

# BETHEL HEALTH AND HEALING NETWORK

England & Wales · Charity number 1116225

## Details

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**Status** Registered

**Legal form** Charitable company

**Company number** [05813084](#)

**Registered** 2006-09-26

**Register** [View on the Charity Commission register](#)

## Contact

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**Website** [www.bethelnetwork.org.uk](http://www.bethelnetwork.org.uk)

## Activities

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**Objects:** (A) THE RELIEF OF SICKNESS AND THE PRESERVATION AND PROTECTION OF GOOD HEALTH THROUGH THE PROVISION OF A CHRISTIAN HEALTH AND HEALING SERVICE IN PARTICULAR BUT NOT EXCLUSIVELY BY THE PROVISION OF COUNSELLING, PRAYER AND HEALING, HEALTH ADVICE, SUPPORT AND HEALTHY LIVING ACTIVITIES.(B) TO ADVANCE EDUCATION BY THE PROVISION OF SUPPORT, ADVICE AND TRAINING ON HEALTH AND HEALING AND THROUGH THE PROVISION OF FACILITIES.

**Activities:** The Bethel network is a Christian organisation, which exists to promote the health and well-being of the people of Birmingham and its environs. We achieve this providing a range of support through counselling, parish nursing and in the future a Health & Healing Centre offering a variety of services. We are currently providing practical support to the people of Sparkhill and Sparkbrook.

## Classification

- **How:** Provides Human Resources, Provides Buildings/facilities/open Space, Provides Services, Provides Advocacy/advice/information, Acts As An Umbrella Or Resource Body
- **What:** General Charitable Purposes, Education/training, The Advancement Of Health Or Saving Of Lives, Disability, The Prevention Or Relief Of Poverty, Accommodation/housing, Religious Activities, Amateur Sport, Economic/community Development/employment
- **Who:** Children/young People, Elderly/old People, People With Disabilities, The General Public/mankind

## Geography

- Birmingham City

## Finances

Period end	Income	Expenditure	Assets	Employees
2025-03-31	£358,035	£340,673	-	-
2024-03-31	£393,839	£386,053	-	-
2023-03-31	£301,352	£374,002	-	-
2022-03-31	£305,725	£378,998	-	-
2021-03-31	£383,490	£284,797	-	-

## Trustees

Name	Role	Appointed
Dr Fanny Iklaki		2024-12-11
Duncan Roland Moore		2021-08-01
Jeanette Burrows		2022-11-30
Jonathan Graham Hindle		2019-03-21
Marlene Owens		2026-02-25
Patricia Ann Carvalho		2023-10-25

**BETHEL HEALTH AND HEALING NETWORK**

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# Accounts

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# IMPACT & FINANCE REPORT 2024-2025





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# REFLECTIONS FROM THE CHAIR



I would like to take this opportunity as Chair of Bethel Health and Healing Network, to thank our wonderful Team, headed up by our CEO, Jennifer Jones-Rigby. Through turbulent waters she has navigated Bethel with hard graft, courage, skill and a sensitivity which always translate in providing the very best for our service users. As for the Senior Management (SMT) and staff, I'm always in awe how they demonstrate every single day that they are always prepared to go above and beyond in ensuring that every service users need are fully met. To our team of volunteers, where would we be without you? You're unwavering support across all the services that Bethel provide makes me immensely proud of the high level of excellence that you give, not just of your time, but quality in every effort that you do on a daily basis. Last, but not least, my team of trustees that make my role of Chair so much more easier. You are a pleasure to work alongside. Your collective wisdom, in ensuring that the organisation stays on track from a governance and legal standpoint and the support for the whole team at the charity, says everything about you that is the embodiment and soul of Bethel.

You will hear all the details about how we have done and our future plans in the CEO's report, but this year, as Chair I really felt compelled to elevate all those who have assisted and supported the collective success of Bethel. Finally, to our patron Beverley Lindsey OBE. OD, you have been a rock with your support for Bethel during 2025 and in previous years and we look forward to our continued walk into 2026 with you.

