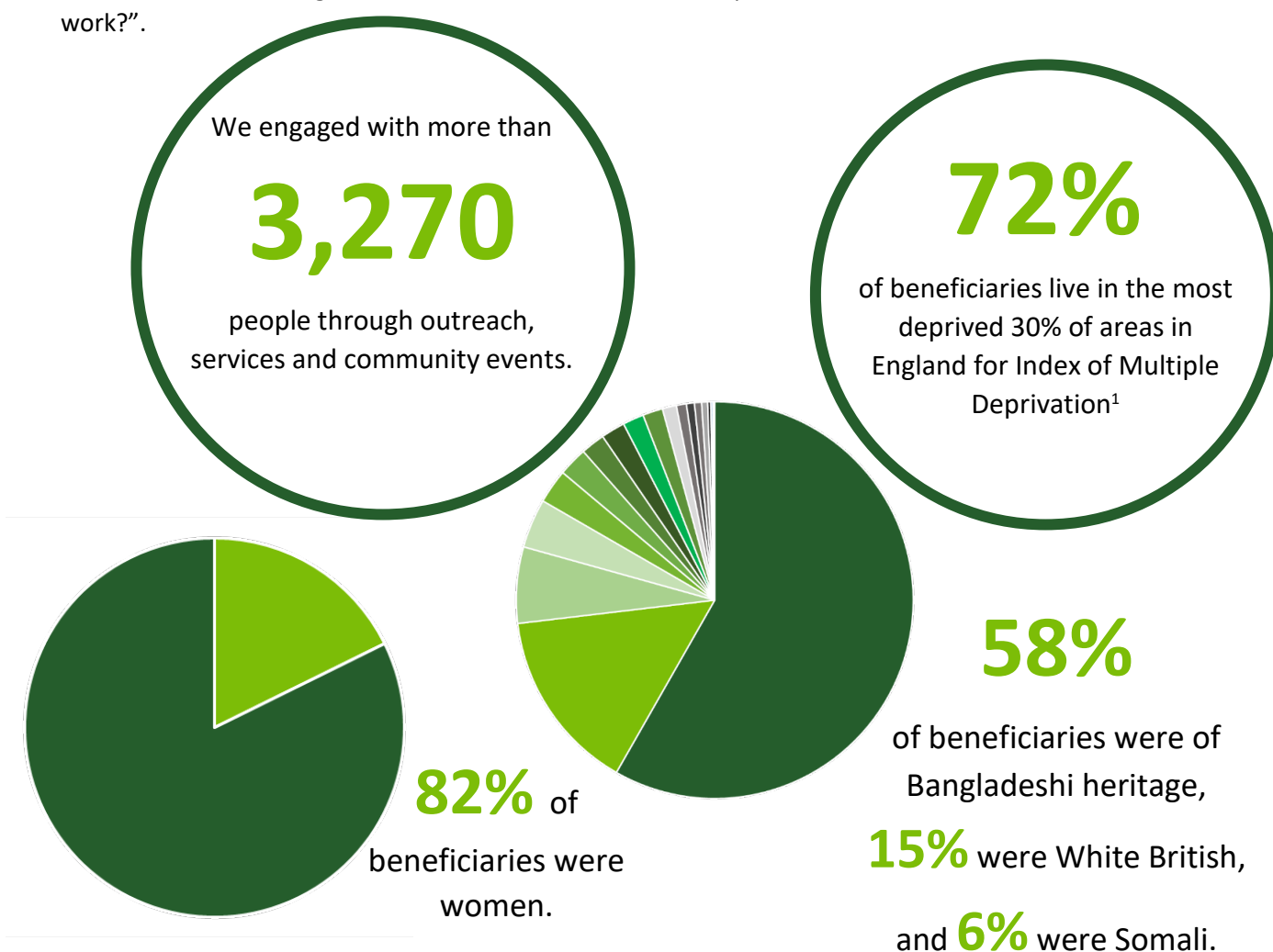
## Strategic Aims

Our core approach remains empowering, not imposing, and will allow us to achieve our strategic aims of supporting people to:

1. identify personal and community priorities and goals
2. make decisions about things that affect health and wellbeing
3. express their preferences; and
4. act on their decisions.

The organisational consultation demonstrated considerable support for Social Action for Health to continue to provide employment and work-experience opportunities for local people from disadvantaged local communities.

There was also significant commitment to **research and public engagement** work where it contributes to the core strategic aims (by funding, resources or otherwise), but not where the research simply uses the community as a research resource with no contribution to the community. We are committed to not being a 'market research' agency simply feeding back what we have found. Rather, we have agreed that there should always be the scope to act as a result of the research and / or academic partnership. The rule-of-thumb question remains "will this research leave individuals and communities stronger and more able to take action to improve their health as a result of our work?".



<sup>1</sup> Source: <https://datakind-uk.github.io/community-lens/>

## Progress against 2021-22 priorities and looking forward to 2022-23

To achieve our strategic aims, the Board agreed that the Organisation should continue to build on progress made in previous years and deliver against the priorities set out below.

The intention is for the organisation to become more agile, volunteer-and community-oriented. Focus will be on training and developing volunteers and casual workers representative of the communities of east London who are most at risk of health disadvantage. This includes specific minoritized ethnic groups, those who are economically and socially disadvantaged, and those most subject to systemic discrimination.

2021-22 Priorities	Progress and looking to 2022-23
To agree a new strategy which is relevant in a post-Covid world, enabling us to address the needs of those most affected by health inequities	<b>This has been very successful</b> as described above. The refreshed vision, mission, Theory of Change and strategy reflects what we do and why we do it, as well as the impact we wish to see.
To diversify the groups and communities we work with, and to fully reflect the demographics of east London in our beneficiaries, staff team and Board.	<b>This has been more challenging, and will remain a key priority in the year ahead.</b> We will be specifically seeking to increase the number of men and young people who are beneficiaries. We will also establish a <b>Community Advisory Group</b> to influence all our work, and to continue to make progress on the <b>diversification of the Board</b> , particularly focused on welcoming trustees with lived experience of the issues we address.
To continue to improve project management and financial management systems and processes.	<b>This is an ongoing priority.</b> Significant progress has been made on financial management by increasingly integrated use of <b>QuickBooks</b> . We are also delighted to record that we have achieved <b>Cyber Essentials</b> accreditation.
To measure our impact to be able to better demonstrate and talk about our work.	<b>This is an ongoing priority.</b> Our updated strategy and vision have improved our ability to measure our impact at all levels of the organisation, and agreed organisational impact measurements are now integrated into all project delivery work. We have set up an Impact and Strategy Committee to focus on this goal.
To ensure all staff are accessing opportunities for formal and informal training and learning.	<b>Progress against this priority has been good.</b> We ran comprehensive training for volunteers and delivery staff on all strategic and operational areas including health and safety,

