

Company number: 2954744

Charity Number: 1040496

Social Action for Health

Report and financial statements

For the year ended 31 March 2023

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Company number	2954744
Country of incorporation	United Kingdom
Charity number	1040496
Country of registration	England & Wales
Registered office	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 until 17 October 2023
Ryan Barnett	Treasurer - resigned 31 December 2022
Pooja Shah	
Harveen Udhi	Resigned 27 September 2022
Emma Backhouse	
Alex Murtough	
Karin Pappenheim	Chair from 17 October 2023
Lewis Batkin	Appointed 27 September 2022
Helena Roy	Appointed 27 September 2022
Tatyana Karpinskaya	Treasurer – appointed 18 April 2023

Key management personnel

Chief Executive	Ceri Durham
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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, Shruti Soni Ltd, 117a St Johns Hill, Sevenoaks, TN13 3PL

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
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 2023.

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. Although life is starting to settle post-Covid and most activities are now face-to-face, the extremely high rates of inflation and overall cost-of-living crisis continue to have significant effects on our participants and the Organisation. With avoidable health inequalities continuing to exist and, in many cases, widen we remain confident that our work continues to be relevant and make a difference to the communities we serve.

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



Left: The financial year started with an unexpected donation from JohnLewis in Stratford. They had been searching for a local health charity that was deeply embedded in the local community. It was great to visit the store to collect a cheque!

Review of 2022-23 and looking forward to 2023-24

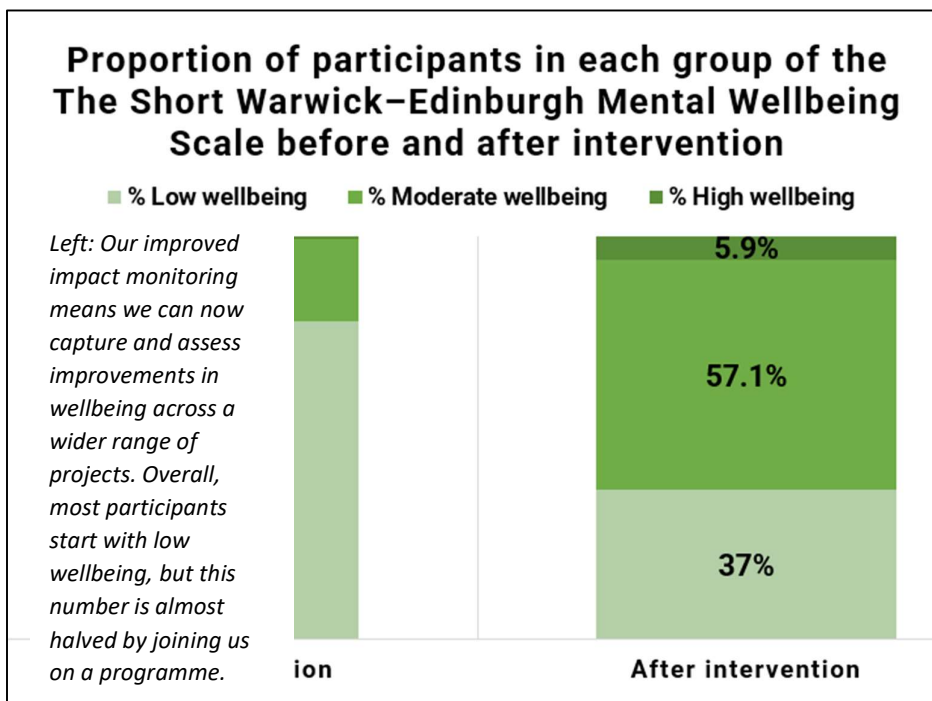
Building on the organisational strategy and re-focus work of 2021-22, 2022-23 has been a year of resulting consolidation and organisation of Social Action for Health to provide **direct provision of health-related services and support** to beneficiaries who are at the greatest risk of health disadvantage 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.

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. In this report, we report on our progress against our 2022-23 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.

Strategic health contexts – and the ways we monitor and assess our impact and organise our activities - remain as follows:

1. Long-term health conditions;
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.



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.

RESPECT

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, which allows 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.

Some Key Demographic Data for 2022-23 is shown below in Figure 1. We recorded engagement with slightly more people this year (3,423; 2021-22: 3,270), more men (37%; 2021-22: 18%). Areas of deprivation data is broadly similar (74% ;2021-22: 72%). We continue to find ways to measure and show more accurately our work in “Super Output Areas” of higher deprivation and / or in pockets of extreme deprivation within areas of high wealth, which are common in Inner London.