**Duncan Moore**

# CEO'S STATEMENT



If I had to sum up Bethel's last year in four phrases, they would be:

- Phenomenal services provided by our teams
- New and evolving partnerships
- Income generation
- Expanding our horizons

In what continues to be a challenging time globally, many of our local communities are also facing difficult circumstances — including unfair treatment and increasing threats to the spaces meant to keep them safe. I would like to thank our incredible teams and volunteers for their tireless dedication. Every single one of them goes above and beyond to support the people they serve.

Many public services are having to make significant efficiencies in their budgets. As a charity CEO, this is something we must also consider each year as we strive to do more with less.

I want to commend our commissioners for continuing to recognise the value in what we do to support the most vulnerable within our communities. I am delighted to report that through various funding submissions, grants, and passive giving, Bethel has achieved improved financial performance over the previous year. This progress has brought us closer to meeting our reserves target and has enabled us to generate a healthy surplus.

Our new Fairer Futures initiative has created a platform for increased partnership working and provided pathways into employment for some of the most disadvantaged communities in the city. It has also enabled us to develop “maternal voice notes” in collaboration with our Doula Team, SOS Education, and the Midwifery Teams at the new Midland Metropolitan University Hospital — a first for our city.

# CEO'S STATEMENT

(CONTINUED...)

Additionally, we have launched the first of our listening groups in West Birmingham for the first time. These groups tackle real issues faced by individuals, providing safe spaces for community members to speak openly, be heard, and gain tools to improve their mental wellbeing.

Our Bumps, Birth and Beyond group meets weekly and is supported through Warm Welcome funding from Birmingham City Council. This group provides a safe, welcoming space for some of the most vulnerable women to connect and learn more about their pregnancy journey.

Our YUMs teenage pregnancy support group in North Solihull was initially funded for one year through the Fairer Futures pilot. We have since been able to continue this important work thanks to funding from the Jamaica Nurses Association. We are also delighted to confirm new Awards for All funding from September 2025 to September 2026, which will allow us to extend this unique support to Erdington and other areas in need.

We will continue working closely with the teenage pregnancy midwives based at Good Hope Hospital.

My work with the Living Well UK Board continues at pace, representing the sector on matters of mental health and wellbeing. This includes contributing to the strategic development of services across the city and serving as a member of the Mental Health Panel. I have also contributed to the Quality Surveillance Group and Clinical Oversight Group (QSG/COG) of the Mental Health Foundation Trust and taken part as a panellist speaking to local schools about careers in mental health and wellbeing.

Over the past year, my focus has been on building resilience — a theme that will continue to guide both our financial planning and the wellbeing of our teams and volunteers. This has also been a year of creating new opportunities to diversify Bethel's offerings, including the foundation for launching a private Doula platform.

# CEO'S STATEMENT

(CONTINUED...)

This initiative will generate additional income to fund baby packs for vulnerable mothers, while also supporting mothers who wish to pay for Doula services. By choosing a Doula from our platform, these clients will know they are supporting a professional who has been verified by Bethel, and some trained by us, — and, in doing so, they'll also be helping other mothers who are less fortunate. We are currently in a strong financial position and intend to keep building on that success. In the coming year, we aim to strengthen and expand our partnerships, remain innovative and responsive to community needs, and continue listening to our service users, volunteers, and staff.

We are also laying the groundwork for a major collaborative project with the Big Lottery Fund, alongside our valued partners — Jericho Foundation, and Gilgal.

I look forward to the year ahead with excitement and anticipation for the positive impact we will continue to have in our communities.

**JENNIFER JONES-RIGBY**

# DOULA SERVICE



“Bethel Doula Service provides emotional and practical support to vulnerable pregnant women and new mothers during the antenatal, birth and postnatal period.”

## ACHIEVEMENTS AT A GLANCE



- **Activity (2024/25):**
  - 412 new referrals
  - 442 women supported (incl. groups)
  - 422 Doula 1-2-1 support
  - 1,450 support sessions
  - 33 group sessions.
- **Delivery:**
  - 4 senior doulas + small volunteer team
  - emotional support, advocacy
  - birth support
  - health-appointment attendance
  - essential supplies
  - group learning/activities

## OVERVIEW:

Our 4 senior doulas, with a small team of volunteers, supported 422 vulnerable women during their pregnancies, birth and postpartum period. We provided emotional support, practical supplies, advocacy, birth support, attendance at health appointments, and safeguarded mother and baby, as needed. Our referrals remained high, averaging 36 per month. We supplemented our 1-2-1 Doula Service provision through our group activities: YUMS, Connect, Stay and Play and Bumps, Birth & Beyond.