	safeguarding, and areas of responsibility in the organisation. We will be looking to develop an HR and People Strategy in the coming year.
<b>Continue to diversify income streams and increase funding from trusts and foundations.</b>	<b>Employing a full-time, experienced fundraiser ensured great progress was made against this priority.</b> Trusts and Foundations formed 34% of our income over the past year compared to 7% in 2020-21. We will continue to seek funders with aligned goals to enable us to deliver services and support to our beneficiaries.
<b>Working towards unrestricted reserves position of £250,000.</b>	Unrestricted reserves at the close of 2021-22 were £195,768. The organisation will continue to aim to hold reserves of £250,000.



# Key areas of work and projects over the past year

## Long-term Health Conditions:

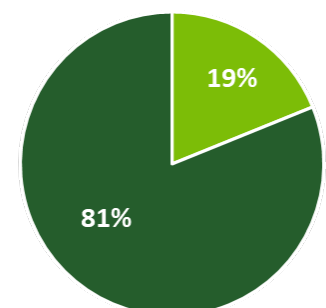
We know that there are many factors that result in people experiencing long-term health conditions, and that managing them is complex. Understanding and responding to the specific needs of each community is central to our approach and success. Over the past year we have run six projects all supporting people to address long-term health conditions in different ways.

1. For 22 years, our project **Good Moves** has helped people in Tower Hamlets manage their long-term health conditions and overall health. The project supports adults in Tower Hamlets who are living with diabetes, Chronic Kidney Disease, heart disease and/or hypertension through an eight-week course. Over the past year, we supported 389 participants over 30 Good Moves courses in 3 community languages (Bengali, Somali and English). At the end of 2021, Good Moves was shortlisted for the Health and Wellbeing Award at the London Sport Awards and made it into the top 28 out of nearly 300 nominees.

2.



weight management is part of successfully managing many long-term health conditions. We run **Change for Good**, which follows a 12-week NHS approved programme which is designed to help people achieve their personal weight loss goals. We run the course in English and Bengali, online and in-person, and have supported 556 people over the year. Referrals are overwhelmingly received from GPs and Social Prescribers who appreciate the personal service we offer, that it is culturally and linguistically appropriate for their patients.



■ Self-referral   ■ GP or Social Prescriber Referral

3. We know that one of the most beneficial aspects of our work is bringing people together in comfortable, and culturally accessible spaces to learn from and support each other. **Good Friends** offers support and friendship for people who have a long-term physical or mental health condition or disability and feel lonely or isolated. The project offers a one-to-one befriending and group support in Bengali and English and has supported 107 people this year (predominantly Bengali women aged 45+). 53% of participants reported that they were improving the way they managed their long-term condition or illness as a result of being involved in Good Friends. *“I feel that without the Good Friends Peer Support I would have still be in depression and my health would have gone from bad to worse”* – feedback from a Good Friends beneficiary.
4. **My Moves** encourages people aged 50+ who would not usually take part in sports or exercise to become more active and to meet others. As we resumed face-to-face delivery, we increased the number of courses on our My Moves project and delivered courses in Bangladeshi, Somali and Chinese. After six months of outreach and relationship building, we were particularly pleased to have re-engaged with the Chinese Association of Tower Hamlets. The culturally accessible programme uses traditional dance and choreography, ESOL (English lessons) and healthy lifestyle self-management techniques to build esteem and wellbeing. A major element of this programme – developed during lockdown – has been digital inclusion, designed to help people learn how to make GP appointments online. This was so well received and highlighted such need that it is likely to be an ongoing programme of work across all our projects.



*“I really liked the English classes and all the opportunities. I like the exercise and using the laptops. I like how there are many things to do, so I am not bored. The teachers are so good. I am very active now because of the dance and I look forward to the classes. Even if it is raining, I make sure I am there. The communication is very very good. Before starting, I felt the loneliness. Now I don’t feel lonely. I feel more strong, more happy and more active.”*

5. With our friends at **St Mary's Secret Garden**, we ran four **Gardening** programmes for people in Hackney who were living with a long-term health condition, or who were bereaved. The project provided inclusive self-management and horticultural therapy to 32 direct beneficiaries. Getting out and about in the garden and then sharing a simple meal, were identified as highlights by beneficiaries.



6. We were delighted to have obtained specific funding to relaunch our work supporting Black, Asian and Minoritised Ethnic men and their mental health and wellbeing. Our **Wellbeing for Black, Asian and Minoritised Ethnic Men** project will combine research of lived experience of sub-optimal mental health and access to appropriate support, with social and related groups which participants have identified as being beneficial to their mental health and wellbeing. The flexibility of the project means that the project will be able to adapt and evolve over time to ensure that users will remain central to defining problems and identifying solutions to the mental health challenges which they face.

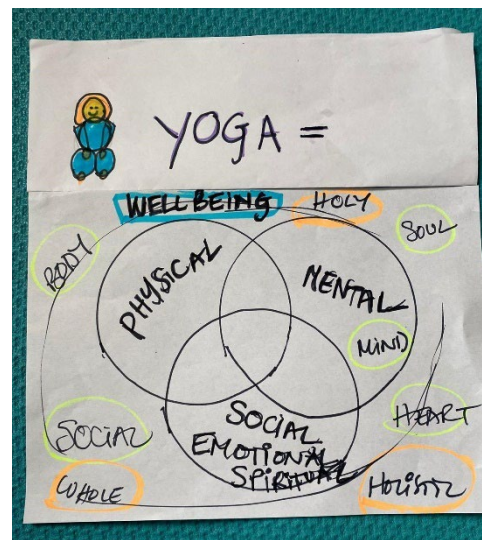
## Pregnancy, Birth and Early Parenthood:

Wider inequalities in healthcare and the effects of social determinants of health are well reported, including the inequalities in mortality rates for women and their babies reported by MBRRACE-UK reports.