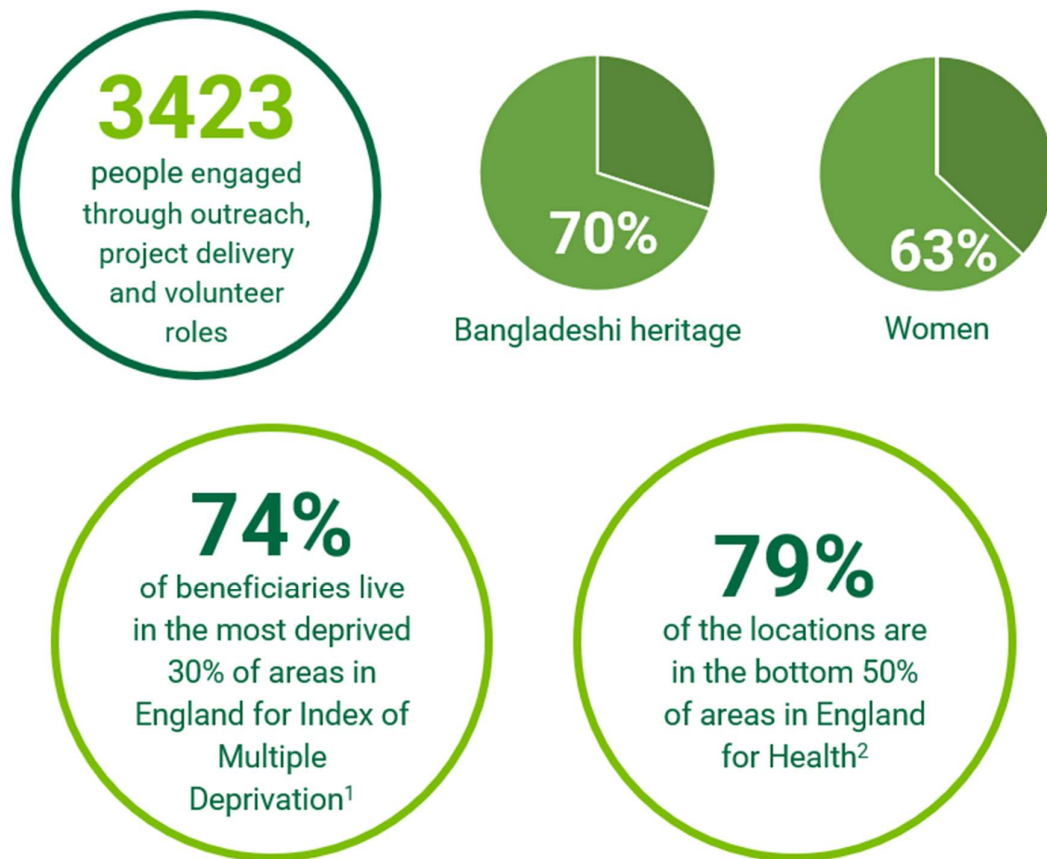


Figure 1. Social Action for Health – 2022-23 – Summary of captured demographic data

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

Update on priorities from 2022-23 and looking forward to 2023-24

Progress has been made against the priorities set in 2021-22, and these areas remain an ongoing priority to enable us to achieve our strategic aims. Work continues against these priorities to enable the organisation to become more agile, volunteer-and community-oriented.

Priorities	Progress
To embed the new strategy, enabling us to address the needs of those most affected by health inequities	This has been very successful and has allowed us to develop a new fundraising strategy which will enable us to focus on funding opportunities that align with our purpose, rather than our work being driven by funder requirements and targets. This will mean that our portfolio of work will continue to become increasingly aligned with our strategy.
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.	This has been partially successful. We have been able to increase diversity across our beneficiary groups, particularly engaging more men through our Men's Mental Health project and reaching more younger people. This will need to become more embedded. We have not yet been able to establish our 'Panel 100' Community Advisory Group because of a lack of capacity and the need to prioritise other delivery work. This remains a key part of our strategy. We will continue to reach into different groups and communities in east London to ensure our work is fully accessible to and reflective of the local population.
To continue to improve project management and financial management systems and processes.	We have continued to embed use of improved systems and processes , onboarding relevant staff members to use QuickBooks and maintaining our Cyber Essentials accreditation.
To measure our impact to be able to better demonstrate and talk about our work.	We have made significant progress in this area. This year, the Board established an Impact and Strategy Committee, we introduced our new impact measurement framework, and began to embed the new methodology across our portfolio of support services. As different projects operate courses and activities on different timelines, and we wanted to ensure consistent baseline and measurement data for each cohort, this was a gradual transition between the old and new systems, but now means we are starting to have consistent data to work with and allows us to track project and organisational progress against strategic aims.

To ensure all staff are accessing opportunities for formal and informal training and learning.	We have continued to make progress against this priority. We have had a cohort of sessional staff complete Chronic Disease Self-Management Program (CDSMP) training to be able to deliver this programme through our Good Moves project. We have also been able to train staff and volunteers through our comprehensive Sure STEPS peer-support training, have staff completing Mental Health First Aid and Safeguarding training.
Continue to diversify income streams and increase funding from trusts and foundations.	This has been successful and remains a priority. In 2022-23 53% of income came from trusts / foundations or other giving, compared to 48% last year and 7% in 2020-21. This has demonstrated that we are an organisation which can work well with funders who support our aims. This type of fundraising activity will continue to be a priority for the organisation.
Working towards unrestricted reserves position of £250,000.	Unrestricted reserves at the close of 2022-23 were £267,720. In 2021-22 these were £195,768. The organisation will continue to always to hold minimal reserves of 3 months running and close down costs in line with a wider aim of holding £250,000 as a general position.



Left: – Our improved impact measuring means we regularly ask participants and volunteers on all our programmes if our work has been beneficial to them. So far, out of hundreds of people asked, 100% have answered “yes”.

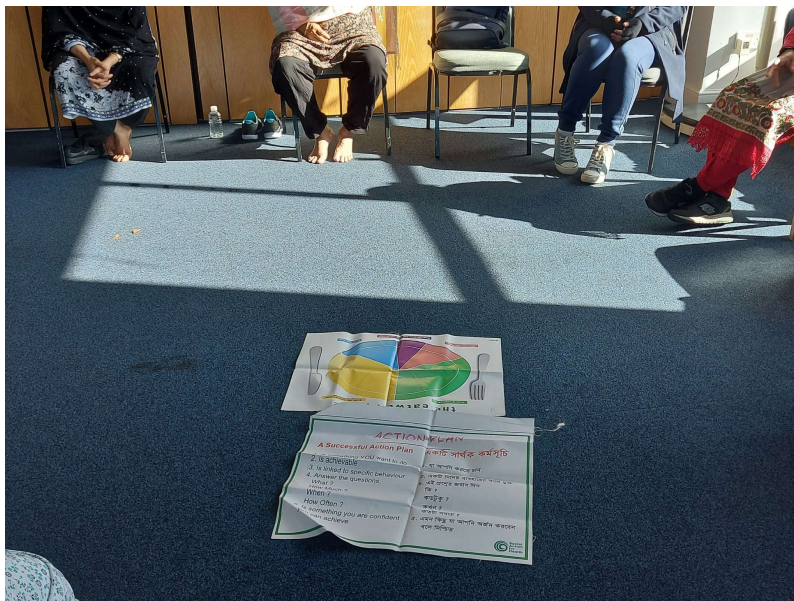
Key areas of work and projects over the past year

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 that we work with is central to our approach and success. Over the past year we have run five key projects, all taking slightly different approaches.