In January 2025, we also launched our Bethel West Birmingham Health Champions project funded by Fairer Futures initiative in partnership with Your City and Metropolitan Hospitals Charity, SOS Education (supporting Somali women) and BMET College. This project will enable us to bring additional resources into an area of high need to support more vulnerable women, as well as upskilling local people to become Health Champions, increasing their employability and learning opportunities. This programme, and the skills they gain whilst volunteering in the Doula and Rapha Service, will increase pathways to work in future roles within the NHS and the wider voluntary and community sector.

## GROUP LEARNING/ACTIVITIES

**YUMS (Young and Teenage Mums Project):** Our pilot based in Solihull & Chelmsley Wood Family Hubs helped reduce isolation, boosted confidence and developed peer support among young and teenage mothers. The support included: midwife advice (labour, pain relief, postnatal), Umbrella Clinic (contraception/sexual health), sessions on breastfeeding, safe sleeping, healthy relationships, aspirations/careers, smoking cessation, benefits, baby massage and craft activities.

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**Bumps, Birth & Beyond (BBB):** This weekly onsite learning and support group provided a non-judgmental, and safe space that increased confidence and helped prepare mothers for the forthcoming labour and early parenting.

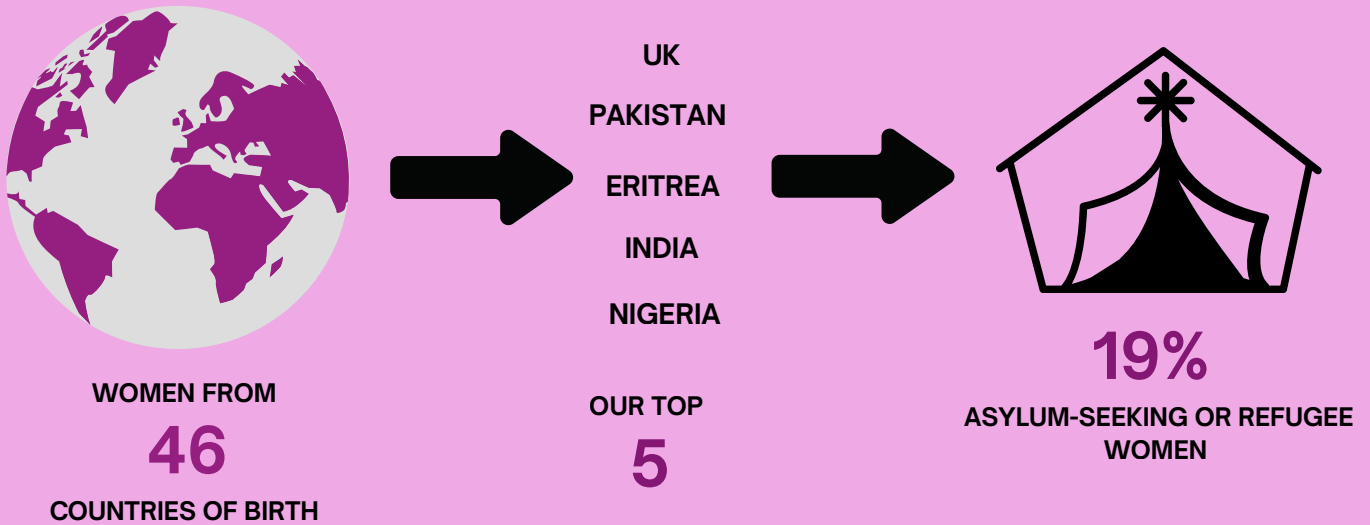
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**Connect, Stay & Play:** Our monthly mother-and-baby group for very vulnerable asylum-seeking women based in 2 local hotels provided practical support, advocacy, and link between women, hotel management, and health professionals.