Social Action for Health has a long history of supporting women from disadvantaged groups in pregnancy and early parenthood. Over the past year, we have continued to run our **Sure STEPS** project. The project matches women, new mothers and parents struggling to deal with the challenges of becoming a parent to trained volunteers in the community for emotional and practical support for those facing difficulties including domestic abuse, homelessness, loneliness and isolation and mental health difficulties. We have supported 25 women from Tower Hamlets. The support is long-term and flexible depending on the requirements of the mother and the support the volunteer is able to provide. We will provide support up until a baby is two years old (or longer if required) and are unique in the sector in trying not to work to strict cut-offs, but allowing a trusting relationship to grow and to end organically.

This year, in addition to the 1-2-1 support we piloted online yoga and wellbeing sessions for our Sure STEPS mums and volunteers to provide a safe, accessible space for connection, rest and relaxation, and a chance for those in a constant care-giving role to give care to themselves.

*“The yoga has created a sense of support between others and also a way for me to try small movements that I would have refrained from initially. The session also helps me move my body differently to help relax certain tensions.”* feedback from a Sure STEPS mum.



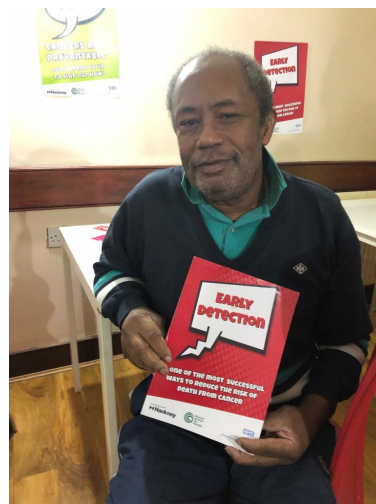
Focus over the next year will be about creating physical, in-person ‘hubs’ and social spaces where parents can meet and socialize with others in similar positions to them. The one-to-one support will continue, but post-lockdown we are recognizing an increased demand for spaces such as these, including with support in different languages. We hope these hubs will also give our volunteer peer-supporters and mothers a goal to aim for, with parents becoming well enough and confident enough to venture out and access wider support.

## Community Research:

We have been delighted over the past year to have been able to continue and develop our Community Research work, building on authentic connections into communities. Particular highlights and larger scale projects have been set out below.

We have been commissioned by multiple partners to gather in-depth insight on community **health concerns, vaccine uptake**, and the **impact of the COVID-19 pandemic**. We collaborated on a project enhancing COVID-19 vaccine confidence across ethnic minoritised communities, explored COVID-19 vaccine uptake and trust in Tower Hamlets, and spoke to 1,612 Bangladeshi families in Tower Hamlets about their experiences during the pandemic.

We ran a short-term **Cancer Awareness** project in Hackney which increased awareness of the general signs and symptoms of cancer, increased confidence in seeking earlier medical interventions, and raised awareness and encouraged attendance at recommended cancer screenings. We held outreach stalls, visited shops and community venues, ran a poster campaign, and convened two focus groups where participants were encouraged to share their experiences and concerns in relation to cancer.



We continued to work with Queen Mary University of London on the **Genes and Health** research study. Genes and Health is the biggest scientific study in the world researching genetics in people of Bangladeshi and Pakistani heritage to better understand why these communities experience particularly high rates of poor health and disease in the UK. To raise awareness of the study, we launched professionally produced videos, ran social media campaigns, and made a measured return to community venues once it was allowed, and as community venues re-started welcoming outside groups again.



## Consultancy, Management and Training

Over the past year we have continued to work closely and in collaboration with a number of institutions, community and voluntary sector organisations through formal and informal partnership working, community networks or by providing strategic or similar input. This will continue to be a key feature of the way we work. Some examples of joint activities were with St Margaret's House, Queen Mary University of London, Tower Hamlets Carers Centre, St Joseph's Hospice, CCGs and GP surgeries and Poplar HARCA.

Our **Tower Hamlets Health and Advice Link (THHAL) consortium project** came to a close. We had led the project alongside four advice agencies; the Bromley by Bow Centre, Limehouse Project, Citizens Advice East End and Island Advice Centre for a number of years, but it was decided not to pursue this work once the contracted period ended. We are very proud of all the work carried out over the years, and will seek other opportunities in future which continue to reflect that income is one of the main social determinants of health.



## Financial review

There were no significant events during the year that affected the performance of the Charity. Although income was down compared to last year, receipt of grants and tight management helped maintain a good surplus and cash position to support the charity as it moves into next year.

Social Action for Health made a surplus of £208,932 (2021: £116,705). This includes net expenditure on unrestricted funds of £20,073 after transfers (2021: net income of £72,135), and net income in restricted funds of £229,005 (2021: £44,570).

Total income in the year decreased to £852,273 (2021: £959,956). Total expenditure also significantly decreased to £643,341 (2021: £843,251). This was achieved mainly by staff savings and by terminating the lease of our Hackney premises. The registered and sole operational address for the organisation is now in Brady Centre, Tower Hamlets.

The reduction in expenses combined with successful trusts and foundation fundraising has increased total reserves to £470,591 (2021: £261,659) of which £195,768 are unrestricted (2021: £215,861)

For the first time, Social Action for Health employed a full-time fundraiser with a focus on raising funds from trusts and foundations. This helped significantly to diversify the income of the charity to a split of 46% Grants and Donations (£408,043) and 54% Contracts and SLAs: (£481,712). The charity observes and complies with the relevant fundraising regulations and codes. During the year there was no non-compliance of these regulations and codes and Social Action for Health received no complaints relating to its fundraising practice.



## Reserves policy

Proactive, day-by-day cash flow management alongside contract and resource management ensures that Social Action for Health is a going concern.

In the short term, this is supported by strong cash reserves, strong cash flow management and based on committed contractual income and risk assessed new income. Cash flow is forecasted to remain positive until at least June 2024.

We aim to always hold at least three months of running costs plus redundancy and related costs in the event a closure is required. The trustees have identified that this (calculated to June 2024) is £137,746. This is significantly higher than the amount identified last year (£115,000) because of the length of service and age of employees who would be entitled to increased statutory redundancy pay, plus inclusion of a significant 'buffer' to reflect uncertain times where inflation is high.

The Trustees continue to aim to hold unrestricted reserves of £250,000 to allow for unanticipated spend or emergencies but have agreed that they should not hold significant unrestricted reserves above this level. Rather, such funds should be spent on development of new projects and / or employment of additional staff.