1. Good Moves

For 23 years, our Good Moves project has helped people in Tower Hamlets manage their long-term health conditions and overall health. This flagship project, primarily funded by North East London NHS Integrated Care Board) supports adults in Tower Hamlets who are living with diabetes, Chronic Kidney Disease, heart disease and/or hypertension through an eight-week course. Our highlight this year is the training and re-validating 12 sessional workers to become facilitators of the evidence-based, Stamford model: Chronic Disease Self-Management Program (CDSMP), now run through the Self-Management Resource Centre (www.selfmanagementresource.com)




Left: Bengali Women's Good Moves Group 'action planning' how to incorporate the recommended "Eat Well Plate" into the daily lives of themselves and their families.

Over the past year, we supported 392 participants over 30 Good Moves courses in four community languages (Bengali, Somali, Cantonese and English). The project not only supported participants through their physical health challenges, but resulted in improvements in mental wellbeing too, with significant proportion of participants shifting from 'Low wellbeing' to 'Moderate wellbeing' using Short Warwick-Edinburgh Mental Wellbeing Scale over the eight-week course.

Participant Story – Good Moves

Good Moves was recommended to 'G' by a friend following challenging caring responsibilities for her aging mother, and challenges with her own health, including fibromyalgia, rheumatoid arthritis and stress. G describes her fibromyalgia as a 'fog' descending on her, which can last anything from 12 to 36 hours. During medical appointments with her GP and Practice Nurse, G always felt rushed, and unable to talk about her feelings. Good Moves has offered a safe space for her to share when she has bad days with fibromyalgia or other challenges and allowed her to meet another participant who also has fibromyalgia. G initially felt guilty and reluctant to take time away from her family for herself but with support from our team she has since been able to create an action plan to better manage her physical and mental health, including easy steps to implement initial small changes to her daily routines.



"I feel I am making progress on my journey to manage my emotional wellbeing life. I do feel more confident, and I refer to my action plan most days to help keep me on track. I do not want to go back to my pre-Good Moves days".

Good Moves Participant

2. Change for Good Weight Management Programme

We continued to run our Change for Good 12 week weight management programme. designed to help people achieve their personal weight loss goals. We ran the course in English and Bengali, online and in-person, and supported 662 participants over the year. Referrals are overwhelmingly received from GPs and Social Prescribers who appreciate the personal service we offer, which is culturally and linguistically appropriate for their patients.

In addition to the focus on weight management goals, we monitored participants' mental wellbeing through the Short Warwick-Edinburgh Wellbeing Scale (SWEMWBS). Participants showed an average SWEMWBS score increase of 3.98, demonstrating an improvement in mental wellbeing following their engagement, but not as effective as our more holistic Good Moves programme which covers similar content. This was because not as many people were at such low starting positions, as well as the increase not being so great. Being able to compare projects like this has been possible because of the significant improvement in our impact measuring.

3. Good Friends

We have continued to grow and develop our Good Friends programme. This provides free-to-access befriending support and activities for those living with long-term physical and mental health conditions, reducing isolation and enabling people to be part of something positive. Good Friends has supported over 100 adults this year, offering opportunities for people to come together and meet others from their communities, learn new skills, and manage their long-term health conditions.



Above: Our Isle of Dogs Good Friends group – photograph after one of their gentle exercise sessions

“After joining the programme, it felt like a breath of fresh air, as I had the chance to meet so many wonderful people, who I can now call my friends. ... Social Action for Health has taught me to take care of my body and my health all by myself. Instead of relying on doctors or my local GP to tell me what I should do, I have now been taught what I can do to keep myself healthy.

“Good Friends participant feedback.”

This year, we also have introduced an **ESOL walking groups** and **health talks** with monthly guest speakers to the activity offer.

Community outreach worker reflection - Good Friends Walking Group – Bengali Women

“The group started at the end of July 2022. We started walking from Brady to Allen Garden, then came back and had a cup of tea. Originally, we had two ladies. It was a little disheartening. Then the group grew gradually – word of mouth is very powerful. The two original ladies spoke to their friends, and we grew. I asked what do the participants want. They said the main thing lacking was their English. So we started teaching them a few words, e.g. palm tree, which we had seen on our walk. The group were very enthusiastic and passionate. They wanted to approach people in the park and say hi, but did not have the language to do so. We started speaking Bengali on the walk out and English on the way back. The group then started expanding. Now we have 12 ladies.

One lady opened up to say that she did not know how to write her name. So we got some dot-to-dot alphabet workbooks and alphabet flashcards. Each week we are building. The ladies really want to amalgamate with the community and make their own appointments. If these ladies had been shown this earlier, they would not be housebound, would have confidence and be able to interact with the community.”



Above and Right: ESOL Walking Group head out for a walk, before returning for a cup of tea and English practice.

4. We completed our **My Moves** project, encouraging people aged 50+ who would not usually take part in sports or exercise to become more active and to meet others through cultural dance and movement and sharing food and conversation together. This year, we have supported 109 participants, embedding our new Chinese / Vietnamese groups in addition to Bengali groups. Participants have continued engagement with us through our other projects and we continue to explore how to increase our offering in digital support, building on our learnings from Covid times.



Left: a Lion Dance performed as part of our combined Good Friends and My Moves inter-cultural celebration event.

5. Our **Wellbeing for Black, Asian and Minoritised Ethnic Men** project has played a significant part of our project delivery work this year as we started to explore different ways to improve the mental health and wellbeing of Black, Asian and Minoritised Ethnic Men. The project grew out of observations in lockdown of our participant groups and has included significant-community engagement (surveys, discussion groups, events and workshops with the target group and local mental healthcare providers), and culturally-appropriate social support groups to improve mental health and wellbeing. Insights gained through these activities inform our future offer, and will be fed back to other local providers to increase understanding of the mental health support needs of Black, Asian and Minoritised Ethnic men and improve access to relevant services.