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## WHO DID WE SUPPORT?



Our service users represented **46** countries of birth; around a fifth of whom were refugee or asylum-seeking women, compared to nearly a third in 2023/24. The largest ethnic group was Black African (31%), followed by Pakistani (16%).

Nearly all our service users were facing one or more challenging life circumstances such as extreme poverty, unstable housing, mental health difficulties, domestic abuse, the impact of FGM and asylum and immigration issues. Language barriers and navigating the health system were frequent barriers when accessing maternity support.

## SATISFACTION AND BENEFITS OF SUPPORT

# 90%

WOULD  
RECOMMEND  
TO FAMILY AND  
FRIENDS

# 89%

SATISFIED WITH THE  
SUPPORT

# 71%

BENEFITED FROM HAVING  
SOMEONE TO TALK TO

# 69%

RECEIVED  
ESSENTIAL SUPPLIES

The value of our service is demonstrated by the high level of satisfaction (**89%**) expressed by service users. **71%** benefited by having someone to talk to, and **69%** received essentials for themselves and their babies. **23%** were signposted to other services that they might otherwise not have accessed.

The financial value of the Doula Service is evident. Typically, it costs the Doula Service **£634** to support a vulnerable woman during pregnancy, labour, and post-birth. This increases to an average of **£1,732** in more complex cases for example where there are more severe perinatal mental health and/or safeguarding needs.

Our case studies demonstrate the additional costs avoided through the delivery of our professional and compassionate community-based provision.



# WHAT OUR DOULA SERVICE USERS SAID...

## Young Mums Project (YUMS)

“—  
| *The YUMS club gets us moms out of the house that are both pregnant and have had babies as well as getting the babies out to develop on their growth by copying other babies and interacting with toys and new people as well as getting support with things we may be unsure of and asking questions to help develop our babies growth even further and also getting the help when needed physically. It overall helps us mums to not bed rot all day. I also enjoy the little talks with new mums and meeting new people and also allowing our babies to meet and then we can plan stuff outside of the YUMS club too with other mums, for example me and H first met at the YUMS club and are now planning to take our babies out one of the days together, but we was both too scared | to meet at first. —”*

## Bump, Birth and Beyond (BBB)

“—  
| *The BBB sessions were brilliant. The staff were non-judgmental. I felt safe in a safe space to share, ask questions and listen to others sharing their experiences. I felt more confident preparing for and also at the time of giving birth. The service | really helped and prepared me. —”*

“—  
| *The service I received was really helpful. It was helping me when needed, when I did not understand the system, they helped me, and I learnt a lot about pregnancy, birth and the system (maternity services). I would recommend, as people are struggling. Lovely place. Lovely staff. —”*

“—  
| *I did not need anything for the baby. I received emotional support. It was important as it meant a lot to me, as I had a traumatic birth. The service is an all-round service and provides the best emotional support. The doula made me feel comfortable. I could | speak to her about anything. —”*



# DOULA CASE STUDY

## 'M' - Service user with a history of domestic abuse and mental health issues

### Background

'M' was referred to the Doula Service at 26 weeks gestation with her second pregnancy by a mental health specialist midwife due to isolation, domestic abuse, and a history of anxiety and depression.

Coming from a strict family background marked by physical and emotional abuse particularly from her father, 'M' entered an arranged marriage and relocated to Birmingham hoping for freedom but instead faced severe control and exploitation from her in-laws. Her mother-in-law dominated household decisions, restricted her independence, and when she became pregnant, she insisted on attending all maternity appointments and acting as her birth partner, leaving 'M' feeling disconnected from her first child.

### Challenges Identified

'M's' situation worsened as her husband became emotionally distant and controlling, denying her visits from family and friends and undermining her confidence by repeatedly claiming she was unfit to care for her children. Attempts to regain independence, such as finding work and securing her own apartment, were met with continued coercion and psychological abuse. Even after moving out, 'M's' husband maintained control through financial dependency and restrictions on her social life, creating an environment of ongoing stress and insecurity. These experiences left 'M' fearful and struggling with persistent anxiety.