This approach is to underpin strategic business development, ensuring that Social Action for Health can take proactive decisions to invest in developing new projects and services as well as ensuring

there is sufficient cash to support continuity and sustainability through economic and political changes. Reserves will not be used to subsidise contracted service delivery.

The key aim of the charity over the year ahead is to maintain reduced expenditure and increase income to ensure the reserves are not significantly reduced, and over the course of the years ahead can continue to grow. This will lead to the charity being in a more stable position and able to take on more innovative projects which respond to community insights.

## Going concern basis of accounting

The trustees have considered the underlying assumptions; the level of confirmed funding agreed at the date of approval of these accounts and assessed the financial position for reasonableness. The trustees have considered whether there are any material uncertainties that may cast doubt on the charity's ability to continue to adopt the going concern basis of accounting for a period of at least twelve months from the date when the financial statements are authorised for issue. The trustees are satisfied that although funding needs to increase in the year ahead and is likely to be challenging in light of the cost-of-living crisis and ongoing political turmoil, scrutiny over the past few years shows this is no different to previous years. With the 'inflated' reserves position as a benchmark, building in predicted inflationary increases and adding an additional 10% contingency, combined with continued careful management, there are no such material uncertainties which mean the charity will not be able to meet its liabilities when they become due.

Income and expenditure for 2022-23 and beyond will be scrutinised monthly by the senior management team, the Finance and Governance Committee and at quarterly board meetings to ensure all liabilities can be paid when they fall due, and that appropriate actions can be taken to manage the finances in the short and longer-term. We are currently seeking a new treasurer to be able to assist even more proactively with these functions.

## Principal risks and uncertainties

The Trustees have considered what risks the charity faces and believe these to be principally relating to uncertainty of long-term funding for the organisation and the knock-on consequences this may have.

Risks	Mitigations
1. <b>Unable to generate sufficient income</b> to cover desired charitable activities, especially over the longer-term in an increasingly challenging funding environment.	<b>Mitigation:</b> In light of refreshed theory of change and strategy, complete an updated income generation and fundraising strategy to determine staff and operational team requirements to ensure diverse income sources over long term.
2. <b>Key personnel risk</b> – there is risk to operations and service delivery in the event key personnel left, or were unable to work.	<b>Mitigation</b> Ensure three month notice periods for all senior managers. Continue to ensure delegated responsibility and wider involvement of trustees in finance and operational procedures. Recruit new treasurer to ensure active board with full access to

	bank and related information.
3. Reserves are needed to be used for day-to-day spending which reduces them below the level in the reserves policy.	<b>Mitigation</b> Careful cash flow management including improved billing and invoice management. Increased use of QuickBooks for reporting and monitoring. Action taken if reserves drop below level in reserves policy.
4. Safeguarding and safety of staff, volunteers and participants.	<b>Mitigation</b> Annual safeguarding training for the entire organisation (including trustees) and ongoing training and monitoring of health and safety obligations and risk assessments in general and as appropriate for projects. Designated Board member responsible for safeguarding. Health and Safety and Safeguarding included as standing item at all Board meetings. Respond to risks identified as appropriate.
5. Trustee and staff skill mix does not reflect balance of community insight and lived experience with professional board skills	<b>Mitigation</b> Carry out skills audit of board and staff team. In recruitment, recruit to reflect gaps and train all trustees on obligations. Set up Community Advisory Group and continually aim to ensure diversity, genuine community engagement, language mix and lived experiences is embedded in all recruitment and activities.
6. Data Breach and Cyber Security breach	<b>Mitigation</b> Continue to have robust IT and related systems in place with skilled Data Protection Lead. Carry out Data Protection Impact Assessments on all projects and respond to risks identified as needed. Continue to maintain Cyber Essentials certification.

## Structure, governance and management

Trustees take overall responsibility for the strategic direction of the organisation as well as ensuring a good legal and good practice framework underpins their role as the employer of staff. The whole board meets at least quarterly to familiarise themselves with Social Action for Health's workings and address acute challenges. Regular meetings are held by the two committees – Impact and Strategy, and Finance and Governance to ensure greater awareness and accountability.

Trustees are invited to attend relevant training as well as sharing learning and skills through facilitated sessions. Training this year will be around safeguarding and financial skills of the Board.

Ceri Durham has been appointed as CEO to lead a team of staff, sessional staff and volunteers to ensure strategic and business development in line with trustee decision as well as service and operational delivery in line with Social Action for Health's charitable objectives. Legally indemnified HR expertise is provided by Mentor.

The organisation is a charitable company limited by guarantee, incorporated on 19 July 1994 and registered as a charity on 31 August 1994.

The company was established under a memorandum of association which established the objects and powers of the charitable company and is governed under its articles of association.

All trustees give their time voluntarily and receive no benefits from the charity. Any expenses reclaimed from the charity are set out in Note 8 to the accounts.

## **Remuneration policy for key management personnel**

We do a market review to set a pay banding for each type of role. The rate employees are paid within this band is based on experience and performance. Trustees approve pay banding and agree remuneration for the CEO.

## **Appointment of trustees**

Trustees are recruited through an advertisement and interview process with the aim of ensuring an effective mix of skills, experience and network connections. There are currently no constitutional provisions for specific trustee appointments.

Four new trustees have been appointed over the past financial year and to date: Alex Murtough, Karin Pappenheim, Lewis Batkin and Helena Roy. The trustees are currently looking to replace the Treasurer who will be stepping down in December 2022.

## **Related parties and relationships with other organisations**

Social Action for Health has a wide range of stakeholders and partnerships that are detailed in our contracting and subcontracting relationships. We work in several informal partnerships and actively pursue a collaborative way of working with other community-based organisations. However, these are not formally contracted and rely on memorandums of understanding and mutual trust and understanding on both sides.

## **Statement of responsibilities of the trustees**

The trustees (who are also directors of Social Action for Health 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).

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 Statement Of Recommended Practice (SORP)
- Make judgements and estimates that are reasonable and prudent
- State whether applicable UK Accounting Standards and statements of recommended practice 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 charity will continue in operation

The trustees are responsible for keeping adequate 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. They 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.