So far, we have:

- engaged with 294 people, including 86 frontline healthcare workers from local relevant organisations
- hosted a successful event focusing on the mental health of Black, Asian and Minoritised Ethnic Men
- started planning a survey to gain insights around mental health and wellbeing, experiences of mental health services, and recommendations for future work from Black, Asian, and Minoritised Ethnic men in Tower Hamlets and Hackney
- developed the social support group offering to include 'Wellbeing Wednesday' – providing gentle exercise and conversation opportunities to Asian men in Tower Hamlets, and skills-based workshops, such as woodwork, which intentionally encourage conversation around mental health and wellbeing.



Left: A Woodwork for Men session in partnership with Woodwork for Wellbeing at St Margaret's House

Pregnancy, Birth and Early Parenthood:

Social Action for Health has a long history of supporting women from disadvantaged groups in pregnancy 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. This year, thanks primarily to new funding received enabling dedicated work around financial and digital wellbeing we have been able to increase our support to new mothers and parents from financially disadvantaged backgrounds struggling to deal with the challenges of new parenthood.

We have continued to run our **Sure STEPS** volunteer peer support 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. The one-to-one support is long-term and flexible depending on the requirements of the parent 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. In addition to the one-to-one support, we have also established a **Coffee Morning** to provide a safe, local space for new parents to meet others in similar situations, socialise and build supportive networks.



**Have you recently had a baby?
Do you want to connect with other
mums?**

***Drop-in to our FREE coffee morning
Wednesdays between 10:00 AM – 12:00 PM,
Collingwood Children's Centre, Buckhurst St,
London E1 5QT***

We speak English, Bengali
and Polish.

New Venue!



Our team speak English, Bengali and Polish, and attendees are invited to continue coming as their babies get older to maintain their social connections. Across the peer support scheme and coffee morning, we have engaged 81 people this year, including 20 volunteers.

We have also piloted a **Gestational Diabetes Peer Support** project with the Well Newham programme in Newham Hospital, developed with the diabetes and obstetrics team to complement the complex diabetes multidisciplinary clinic. We supported 51 pregnant women through 8 drop-in sessions and outreach in the antenatal clinic at the Newham University Hospital. In recognition of the disproportionate rate of gestational diabetes in the borough and the risk factors surrounding the condition, this pilot provided support in Urdu and Bengali as well as English. Sessions took place in a quiet space on the maternity ward, and focused on providing social support, encouragement, healthy snacks and drinks, mindfulness, gentle exercise, and signposting to other local sources of support. We are seeking specific funding to continue this programme and to grow it across our geographical footprint as it was an excellent illustration of us combining our many years of Good Moves and similar wellbeing programmes, with our expertise in maternity services.



Left: Social Action for Health Gestational Diabetes Team meet key Newham Maternity team staff on one of our team training visits

Financial and Digital Wellbeing

This year, we have been able to develop our financial and digital wellbeing work. This work is to benefit people with little or no digital skills who are experiencing exclusion due to digital poverty, and who's lack of English literacy has made difficult or impossible for them to apply for jobs, or access services online without additional support. Such online services include making GP appointments accessing council housing services, and making online welfare benefit support including those which are designed to alleviate in-work poverty. We started work on this project by focusing on mothers with children under 5 who are living in financially challenging circumstances and will seek to build on this as our expertise and needs dictate.

The initial pilot was a **Financial and Digital Wellbeing** course, which we held at the Hackney Baby Bank. This course supported 18 new parents to learn practical digital and finance skills, covering topics such as budgeting, money management, opening bank accounts, and avoiding scams. These topics were so welcome that we intend to train our volunteers to be able to offer financial and digital support, and establish an ongoing programme of financial wellbeing workshops for new or soon-to-be parents, offered in community languages.



Left: Financial Wellbeing Course run in partnership with the Hackney Baby Bank and Crosslight.

Participant feedback – Hackney Baby Bank Financial Wellbeing Course

“The course has been amazing, before the course I was struggling, but now with the course, I know where to go for support. I have learnt to not only save, but learnt where all my money was going to, and how I can cut back where I am able. **My mental health is so much better as I am not stressed about money or not knowing or understanding where my money was going.** This course has changed so much for the better for me, money, saving, budget, understanding my income expenditure etc.”

Youth Engagement

This year, we have made progress building our youth engagement work strand.

We ran a summer **work experience placement** for young people, which explored the concept of trust and how it can impact community engagement with healthcare provisions (with a particular focus on COVID-19 health outcomes), as well as the health priorities of young people connected to the borough. The group participated in a 7-week work-experience placement course, which combined creative activities with direct community outreach and engagement, such as participating in focus groups which were run with Bengali men, Somali women and Bengali women, to explore and present on these topics.

Work Experience Scheme - Participant feedback

"We were listened to. That is what I most enjoyed about this experience. Our views and opinions were taken on board and we were able to express ourselves in a non-judgmental environment. The fact I have been able to have the chance to meet like-minded individuals and have important conversations with them about the changes we can make within our communities, is a pleasure. I am extremely thankful and appreciative that I have had such an opportunity."



Left: Social Action for Health team presenting on health inequalities and opportunities to work with the Wellcome Sanger Institute to the Beal Sixth Form.

We also worked with students from **Beal High School** on '**Project Cardinal**' with support from teams at the Wellcome Sanger Institute to develop projects on health inequalities and representation in genetic research. Students' projects included a 7-minute video featuring an avatar of a South Asian woman wearing a sari to encourage minoritised communities to engage in conversations about genetic research, and a powerful speech asking us to question why certain sections of society are so reluctant to participate in scientific research.