### Interventions

'M' was matched with a Senior Doula who provided ongoing emotional and mental health support through home visits, phone calls and WhatsApp conversations. The support focused on building resilience, self-esteem, and coping strategies, as well as fostering bonding with her child and current pregnancy. 'M' requested that the Senior Doula act as her birth partner for her upcoming delivery, highlighting the trust and reliance she placed on this service.

### Impact and Next Steps

The multi-agency collaboration ensured continuity of care and reduced the risk of crisis escalation. 'M' now has improved emotional stability, a stronger support network, and a clear plan for birth support, reducing safeguarding risks and likelihood of severe mental health deterioration.

# DOULA CASE STUDY

## ‘S’ - Service user with undocumented status due to trafficking and exploitation

### Background

‘S’ a Birmingham resident was referred to the Bethel Doula Service at 16 weeks gestation for support during her first pregnancy. She spoke limited English and had no family support, relying only on a friend and her boyfriend.

‘S’ was invited to attend Bethel’s Birth Bump and Beyond (BBB) group to meet other women, improve her English, and access essential information. At her first session, she appeared tearful and expressed concerns about her baby measuring small and her impending need to leave her friend’s accommodation due to the limited space there.

### Challenges Identified

Further conversations revealed that ‘S’ was undocumented due to a complex migration history involving trafficking and exploitation. She shared that she was lured from Vietnam under false pretences, forced into exploitative work in Cambodia, and later coerced into prostitution in Europe before escaping and arriving in the UK in a container in December 2022. Her disclosure highlighted severe trauma, lack of immigration status, and vulnerability to homelessness, all while navigating pregnancy without family support.

### Interventions

The Senior Doula and the team provided immediate emotional support and reassurance, accompanied her to a hospital scan, and initiated contact with multiple agencies, including Hope, Salvation Army, and Migrant Help.

A Vietnamese translator facilitated detailed discussions about her immigration status, leading to advice for her to claim asylum. A volunteer assisted in booking her asylum appointment for December 1st and committed to accompanying her. The Doula also liaised with the referrer to ensure coordinated care.

### Impact and Next Steps

The intervention reduced the service user’s immediate stress and provided a clear pathway for immigration and housing support. In addition to the 1-2-1 support, ‘S’ has agreed to attend BBB sessions regularly for continued emotional and practical assistance throughout her pregnancy. The collaborative approach aims to stabilise her situation, address accommodation needs, and ensure a smooth transition to community care post-birth, minimising hospital stays.

This case underscores the critical role of holistic support in safeguarding a vulnerable pregnant women like ‘S’ and mitigating risks associated with trafficking and undocumented status.

# POTENTIAL COST SAVINGS

## Case Studies ‘M’ & ‘S’

The Doula Service support demonstrates significant financial and social value while improving maternal and child outcomes. The case studies involving ‘M’ and ‘S’ highlighted early Doula intervention and multi-agency collaboration. The prevention of crisis escalation reduced demand on safeguarding, perinatal mental health and social services, which can cost thousands per case as well as reduced the likelihood of extended hospital stays post-birth by working towards a smooth community transfer.

**A cost example:** A complex case can involve a short postnatal hospital stay at a cost to the NHS of £1,927. Add 3 additional 3 antenatal (£300) and 3 postnatal (£426) midwife visits the cost would increase to £2,653. Should a week’s stay in perinatal mental health unit be required a further £10,899 would be added resulting in a total cost to the NHS of **£13,552**. It typically costs the Doula Service **£1,515** to support a woman in a complex case (£1,732 with birth partner support). This can involve between 20-30 interactions by Doula staff with the service user during the antenatal, intrapartum and postnatal period. Our support limits the demand on other agencies involved in her care and support.