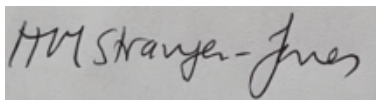
The trustees are responsible for the maintenance and integrity of the corporate and financial information included on the charitable company's website. Legislation in the United Kingdom governing the preparation and dissemination of financial statements may differ from legislation in other jurisdictions.

Members of the charity guarantee to contribute an amount not exceeding £1 to the assets of the charity in the event of winding up. The total number of such guarantees at 31 March 2022 was 7 and has become 9. The trustees are members of the charity but this entitles them only to voting rights. The trustees have no beneficial interest in the charity.

## **Independent Examiner**

Shruti Soni was appointed as the charitable company's independent examiner during the year.

The trustees' annual report has been approved by the trustees on 16 December 2022 and signed on their behalf by



Hannah Stranger-Jones

Chair

## **Independent Examiner's Report to the Trustees of Social Action for Health**

I report to the charity trustees on my examination of the accounts of the company for the year ended 31 March 2022 which are set out on pages 22 to 33.

### **Responsibilities and basis of report**

As the charity trustees of the company (and also its directors for the purposes of company law) you are responsible for the preparation of the accounts in accordance with the requirements of the Companies Act 2006 ('the 2006 Act').

Having satisfied myself that the accounts of the company are not required to be audited under Part 16 of the 2006 Act and are eligible for independent examination, I report in respect of my examination of your company's accounts as carried out under section 145 of the Charities Act 2011 ('the 2011 Act'). In carrying out my examination I have followed the Directions given by the Charity Commission under section 145(5)(b) of the 2011 Act.

### **Independent examiner's statement**

Since the company's gross income exceeded £250,000 your examiner must be a member of a body listed in section 145 of the 2011 Act. I confirm that I am qualified to undertake the examination because I am a member of the Association of Certified Chartered Accountants, which is one of the listed bodies.

I have completed my examination. I confirm that no matters have come to my attention in connection with the examination giving me cause to believe that in any material respect:

1. accounting records were not kept in respect of the company as required by section 386 of the 2006 Act; or
2. the accounts do not accord with those records; or
3. the accounts do not comply with the accounting requirements of section 396 of the 2006 Act other than any requirement that the accounts give a 'true and fair view' which is not a matter considered as part of an independent examination; or
4. the accounts have not been prepared in accordance with the methods and principles of the Statement of Recommended Practice for accounting and reporting by charities [applicable to charities preparing their accounts in accordance with the Financial Reporting Standard applicable in the UK and Republic of Ireland (FRS 102)].

I have no concerns and have come across no other matters in connection with the examination to which attention should be drawn in this report in order to enable a proper understanding of the accounts to be reached.

Signed: *Shruti Soni*

Date 21 December 2022

Shruti Soni FCCA ACIE  
Shruti Soni Ltd  
117a St Johns Hill  
Sevenoaks, TN13 3PL

# STATEMENT OF FINANCIAL ACTIVITIES

(incorporating Income and Expenditure Account & Statement of Total Realised Gains and Losses)

For the year ended 31 March 2022

	Note	Unrestricted Funds 2022 £	Restricted Funds 2022 £	Total Funds 2022 £	Unrestricted Funds 2021 £	Restricted Funds 2021 £	Total Funds 2021 £
<b>INCOME FROM</b>							
Donations and legacies	2	42,109	298,711	340,820	200,665	-	200,665
Charitable activities	3	436,912	74,223	511,135	574,266	180,706	754,972
Investment income: bank interest		18	-	18	-	-	-
Other income		300	-	300	4,319	-	4,319
<b>TOTAL INCOME</b>		<b>479,339</b>	<b>372,934</b>	<b>852,273</b>	<b>779,250</b>	<b>180,706</b>	<b>959,956</b>
<b>EXPENDITURE ON:</b>							
Raising funds	4	88,433	-	88,433	-	-	-
Charitable activities	4						
Consultancy, Management and Training		40,703	-	40,703	215,248	-	215,248
Community Health Research		190,340	129	190,469	208,307	46,788	255,095
Long Term Conditions Support		166,749	139,638	306,387	259,145	89,348	348,493
Pregnancy, Birth and Early Parenthood		3,155	8,912	12,067	24,415	-	24,415
Youth Health		4,413	-	4,413	-	-	-
Project Development and New Initiatives		869	-	869	-	-	-
		406,229	148,679	554,908	707,115	136,136	843,251
<b>TOTAL EXPENDITURE</b>		<b>494,662</b>	<b>148,679</b>	<b>643,341</b>	<b>707,115</b>	<b>136,136</b>	<b>843,251</b>
Net income / (expenditure) for the year before transfers		(15,323)	224,255	208,932	72,135	44,570	116,705
Transfer between funds	14	(4,750)	4,750	-	-	-	-
<b>NET INCOME/(EXPENDITURE) FOR THE YEAR</b>		<b>(20,073)</b>	<b>229,005</b>	<b>208,932</b>	<b>72,135</b>	<b>44,570</b>	<b>116,705</b>
<b>RECONCILIATION OF FUNDS</b>							
TOTAL FUNDS AT 1 APRIL 2021		215,841	45,818	261,659	143,706	1,248	144,954
<b>TOTAL FUNDS AT 31 MARCH 2022</b>		<b>£ 195,768</b>	<b>£ 274,823</b>	<b>£ 470,591</b>	<b>£ 215,841</b>	<b>£ 45,818</b>	<b>£ 261,659</b>

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**BALANCE SHEET****(company limited by guarantee number 02954744)****As at 31 March 2022**

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	Notes	£	2022 £	£	2021 £
<b>FIXED ASSETS</b>					
Tangible assets	11		10,308		14,298
<b>CURRENT ASSETS</b>					
Debtors	12	102,712		96,522	
Cash at bank and in hand		548,962		311,106	
		<u>651,674</u>		<u>407,628</u>	
<b>CREDITORS: amounts falling due within one year</b>	13	(191,391)		(160,267)	
<b>NET CURRENT ASSETS</b>			<u>460,283</u>		<u>247,361</u>
<b>NET ASSETS</b>			<u>£ 470,591</u>		<u>£ 261,659</u>
<b>FUNDS</b>					
Restricted funds	14		274,823		45,818
Unrestricted funds	14		195,768		215,841
			<u>£ 470,591</u>		<u>£ 261,659</u>

For the year ended 31 March 2022 the Company was entitled to exemption under section 477 of the Companies Act 2006 relating to small companies.