These two groups later participated in **The Future of Community Health event**, which we organised in partnership with Queen Mary University of London. The event was an opportunity and platform for young people aged 17-26 to share their insights, concerns and priorities about community health with an audience of over 85 people, and discuss these with the wider community and academics. The presentations explored building trust in the community, health inequalities and representation in medical research, and young people's health priorities.



Left and below: The Future of Community Health event hosted in partnership with Queen Mary University of London, where Beal 6th Form students and the young people from our work experience scheme were able to showcase their work.

"It has been an amazing experience. **Our issues and worries are being listened to and we are being heard.**" Beal High School student



"It has been an honour and a privilege working with the Social Action for Health team. It has been a great learning curve for our students to interact with industry experts. They have grown in confidence and have developed key skills along the way. Furthermore, many of them now want to pursue STEM-based degrees. **The experience has inspired their next steps.**" Jag Singh, Beal High School's Director of Sixth Form

Community Research:

Community research is a key part of our strategy, in acknowledgment that decisions around healthcare are made based on research in which the people most affected by health inequalities are not reflected. We build trusting relationships with researchers and communities, broker mutually beneficial relationships between the two, and support the facilitation of meaningful community research. We believe research must deliver immediate benefit to participants alongside the ultimate long-term aims of the research benefiting the community, and progress opportunities which deliver on both counts. Highlights this year included:

- Continuing our collaboration with Queen Mary University of London on the **Genes and Health** research study as we emerged from the pandemic. 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 worked with community venues.



- Facilitating a range of focus groups with the community, exploring topics such as accessing GPs through a translator, sugar and salt in food, understanding of hesitancy around Covid-19 vaccine uptake in different communities asthma, ethnic descriptions used in clinical trials, living with multiple long-term conditions and taking multiple drugs, and men accessing social prescribing services. We have increasingly focused on the importance of returning research findings and next steps to local communities following participation in research.

“Thank you for coming before and speaking with us and thank you for taking what we said to the right people and thank you even more for coming back and telling us what happened after our meeting”.

Community Research Participant

Financial review

In 2022-23, Social Action for Health made an overall surplus of £41,472 (2022: £208,932:). As anticipated, income was down compared to last year (£684,273 compared to 2022: £852,273) with total expenditure remaining similar (£642,801 compared to 2022-23: £643,341). As this had been anticipated, and restricted funds received in preparation for the year ahead, projects were able to continue as planned and there were no significant events during the year that affected the performance of the Charity. The Charity remains in a good cash position as it moves into next year, with the key risk being about being able to achieve budgeted income as the year progresses.

Total reserves were £512,063 (2022: £470,591) of which £266,720 were unrestricted (2022: £195,768). This is higher than the minimal amount of £137,746 which the Trustees have identified as the minimum to hold in line with the reserves policy.

Social Action for Health carried out a detailed fundraising and income strategic review during the year involving staff at all levels and trustees. Recommendations include re-engaging a full-time fundraiser with a focus on raising funds from trusts and foundations and investing in management personnel who can help grow the contractual revenue streams whilst ensuring they support and enhance our core offerings to participants in line with strategic aims.

During the year there was no non-compliance of Fundraising regulations and codes and Social Action for Health received no complaints relating to its fundraising practice.

Reserves policy

The Organisation always aims to hold at least three months of running costs plus redundancy and related costs as unrestricted reserves in the event a closure is required. This is currently £137,746, but the figure is likely to fall as a planned organisational restructure is completed. The trustees have agreed that it will continue to be prudent to aim to hold £250,000 unrestricted funds but that provided this minimal amount is held, this will be sufficient to support continuity and sustainability through organisational, economic and political uncertainty. Reserves above this level may be used to ensure continuity of community services and support as reasonably practicable, but in line with previous years, reserves will not be used to subsidise contracted service delivery.

Going concern basis of accounting

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 good cash reserves, cash flow management and based on committed contractual income and risk assessed new income. Cash flow is forecast to remain positive until at least June 2025. Looking further into the future, the plan is for the organisational income and the unrestricted reserves to increase. This will lead to the charity being in a more financially stable and sustainable position and able to take on more projects which respond to community insights in line with organisational strategy.

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, falling funding levels and difficulty recruiting a fundraiser, our pattern of work and income combined with plans to restructure the organisation, will ensure that the organisation remains a going concern. These actions combined with continued careful management, mean that 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 management including cash-flow and scrutiny of reserves will be completed monthly by the Treasurer, the Finance and Governance Committee and at quarterly board meetings to ensure that appropriate actions can be taken to manage the finances in the short and longer-term.

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. Unable to generate sufficient income to cover desired charitable activities, especially over the longer-term in an increasingly challenging funding environment.	Mitigation: Carried out organisational review to ensure minimised expenditure and streamlined operation whilst continuing to deliver desired charitable activities. Continue with plan to recruit experienced fundraiser to seek funds from trusts and foundations.
2. Personnel risk – there is risk to operations and service delivery in the event key personnel left, or were unable to work. Also, ongoing difficulty to recruit a fundraiser is preventing income generation. In line with many other charities, high numbers of staff are facing multiple challenges outside of work risking burn out and stress at work.	Mitigation Ensure three month notice periods for all senior managers. HR task group established by the Board, together with wider involvement of trustees to support the CEO in finance and operational procedures. Board and CEO will keep staff remuneration under review to ensure paying in line with market rate so that talent can be recruited and retained. Ensure review of work levels and support for staff at all levels.
3. Trustee and staff skill mix does not reflect balance of community insight and lived experience with professional board and management skills	Mitigation – Board Development is a priority based on regular skills and diversity audits of board and of the staff team. In recruitment, recruit to reflect gaps and train all trustees on obligations. Continue to work towards setting up Community Advisory Group and continually aim to ensure diversity, genuine community engagement, language mix and lived experiences is embedded at all levels of the organisation.