The table below outlines potential cost savings:

Potential Cost Component	National average unit costs
In-patient stay in perinatal mental health mother & baby unit	£1,557*
Specialist Perinatal Mental Health Community Service	£329*
Health visiting service - community midwife ante-natal visit	£100 per visit*
Health visiting service - community midwife post-natal visit	£142 per visit*
Ante-natal complex disorders – inpatient short stay	£733 *
Postnatal therapeutic procedures – inpatient short stay	£1,927*
Additional GP appointments during antenatal and postnatal period	£45 per 10 min appointment **
Emergency accommodation costs to avoid homelessness for mother and baby	Estimated £50–£90 per night (annualised £18,000–£32,000)
Emergency safeguarding interventions and potential foster care placement	Estimated £615+ per week ***

\*2024/25 NHS National Cost Collection Data 2024/25 – the average unit cost of providing defined services to NHS patients in England

\*\*The University of Kent’s Academic Repository KAR - Unit Costs of Health and Social Care 2024 – version 2

\*\*\*Birmingham City Council Observatory 2024

# RAPHA LISTENING SERVICE



Rapha  
Listening  
Service

“The Rapha Listening Service supports people from diverse community backgrounds in their journey toward better mental health and well-being. We provide early intervention, interim or follow-on support through matching with a trained listener for up to 9 listening sessions.

## ACHIEVEMENTS AT A GLANCE

**376**

SUPPORT SESSIONS  
DELIVERED

**236**

HOURS OF LISTENING  
SUPPORT

**301**

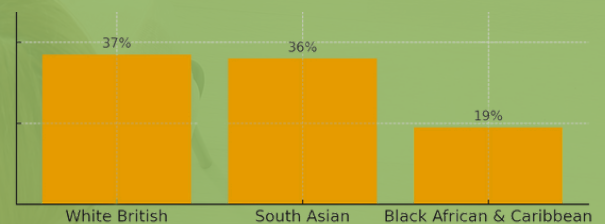
LISTENING SESSIONS

Our service users were typically referred for low mood (39%), anxiety (19%) and depression (16%). However, at initial assessment and during subsequent listening sessions, service users often disclosed other support needs, including long-term health conditions, historical trauma and more severe diagnosed and undiagnosed mental health issues. Some were on waiting lists to access NHS mental health and other related services.

Our team of 2 staff and 29 volunteers supported 94 people and delivered 376 support sessions, including signposting and facilitating referrals to other community and mental health services as needed. On average, service users received 5.5 hours of direct listening support.

## THIS YEAR WE SUPPORTED 94 PEOPLE

**71%: Female**



# RAPHA CASE STUDY

## 'C' - service user experiencing anxiety due to a difficult living environment

### **Background**

'C' is a 71-year-old White British woman who lives alone. When she first accessed the listening service, she was distressed due to ongoing issues involving excessive noise, vibrations, and unpleasant smells from neighbouring flats, which she believed were affecting her physical health, causing coughing, breathing difficulties, and skin irritation. The situation had left her feeling harassed, anxious, and felt her home no longer felt like a secure or comfortable place to live. This distress also impacted her sense of independence and emotional well-being. Although she sometimes stayed with her children for relief, she found this disrupted her routine and sense of stability. Despite these challenges, 'C' showed emotional resilience and expressed a desire for a peaceful and independent life.

### **Intervention**

'C' was referred to Bethel by a social prescriber and matched with a trained volunteer listener. Throughout her listening sessions, 'C' engaged well with the listener and gradually began reintroducing small but meaningful activities into her daily life. She resumed watching television, knitting, and playing games on her iPad—activities she had previously abandoned. She also used headphones to listen to music to manage the noise from her neighbours. These small steps helped her regain some control over her environment and mood.

'C' responded very positively to the support she received. She valued the consistency and empathy shown by the listener and appreciated having a safe space where she felt heard and validated. She described the listener as reliable and supportive and took pride in the mutual learning that took place during their conversations.

### **Impact**

By the end of the 9 sessions, 'C' was more hopeful and emotionally strong. She said the sessions gave her a chance to "let it all out" and feel seen as someone strong, not just as someone who is struggling. Although her living situation had not yet changed, she remained optimistic about eventually moving to a more peaceful place. 'C' expressed gratitude for the support she received and felt more able to cope with her ongoing challenges.