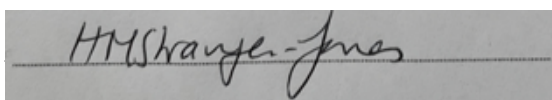
Directors' responsibilities:

- (i) The members have not required the Company to obtain an audit of its accounts for the year in question in accordance with section 476;
- (ii) The directors acknowledge their responsibilities for complying with the requirements of the Act with respect to accounting records and the preparation of accounts.

The financial statements have been prepared in accordance with Accounting and Reporting by Charities: Statement of Recommended Practice applicable to charities preparing their accounts in accordance with the Financial Reporting Standard applicable in the UK and Republic of Ireland (FRS 102) (effective 1 January 2019) - (Charities SORP FRS 102), the Financial Reporting Standard applicable in the UK and Republic of Ireland (FRS 102) and the Companies Act 2006.

These financial statements have been prepared in accordance with the provisions applicable to charitable companies subject to the small companies regime.

They were approved, and authorised for issue, by the Board of Trustees on .....16.12.2022.... and signed on their behalf by:-



HANNAH STRANGER-JONES, Chair

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**STATEMENT OF CASHFLOWS**  
**For the year ended 31 March 2022**

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	<b>2022</b>		<b>2021</b>	
	<b>£</b>	<b>£</b>	<b>£</b>	<b>£</b>
Cash flows from operating activities		<b>208,932</b>		116,705
Add back depreciation		<b>3,990</b>		10,268
Net cash provided by / (used in) operating activities				
(Increase)/decrease in debtors	<b>(6,190)</b>		24,282	
Increase/(decrease) in creditors	<b>31,124</b>		<u>66,211</u>	
		<b>24,934</b>		90,493
Cash flows from investing activities				
Purchase of fixed assets		-		(15,961)
Change in cash and cash equivalents in the year		<b>237,856</b>		<u>201,505</u>
Cash and cash equivalents at the beginning of the year		<b>311,106</b>		109,601
Cash and cash equivalents at the year end		<b><u>548,962</u></b>		<b><u>311,106</u></b>

## **1. ACCOUNTING POLICIES**

### ***Basis of preparation of financial statements***

The accounts have been prepared under the historical cost accounting rules, and in accordance with Accounting and Reporting by Charities: Statement of Recommended Practice applicable to charities preparing their accounts in accordance with the Financial Reporting Standard applicable in the UK and Republic of Ireland (FRS 102) (effective 1 January 2019) - (Charities SORP FRS 102), the Financial Reporting Standard applicable in the UK and Republic of Ireland (FRS 102) and the Companies Act 2006.

Assets and liabilities are initially recognised at historical cost or transaction value unless otherwise stated in the relevant accounting policy or note.

Judgements and key sources of estimation uncertainty are detailed in the accounting policies where applicable.

### ***Public benefit entity***

The charitable company meets the definition of a public benefit entity under FRS 102.

### ***Going concern***

The Trustees consider that there are no material uncertainties about the charitable company's ability to continue as a going concern. Key judgements that the charitable company has made which have a significant effect on the accounts include estimating income and expenditure for the next 12 months, in particular the economic impact of the Covid 19 pandemic.

### ***Income***

Income is recognised when the charity has entitlement to the funds: this is when any performance conditions attached to the income have been met, it is probable that the income will be received, and that the amount can be measured reliably.

Income from government and other grants, whether 'capital' grants or 'revenue' grants, is recognised when the charity has entitlement to the funds, any performance conditions attached to the grants have been met, it is probable that the income will be received and the amount can be measured reliably and is not deferred.

For legacies, entitlement is taken as the earlier of the date on which either: the charity is aware that probate has been granted, the estate has been finalised and notification has been made by the executor(s) to the charity that a distribution will be made, or when a distribution is received from the estate. Receipt of a legacy, in whole or in part, is only considered probable when the amount can be measured reliably and the charity has been notified of the executor's intention to make a distribution. Where legacies have been notified to the charity, or the charity is aware of the granting of probate, and the criteria for income recognition have not been met, then the legacy is treated as a contingent asset and disclosed if material.

Income is only deferred when: the donor specifies that the grant or donation must only be used in future accounting periods; or for performance related grants, where these are received in advance of the performances or specific event to which they relate.

#### ***Interest receivable***

Interest on funds held on deposit is included when receivable and the amount can be measured reliably by the charity; this is normally upon notification of the interest paid or payable by the bank.

#### ***Company status***

Social Action for Health is a company limited by guarantee. In the event of the Charity being wound up, the liability in respect of the guarantee is limited to £1 per member of the Charity.

#### ***Fund accounting***

Restricted funds are to be used for specific purposes as laid down by the donor. Expenditure which meets these criteria is charged to the fund.

Unrestricted funds are donations and other incoming resources received or generated for the charitable purposes.

Designated funds are unrestricted funds earmarked by the trustees for particular purposes.

#### ***Expenditure and irrecoverable VAT***

Expenditure is recognised once there is a legal or constructive obligation to make a payment to a third party, it is probable that settlement will be required and the amount of the obligation can be measured reliably. Expenditure is classified under the following activity headings:

##### ***Fundraising costs***

Costs of raising funds relate to the costs incurred by the charitable company in inducing third parties to make voluntary contributions to it, as well as the cost of any activities with a fundraising purpose.

##### ***Charitable activities***

Expenditure on charitable activities includes the costs of delivering services and reading activities undertaken to further the purposes of the charity and their associated support costs.

##### ***Other expenditure***

Other expenditure represents those items not falling into any other heading.

#### ***Reclassification of charitable activities***

During the year, the charity has reviewed and updated the naming of its charitable activities to better reflect its work. These accounts are presented on the basis of these reclassifications, and the comparatives have been updated to match.

#### ***Allocation of support costs***

Resources expended are allocated to the particular activity where the cost relates directly to that activity. Staff costs are stated on the basis of staff time. Support costs which cannot be directly attributed to charitable activities are allocated in proportion to staff costs.

Where information about the aims, objectives and projects of the charity is also provided to potential donors, activity costs are apportioned between fundraising and charitable activities on the basis of the area of literature occupied by each activity.

### ***Operating leases***

Rental charges are charged on a straight line basis over the term of the lease.