4. Unrestricted reserves fall below reserve policy level	Mitigation Board has established a Finance and Governance Committee to monitor the financial position with the CEO and Treasurer. Improved 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, including organisational restructure.
5. Safeguarding and health and safety of staff, volunteers and participants.	Mitigation Ensure safeguarding and health and safety is kept front and centre of all project planning. 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.
6. Data Breach and Cyber Security breach	Mitigation 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 and a number of Board Committees have been established (Finance and Governance, Impact and Strategy and an HR Task Group) to enable trustees to contribute skills and knowledge to support the CEO operationally and with specific challenges. Regular meetings are held by the two committees to ensure greater awareness and accountability.

The Trustees appoint a Board Chair, Deputy Chair and Treasurer through an internal and external recruitment process, and in the coming year will be seeking to appoint a Board Secretary to support governance and administration of board business. Succession planning has taken place in this last year as the current Chair's term of office is ending and a handover to a new Chair is planned.

Trustees are invited to attend relevant training as well as sharing learning and skills through facilitated sessions and joining external charity governance support organisations. Financial training for trustees started this year and more training is planned over the year ahead. Additional training will be offered on safeguarding and other areas of interest / good practice as the need arises to

ensure the skills of the Board remain relevant and up-to-date. A regular board skills audit has been introduced, and trustee recruitment is anticipated over the coming year to strengthen board capacity and address specific gaps in terms of skills and/or diversity.

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. An HR consultant has been engaged to support the CEO with a structure review, and to develop our future people strategy.

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.

Two new trustees were appointed over the past financial year: Lewis Batkin and Helena Roy. Tatyana Karpinskaya) joined as Treasurer in April 2023 to replace the previous treasurer who stepped 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.

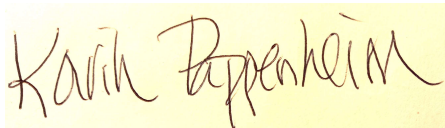
The trustees are responsible for the maintenance and integrity of the corporate and financial information included on the charitable company's website. Legislation in the United Kingdom governing the preparation and dissemination of financial statements may differ from legislation in other jurisdictions.

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 2023 was 7. 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 15 December 2023 and signed on their behalf by



Karin Pappenheim

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 2023 which are set out on pages 30 to 42.

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:



Date

18 December 2023

Shruti Soni FCCA ACIE

Shruti Soni Ltd

117a St Johns Hill

Sevenoaks, TN13 3PL

SOCIAL ACTION FOR HEALTH

STATEMENT OF FINANCIAL ACTIVITIES

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

For the year ended 31 March 2023

	Note	Unrestricted Funds 2023 £	Restricted Funds 2023 £	Total Funds 2023 £	Restated Unrestricted Funds 2022 £	Restated Restricted Funds 2022 £	Restated Total Funds 2022 £
INCOME FROM							
Donations and legacies	2	1,190	364,100	365,290	42,109	365,934	408,043
Charitable activities	3	272,441	3,538	275,979	436,912	7,000	443,912
Investment income: bank interest		1,653	-	1,653	18	-	18
Other income		41,351	-	41,351	300	-	300
TOTAL INCOME		316,635	367,638	684,273	479,339	372,934	852,273
EXPENDITURE ON:							
Raising funds	5	20,168	37,885	58,053	88,433	-	88,433
Charitable activities	5						
Consultancy, Management and Training		3,448	-	3,448	40,703	-	40,703
Community Health Research		41,538	11,522	53,060	190,340	129	190,469
Long Term Conditions Support		117,948	311,274	429,222	166,749	139,638	306,387
Pregnancy, Birth and Early Parenthood		30,125	9,012	39,137	3,155	8,912	12,067
Youth Health		17,251	10,094	27,345	4,413	-	4,413
Financial and Digital Wellbeing		13,703	18,331	32,034	-	-	-
Project Development and New Initiatives		502	-	502	869	-	869
		224,515	360,233	584,748	406,229	148,679	554,908
TOTAL EXPENDITURE		244,683	398,118	642,801	494,662	148,679	643,341
Net income / (expenditure) for the year before transfers		71,952	(30,480)	41,472	(15,323)	224,255	208,932
Transfer between funds	15	-	-	-	(4,750)	4,750	-
NET INCOME/(EXPENDITURE) FOR THE YEAR		71,952	(30,480)	41,472	(20,073)	229,005	208,932
RECONCILIATION OF FUNDS							
TOTAL FUNDS AT 1 APRIL 2022		195,768	274,823	470,591	215,841	45,818	261,659
TOTAL FUNDS AT 31 MARCH 2023		£ 267,720	£ 244,343	£ 512,063	£ 195,768	£ 274,823	£ 470,591

All income and expenditure has arisen from continuing activities

The annexed notes form part of these financial statements

SOCIAL ACTION FOR HEALTH
(company limited by guarantee number 02954744)

BALANCE SHEET
(company limited by guarantee number 02954744)
As at 31 March 2023

	Notes	£	2023 £	£	2022 £
FIXED ASSETS					
Tangible assets	12		6,318		10,308
CURRENT ASSETS					
Debtors	13	68,240		102,712	
Cash at bank and in hand		451,288		548,962	
		<u>519,528</u>		<u>651,674</u>	
CREDITORS: amounts falling due within one year	14	(13,783)		(191,391)	
NET CURRENT ASSETS			505,745		460,283
NET ASSETS			<u>£ 512,063</u>		<u>£ 470,591</u>
FUNDS					
Restricted funds	15		244,343		274,823
Unrestricted funds	15		267,720		195,768
			<u>£ 512,063</u>		<u>£ 470,591</u>

For the year ended 31 March 2023 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 ...15th December 2023... and signed on their behalf by:-



KARIN PAPPENHEIM, Chair

The annexed notes form part of these financial statements

SOCIAL ACTION FOR HEALTH

STATEMENT OF CASHFLOWS For the year ended 31 March 2023

	2023		2022	
	£	£	£	£
Cash flows from operating activities		41,472		208,932
Add back depreciation		3,990		3,990
Net cash provided by / (used in) operating activities				
(Increase)/decrease in debtors	34,472		(6,190)	
Increase/(decrease) in creditors	(177,608)		31,124	
		(143,136)		24,934
Cash flows from investing activities				
Purchase of fixed assets		-		-
Change in cash and cash equivalents in the year		(97,674)		237,856
Cash and cash equivalents at the beginning of the year		548,962		311,106
Cash and cash equivalents at the year end		451,288		548,962

NOTES TO THE FINANCIAL STATEMENTS

For the year ended 31 March 2023

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.