# RAPHA CASE STUDY

## ‘J’ - service user with work related stress and depression

### **Background**

‘J’ is a 46-year-old Indian female who lives with her mother, brother and dog. She was referred to the listening service by Living Well Consortium due to work related stress and depression that was affecting her everyday life. ‘J’ had been working at a company for over 16 years but was increasingly disliking her place of work due to the toxic environment and bullying and felt that management offered no support. This had started to affect her sleep, appetite and physical health. ‘J’ even started having thoughts to end her life but not because she wanted to die but just wanted her situation to stop. She even got a dog for emotional support which gave her some comfort.

### **Intervention**

‘J’ was matched with a listener where she was able to talk about her work situation and discuss how she felt with the same person enabling her to build trust. Gradually over the course of 9 sessions, ‘J’ became better able to handle her own stress and explore the options available to her to address the work-related issues. She felt empowered to make decisions when a problem occurred, relying less on others to do tasks for her.

### **Impact**

Following her final session, although sad that the support was ending, ‘J’ felt more positive about her situation with clear action plans in place, including accessing further support from her GP should she need it. She expressed that her wellbeing had improved significantly and stated, “It was just being able to speak to someone with an independent mind with no judgement and being reminded of things I have done in the past. I was going through a difficult situation, and it helped with strength and encouragement. The lady as was lovely she was so kind. It was the right time in my life to talk.”

# POTENTIAL COST SAVINGS

## Case Studies 'C' & 'J'

Both 'C' and 'J' felt their mental health problems were increasing that would potentially have required more acute mental health interventions from the community mental health team, and additional GP appointments. It typically costs the Rapha Listening Service between **£282 - £394** to provide 9 listening sessions depending on the complexity, compared to **£1,700** for an average 8 IAPT sessions including assessment and follow-up appointment. However, the opportunity to talk through their concerns with their Rapha Service listeners resulted in an overall improvement in their mental health without more costly NHS funded mental health interventions.

The table below outlines potential costs avoided:

Potential Cost Component	National average unit costs
Community Mental Health Team (functional)	£279*
Acute adult mental health care	£719*
IAPT Assessment	£168*
IAPT Treatment	£174*
Follow-up appointment after IAPT treatment end	£140*
GP appointment	£45 per 10 min appointment

\* 2024/25 NHS National Cost Collection Data 2024/25 – the average unit cost of providing defined services to NHS patients in England.

\*\*The University of Kent's Academic Repository KAR - Unit Costs of Health and Social Care 2024 – version 2.

# WHAT OUR RAPHA SERVICE USERS SAID...



“When I first started talking, I found it difficult, but at the end, I felt more comfortable approaching my audience. Sometimes it's hard to talk about my problems with my family and friends. I thought the phone conversation was beneficial and helped me have the confidence to speak. I feel more comfortable talking to people about my personal problems and topics that I was previously afraid to discuss.”

**BRITISH ASIAN FEMALE, 58, REFERRED DUE TO BEREAVEMENT**

“I let out things that I have had on my mind for years and years. Things that happened to me from age 8/9, I am now in my 70s. Sometimes, I was not feeling well, and they were patient with me and gave me time to talk. The lady who listened to me was brilliant...she really helped me. I would like to access listening services again as I feel lonely.”

**BRITISH ASIAN FEMALE, 76, STRUGGLING LIVING ALONE AND GOING OUT INTO THE COMMUNITY**

## BY THE END OF THE SUPPORT PERIOD

**97%** SUPPORT RECEIVED MET OR EXCEEDED THEIR EXPECTATIONS

**84%** WOULD RECOMMEND THE RAPHA SERVICE

## BENEFITS OF SUPPORT

**66%**  
OVERALL MENTAL HEALTH & WELLBEING IMPROVED

**50%**  
I FEEL MORE ABLE TO COPE WITH MY PERSONAL SITUATION

**48%**  
I FEEL MORE ABLE TO COPE WITH MY RELATIONSHIPS

**50%**  
I FEEL MORE POSITIVE ABOUT THE THEMSELVES

**31%**  
I HAVE BEEN SUPPORTED TO ACCESS OTHER SERVICES

# WHAT OUR RAPHA SERVICE USERS SAID...



“—  
| *My expectations were very low, so  
| my expectations were exceeded.  
| They were patient and listened and  
| gave me time and space to speak and  
| actually listened.* —”