### ***Tangible fixed assets and depreciation***

Tangible fixed assets (excluding investments) are stated at cost less depreciation. The cost of minor additions or those costing less than £1,000 are not capitalised. Other fixed assets with an expected life of more than one year are included at cost and depreciated over four years.

### ***Debtors***

Trade and other debtors are recognised at the settlement amount due after any trade discount offered. Prepayments are valued at the amount prepaid net of any trade discounts due.

### ***Cash at bank and in hand***

Cash at bank and cash in hand includes cash and short term highly liquid investments with a short maturity of three months or less from the date of acquisition or opening of the deposit or similar account. Cash balances exclude any funds held on behalf of service users.

### ***Creditors and provisions***

Creditors and provisions are recognised where the charity has a present obligation resulting from a past event that will probably result in the transfer of funds to a third party and the amount due to settle the obligation can be measured or estimated reliably. Creditors and provisions are normally recognised at their settlement amount after allowing for any trade discounts due.

The charity only has financial assets and financial liabilities of a kind that qualify as basic financial instruments. Basic financial instruments are initially recognised at transaction value and subsequently measured at their settlement value with the exception of bank loans which are subsequently measured at amortised cost using the effective interest method.

### ***Pensions***

The charity operates a defined contributions pension scheme, which is a Group Stakeholder Pension Scheme. During the year, the charity contributed up to 3% of gross pay for all staff. The contributions made during the year are treated as an expense and were £7,465 (2021 - £6,595).

## 2. DONATIONS AND LEGACIES

	<b>Unrestricted Funds 2022 £</b>	<b>Restricted Funds 2022 £</b>	<b>Total Funds 2022 £</b>	<i>Unrestricted Funds 2021 £</i>	<i>Restricted Funds 2021 £</i>	<i>Total Funds 2021 £</i>
Trusts and foundations	-	289,821	289,821	65,944	-	65,944
Other donations	42,109	8,890	50,999	134,721	-	134,721
	<b>£ 42,109</b>	<b>£ 298,711</b>	<b>£ 340,820</b>	<b>£ 200,665</b>	<b>£ Nil</b>	<b>£ 200,665</b>

Other donations income includes £41,994 of government funding through the Coronavirus Job Retention Scheme (2021 - £133,216).

## 3. INCOME FROM CHARITABLE ACTIVITIES

	<b>Unrestricted Funds 2022 £</b>	<b>Restricted Funds 2022 £</b>	<b>Total Funds 2022 £</b>	<i>Unrestricted Funds 2021 £</i>	<i>Restricted Funds 2021 £</i>	<i>Total Funds 2021 £</i>
Consultancy, Management and Training	61,708	-	61,708	205,650	-	205,650
Long Term Conditions Support	171,192	68,223	239,415	62,344	133,918	196,262
Community Health Research	187,412	-	187,412	306,272	46,788	353,060
Pregnancy, birth and early parenthood	-	6,000	6,000	-	-	-
Project Development and New Initiatives	16,600	-	16,600	-	-	-
Financial and Digital Wellbeing	-	-	-	-	-	-
	<b>£ 436,912</b>	<b>£ 74,223</b>	<b>£ 511,135</b>	<b>£ 574,266</b>	<b>£ 180,706</b>	<b>£ 754,972</b>

#### 4. ANALYSIS OF EXPENDITURE

	Staff costs £	Direct costs £	Support & governanc £	Total 2022 £	Total 2021 £
Consultancy, Management and Training	2,090	36,918	1,695	40,703	215,248
Community Health Research	99,179	10,892	80,398	190,469	255,095
Long Term Conditions Support	154,004	27,542	124,841	306,387	348,493
Pregnancy, Birth and Early Parenthood	5,566	1,989	4,512	12,067	24,415
Youth Health	2,437	-	1,976	4,413	-
Project Development and New Initiatives	480	-	389	869	-
	<b>263,756</b>	<b>77,341</b>	<b>213,811</b>	<b>554,908</b>	<b>843,251</b>
Fundraising	48,841	-	39,592	88,433	-
Support & governance	127,799	125,604	(253,403)	-	-
	<b>£ 440,396</b>	<b>£ 202,945</b>	<b>£ Nil</b>	<b>£ 643,341</b>	<b>£ 843,251</b>

#### NOTE 4 ANALYSIS OF EXPENDITURE CONTINUED - 2021

	Staff costs £	Direct costs £	Support & governance £	Total 2022 £
Consultancy, Management and Training	15,751	175,439	24,058	215,248
Community Health Research	71,458	74,491	109,146	255,095
Long Term Conditions Support	91,354	117,604	139,535	348,493
Pregnancy, Birth and Early Parenthood	9,576	212	14,627	24,415
	<b>188,139</b>	<b>367,746</b>	<b>287,366</b>	<b>843,251</b>
Fundraising	-	-	-	-
Support & governance	280,732	6,634	(287,366)	-
	<b>£ 468,871</b>	<b>£ 374,380</b>	<b>£ Nil</b>	<b>£ 843,251</b>

During the year, the charity has reviewed and updated the naming of its charitable activities to better reflect its work. These accounts are presented on the basis of these reclassifications, and the comparatives have been updated to match.

Of the total expenditure, £494,662 was unrestricted (2021 - £707,115) and £148,679 was restricted (2021 - £136,136).

#### 5. NET INCOME / EXPENDITURE FOR THE YEAR

This is stated after charging / crediting:

	2022 £	2021 £
Independent auditor's / examiner's remuneration:		
Independent examiner's fees	1,200	6,690
Operating lease rentals payable:		
Property	42,416	69,755
Other	3,542	3,302

## 6. STAFF COSTS AND NUMBERS

	<b>Total Funds 2022 £</b>	<i>Total Funds 2021 £</i>
<b>Salary costs</b>		
Wages and salaries	<b>401,294</b>	431,951
Social security costs	<b>31,637</b>	30,325
Pension costs	<b>7,465</b>	6,595
	<hr/> <b>£ 440,396</b>	<hr/> <i>£ 468,871</i>

The average number of employees (head count based on number of staff employed) during the year was 15 (2021 - 16).

The total employee benefits, including pension contributions, of the key management personnel were £62,690 (2021 - £74,332).

During the year, no employee earned more than £60,000 (2021 - the same).