NOTES TO THE FINANCIAL STATEMENTS

For the year ended 31 March 2023

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.

NOTES TO THE FINANCIAL STATEMENTS

For the year ended 31 March 2023

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 £1000 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 £10,075 (2022 - £7,465).

SOCIAL ACTION FOR HEALTH

NOTES TO THE FINANCIAL STATEMENTS For the year ended 31 March 2023

2. DONATIONS AND LEGACIES

	Unrestricted	Restricted	Total	Restated Unrestricted	Restated Restricted	Restated Total
	Funds	Funds	Funds	Funds	Funds	Funds
	2023	2023	2023	2022	2022	2022
	£	£	£	£	£	£
Trusts and foundations	-	364,100	364,100	-	357,044	357,044
Corporates	1,000	-	1,000	-	-	-
Other donations	190	-	190	42,109	8,890	50,999
	<u>£ 1,190</u>	<u>£ 364,100</u>	<u>£ 365,290</u>	<u>£ 42,109</u>	<u>£ 365,934</u>	<u>£ 408,043</u>

Other donations 2022 include £41,994 of government funding through the Coronavirus Job Retention Scheme - none in the current year.

3. INCOME FROM CHARITABLE ACTIVITIES

	Unrestricted	Restricted	Total	Restated Unrestricted	Restated Restricted	Restated Total
	Funds	Funds	Funds	Funds	Funds	Funds
	2023	2023	2023	2022	2022	2022
	£	£	£	£	£	£
Consultancy, Management and Training	9,001	-	9,001	61,708	-	61,708
Long Term Conditions Support	189,208	3,538	192,746	171,192	1,000	172,192
Community Health Research	63,849	-	63,849	187,412	-	187,412
Pregnancy, birth and early parenthood	5,000	-	5,000	-	6,000	6,000
Project Development and New Initiatives	833	-	833	16,600	-	16,600
Youth Health	4,550	-	4,550	-	-	-
Financial and Digital Wellbeing	-	-	-	-	-	-
	<u>£ 272,441</u>	<u>£ 3,538</u>	<u>£ 275,979</u>	<u>£ 436,912</u>	<u>£ 7,000</u>	<u>£ 443,912</u>

4. PRIOR YEAR ADJUSTMENT

During the year, it was discovered that restricted grant income of £67,223 from one source was registered as income from charitable activities in 2022. The comparatives have been restated to move this to donations and legacies. This has resulted in an increase in restricted Donations and Legacies income in 2022, from £298,711 to £365,934 and a decrease in restricted Income from Charitable Activities from £74,223 to £7,000.

SOCIAL ACTION FOR HEALTH

NOTES TO THE FINANCIAL STATEMENTS For the year ended 31 March 2023

5. ANALYSIS OF EXPENDITURE

	Staff costs £	Direct costs £	Support & governance £	Total 2023 £	Total 2022 £
Consultancy, Management and Training	541	2,457	450	3,448	40,703
Community Health Research	27,063	3,469	22,528	53,060	190,469
Long Term Conditions Support	210,795	42,957	175,470	429,222	306,387
Pregnancy, Birth and Early Parenthood	19,655	3,121	16,361	39,137	12,067
Youth Health	13,005	3,514	10,826	27,345	4,413
Project Development and New Initiatives	274	-	228	502	869
Financial and Digital Wellbeing	16,171	2,402	13,461	32,034	-
	<u>287,504</u>	<u>57,920</u>	<u>239,324</u>	<u>584,748</u>	<u>554,908</u>
Fundraising	11,003	37,891	9,159	58,053	88,433
Support & governance	121,022	127,461	(248,483)	-	-
	<u>£ 419,529</u>	<u>£ 223,272</u>	<u>£ Nil</u>	<u>£ 642,801</u>	<u>£ 643,341</u>

NOTE 5 ANALYSIS OF EXPENDITURE CONTINUED - 2022

	Staff costs £	Direct costs £	Support & governance £	Total 2023 £
Consultancy, Management and Training	2,090	36,918	1,695	40,703
Community Health Research	99,179	10,892	80,398	190,469
Long Term Conditions Support	154,004	27,542	124,841	306,387
Pregnancy, Birth and Early Parenthood	5,566	1,989	4,512	12,067
Youth Health	2,437	-	1,976	4,413
Project Development and New Initiatives	480	-	389	869
	<u>263,756</u>	<u>77,341</u>	<u>213,811</u>	<u>554,908</u>
Fundraising	48,841	-	39,592	88,433
Support & governance	127,799	125,604	(253,403)	-
	<u>£ 440,396</u>	<u>£ 202,945</u>	<u>£ Nil</u>	<u>£ 643,341</u>

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, £244,683 was unrestricted (2022 - £494,662) and £398,118 was restricted (2022 - £148,679).

SOCIAL ACTION FOR HEALTH

NOTES TO THE FINANCIAL STATEMENTS

For the year ended 31 March 2023

6. NET INCOME / EXPENDITURE FOR THE YEAR

This is stated after charging / crediting:

	2023	2022
	£	£
Independent auditor's / examiner's remuneration:		
Independent examiner's fees	1,200	1,200
Operating lease rentals payable:		
Property	15,249	42,416
Other	-	3,542

7. STAFF COSTS AND NUMBERS

	Total Funds 2023 £	Total Funds 2022 £
Salary costs		
Wages and salaries	384,198	401,294
Social security costs	25,256	31,637
Pension costs	10,075	7,465
	<u>£ 419,529</u>	<u>£ 440,396</u>

The average number of employees (head count based on number of staff employed) during the year was 28 (2022 - 37).

The total employee benefits, including pension contributions, of the key management personnel were £65,510 (2022 - £62,690).

During the year, no employee earned more than £60,000 (2022 - the same).

8. 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 contributions.

9. 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 (2022 - £nil). No charity trustee received payment for professional or other services supplied to the charity (2022 - £nil).

No expenses were paid to the Trustees (2022 - the same).

SOCIAL ACTION FOR HEALTH

NOTES TO THE FINANCIAL STATEMENTS

For the year ended 31 March 2023

10. RELATED PARTY TRANSACTIONS

Other than trustees' expenses above, there are no reportable related party transactions to disclose for 2023 (2022 - none).

11. TAXATION

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

12. TANGIBLE FIXED ASSETS

	Leasehold improvements £	Fixtures and fittings £	Office equipment £	Total £
Cost				
At 1 April 2022	48,934	29,420	34,711	113,065
Depreciation				
At 1 April 2022	48,934	29,420	24,403	102,757
Charge for the year	-	-	3,990	3,990
At 31 March 2023	48,934	29,420	28,393	106,747
Net book value				
At 31 March 2022	£ Nil	£ Nil	£ 10,308	£ 10,308
At 31 March 2023	£ Nil	£ Nil	£ 6,318	£ 6,318

13. DEBTORS

	2023 £	2022 £
Due within one year		
Trade debtors	91,208	102,712
- Less provision for bad debts	(23,968)	-
Accrued income	1,000	-
	<u>£ 68,240</u>	<u>£ 102,712</u>

SOCIAL ACTION FOR HEALTH

NOTES TO THE FINANCIAL STATEMENTS For the year ended 31 March 2023

14. CREDITORS: AMOUNTS FALLING DUE WITHIN ONE YEAR

	2023 £	2022 £
Trade creditors	1,300	1,300
Deferred income	-	140,806
Social security and other taxes	10,427	7,422
Pension	-	1,755
Accruals	2,056	40,108
	<u>£ 13,783</u>	<u>£ 191,391</u>
<u>Deferred income</u>		
Balance at 1 April 2022	140,806	50,360
Amount released to incoming resources	(140,806)	(50,360)
Amount deferred in the year	-	140,806
	<u>£ Nil</u>	<u>£ 140,806</u>

15. STATEMENT OF FUNDS

	Brought Forward £	Incoming Resources £	Resources Expended £	Transfers and investment gains/(losses) £	Carried Forward £
RESTRICTED FUNDS					
Long Term Conditions Support					
Good Friends	7,256	4,118	(8,180)	-	3,194
My Moves	37,865	3,538	(41,403)	-	-
BAME Mental Health	57,931	129,276	(74,945)	-	112,262
4 Sight Sunday Lunches	1,248	-	-	-	1,248
Pregnancy, Birth and Early Parenthood					
Sure STEPS	14,846	-	(8,876)	-	5,970
Community Health Research					
Covid Vaccine Uptake	9,130	15,000	(24,130)	-	-
Financial and Digital Wellbeing	100,000	40,000	(18,331)	-	121,669
Other					
Core and Project Development	46,547	175,706	(222,253)	-	-
	<u>£ 274,823</u>	<u>£ 367,638</u>	<u>£ (398,118)</u>	<u>£ Nil</u>	<u>£ 244,343</u>
SUMMARY OF FUNDS					
General Funds	195,768	316,635	(244,683)	-	267,720
Restricted Funds	274,823	367,638	(398,118)	-	244,343
	<u>£ 470,591</u>	<u>£ 684,273</u>	<u>£ (642,801)</u>	<u>£ Nil</u>	<u>£ 512,063</u>

SOCIAL ACTION FOR HEALTH

NOTES TO THE FINANCIAL STATEMENTS

For the year ended 31 March 2023

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 - 2022

	<i>Brought Forward</i>	<i>Incoming Resources</i>	<i>Resources Expended</i>	<i>Transfers and investment gains/(losses)</i>	<i>Carried Forward</i>
	£	£	£	£	£
RESTRICTED FUNDS					
<i>Long Term Conditions Support</i>					
<i>Good Friends</i>	14,955	8,000	(15,700)	-	7,255
<i>My Moves</i>	29,615	67,223	(58,973)	-	37,865
<i>BAME Mental Health</i>	-	60,593	(2,662)	-	57,931
<i>4 Sight Sunday Lunches</i>	1,248	-	-	-	1,248
<i>Pregnancy, Birth and Early Parenthood</i>					
<i>Sure STEPS</i>	-	18,223	(8,127)	4,750	14,846
<i>Community Health Research</i>					
<i>Covid Vaccine Uptake</i>	-	10,000	(870)	-	9,130
<i>Financial and Digital Wellbeing</i>	-	100,000	-	-	100,000
<i>Other</i>					
<i>Core and project development</i>	-	108,895	(62,347)	-	46,548
	<u>£ 45,818</u>	<u>£ 372,934</u>	<u>£ (148,679)</u>	<u>£ 4,750</u>	<u>£ 274,823</u>
SUMMARY OF FUNDS					
<i>General Funds</i>	215,841	479,339	(494,662)	(4,750)	195,768
<i>Restricted Funds</i>	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>

16. ANALYSIS OF NET ASSETS BETWEEN FUNDS

	Unrestricted Funds		Restricted Funds	Total Funds
	Designated Funds	General Funds	Funds	Funds
	£	£	£	£
Tangible fixed assets	-	6,318	-	6,318
Net current assets	-	261,402	244,343	505,745
	<u>£ Nil</u>	<u>£ 267,720</u>	<u>£ 244,343</u>	<u>£ 512,063</u>

SOCIAL ACTION FOR HEALTH

NOTES TO THE FINANCIAL STATEMENTS

For the year ended 31 March 2023

2022

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

17. 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 (2022 - 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).

18. 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.