## 7. PENSION SCHEME

The charitable company operates a defined contributions pension scheme. The assets of the scheme are held separately from those of the charitable company in the independently managed NEST pension fund. The pension cost charge represents contributions payable under the scheme by the charitable company to the fund. The charitable company has no liability under the scheme other than for the payment of those

## 8. TRUSTEES' REMUNERATION AND EXPENSES

The charity trustees were not paid and did not receive any other benefits from association with the charity in the year (2021 - £nil). No charity trustee received payment for professional or other services supplied to the charity (2021 - £nil).

No expenses were paid to the Trustees (2021 - the same).

## 9. RELATED PARTY TRANSACTIONS

Other than trustees' expenses above, there are no reportable related party transactions to disclose for 2022 (2021 - none).

## 10. TAXATION

The charitable company is exempt from corporation tax as all its income is charitable and is applied for charitable purposes.

## 11. TANGIBLE FIXED ASSETS

	Leasehold improvements £	Fixtures and fittings £	Office equipment £	Total £
<b>Cost</b>				
At 1 April 2021	48,934	29,420	34,711	113,065
<b>Depreciation</b>				
At 1 April 2021	48,934	29,420	20,413	98,767
Charge for the year	-	-	3,990	3,990
At 31 March 2022	48,934	29,420	24,403	102,757
<b>Net book value</b>				
At 31 March 2021	£ Nil	£ Nil	£ 14,298	£ 14,298
At 31 March 2022	£ Nil	£ Nil	£ 10,308	£ 10,308

## 12. DEBTORS

	2022 £	2021 £
<b>Due within one year</b>		
Trade debtors	102,712	62,301
Accrued income	-	27,239
Prepayments	-	709
Other debtors	-	6,273
	<b>£ 102,712</b>	<b>£ 96,522</b>

## 13. CREDITORS: AMOUNTS FALLING DUE WITHIN ONE YEAR

	2022 £	2021 £
Trade creditors	1,300	15,283
Deferred income	140,806	50,360
Social security and other taxes	7,422	3,241
Pension	1,755	3,123
Accruals	40,108	88,260
	<b>£ 191,391</b>	<b>£ 160,267</b>
<u>Deferred income</u>		
Balance at 1 April 2021	50,360	6,034
Amount released to incoming resources	(50,360)	(6,034)
Amount deferred in the year	140,806	50,360
Balance at 31 March 2022	<b>£ 140,806</b>	<b>£ 50,360</b>

#### 14. STATEMENT OF FUNDS

	Brought Forward £	Incoming Resources £	Resources Expended £	Transfers and investment gains/(losses) £	Carried Forward £
<b>RESTRICTED FUNDS</b>					
Long Term Conditions Support					
Good Friends	14,955	8,000	(15,699)	-	7,256
My Moves	29,615	67,223	(58,973)	-	37,865
BAME Mental Health	-	60,593	(2,662)	-	57,931
4 Sight Sunday Lunches	1,248	-	-	-	1,248
Pregnancy, Birth and Early Parenthood					
Sure STEPS	-	18,223	(8,127)	4,750	14,846
Community Health Research					
Covid Vaccine Uptake	-	10,000	(870)	-	9,130
Financial and Digital Wellbeing	-	100,000	-	-	100,000
Other					
Core and Project Development	-	108,895	(62,348)	-	46,547
	<u>£ 45,818</u>	<u>£ 372,934</u>	<u>£ (148,679)</u>	<u>£ 4,750</u>	<u>£ 274,823</u>

#### SUMMARY OF FUNDS

General Funds	215,841	479,339	(494,662)	(4,750)	195,768
Restricted Funds	45,818	372,934	(148,679)	4,750	274,823
	<u>£ 261,659</u>	<u>£ 852,273</u>	<u>£ (643,341)</u>	<u>£ Nil</u>	<u>£ 470,591</u>

The transfer of funds in 2022 relates to income from the Souter Trust for Sure STEPS which was received in the prior year but not recorded as restricted. As the amount is immaterial, the amount is transferred into restricted funds in lieu of a prior year adjustment.

#### STATEMENT OF FUNDS - 2021

	Brought Forward £	Incoming Resources £	Resources Expended £	Transfers and investment gains/(losses) £	Carried Forward £
<b>RESTRICTED FUNDS</b>					
Long Term Conditions Support					
Good Friends	-	32,593	(17,638)	-	14,955
My Moves	-	35,381	(5,766)	-	29,615
4 Sight Sunday Lunches	1,248	-	-	-	1,248
Community Health Research					
Covid Peer Support	-	46,788	(46,788)	-	-
Other					
Core and project development	-	65,944	(65,944)	-	-
	<u>£ 1,248</u>	<u>£ 180,706</u>	<u>£ (136,136)</u>	<u>£ Nil</u>	<u>£ 45,818</u>

#### SUMMARY OF FUNDS

General Funds	143,706	779,250	(707,115)	-	215,841
Restricted Funds	1,248	180,706	(136,136)	-	45,818
	<u>£ 144,954</u>	<u>£ 959,956</u>	<u>£ (843,251)</u>	<u>£ Nil</u>	<u>£ 261,659</u>

## 15. ANALYSIS OF NET ASSETS BETWEEN FUNDS

	Unrestricted Funds		Restricted Funds	Total Funds
	Designated Funds	General Funds	Funds	Funds
	£	£	£	£
Tangible fixed assets	-	10,308	-	10,308
Net current assets	-	185,460	274,823	460,283
	<u>£ Nil</u>	<u>£ 195,768</u>	<u>£ 274,823</u>	<u>£ 470,591</u>

2021

	Unrestricted Funds		Restricted Funds	Total Funds
	Designated Funds	General Funds	Funds	Funds
	£	£	£	£
Tangible fixed assets	-	14,298	-	14,298
Net current assets	-	201,543	45,818	247,361
	<u>£ Nil</u>	<u>£ 215,841</u>	<u>£ Nil</u>	<u>£ 261,659</u>

## 16. OPERATING LEASE COMMITMENTS

The charity has a long-term, rolling agreement for hire of rooms at the Brady Arts Centre. It had no lease commitment at the year-end 2021/22 having surrendered a lease for Ment House during the year (2021 - there was a commitment of £6,048 in relation to the final 4 months of the office premises lease which was cancelled during that year).

## 17. OTHER COMPANY INFORMATION

Social Action for Health is a charitable company limited by guarantee, registered in England with registration number 02954744. Its registered office address is Brady Arts Centre, 192-196 Hanbury Street, London, England, E1 5HU. The accounts are presented in GBP rounded to £1.