**Black British Female aged 58,  
referred for low mood and anxiety  
around health issues**

“—  
| *The person was supportive and  
| positive. She made me realise that I  
| have other things to think about.  
| Useful to speak with someone in own  
| language.* —”

**Pakistani Female, 43, referred due  
to depression and loss**

“—  
| *The listener was good. Everyone was  
| very friendly, 'Good Vibe', which was  
| good...I did not feel like I was walking  
| into the Lion's den. It was not  
| confrontational. For me, it was  
| excellent.* —”

**Male, 66, referred due to relationship  
breakdown**

“—  
| *When I first started talking, I found it  
| difficult, but at the end, I felt more  
| comfortable approaching my  
| audience. Sometimes it's hard to talk  
| about my problems with my family  
| and friends. I thought the phone  
| conversation was beneficial and  
| helped me have the confidence to  
| speak. I feel more comfortable talking  
| to people about my personal  
| problems and topics that I was  
| previously afraid to discuss.* —”

**British Asian Female, 58, referred  
due to bereavement**

# VOLUNTEERING AT BETHEL



“Overall, I have found my experience as a volunteer rewarding. Being able to listen & support others who need support & them trusting you is such an amazing privilege. Being supported as a listener is a huge requirement, especially when it’s an intensive case. I’ve been very supported throughout, but especially with a recent intense case. Everyone I work with at Bethel is welcoming & friendly, just like a big family who understands each other —”

RAPHA LISTENER

## ACHIEVEMENTS AT A GLANCE



“Whenever I ask questions about my concerns and they get answered in the most respectful and honest way. —”

DOULA VOLUNTEER

“I recently received flowers and cakes as a thank you for my work from my manager, and I have also regularly received messages and emails expressing thanks! —”

DOULA VOLUNTEER

Our volunteers are essential to the delivery of our 1-2-1 service users' support and assistance at events and group activities. This year, 38 volunteers were active in our Doula and Rapha Services, including both those who have been volunteering with Bethel over several years and more recently.

## VOLUNTEERS BENEFITED



# WHAT OUR VOLUNTEERS SAID...

“—  
Overall, I have found my experience as a volunteer rewarding. Being able to listen & support others who need support & them trusting you is such an amazing privilege. Being supported as a listener is a huge requirement, especially when it’s an intensive case. I’ve been very supported throughout, but especially with a recent intense case. Everyone I work with at Bethel is welcoming & friendly, just like a big family who understands each other.  
—”

**Rapha Listener**

“—  
Whenever I ask questions about my concerns and they get answered in the most respectful and honest way  
—”

**Volunteer Doula**

“—  
I recently received flowers & cakes as a thank you for my work from my manager, and I have also regularly received messages/emails expressing thanks.  
—”

**Volunteer Doula**

“—  
It has been good to meet and help others less fortunate and to feel that I have something to offer them  
—”

**Rapha Listener**

# ‘J’ DOULA VOLUNTEER CASE STUDY



‘J’ joined Bethel’s Doula Service to support families facing vulnerability. Alongside volunteering, she also worked as a teacher while pursuing a master’s degree in psychology, demonstrating her dedication to personal growth and community service.

Since joining, ‘J’ has strengthened her skills through undertaking Bethel’s Doula Course and Safeguarding Training. These have equipped her with deeper knowledge in providing emotional support, safe practice and trauma-aware care - all of which she applies daily in her work with families.

A standout example of ‘J’ impact came when she supported an immigrant couple during the birth of their second child. With the father at home caring for their toddler, ‘J’ stepped in as the mother’s birth partner at the hospital. She offered continuous reassurance, helped the mother understand what to expect, and gently advocated for her needs during moments of uncertainty.

‘J’ also played a crucial role in keeping the family connected. She provided frequent updates to the father, ensuring he felt involved and informed despite being unable to attend the birth. Her communication reduced stress for both parents and strengthened the family’s sense of security at a critical moment.

By offering calm, compassionate presence and acting as a bridge between home and hospital, ‘J’ embodied the values of Bethel’s Doula Service. Her commitment, strengthened by her training and professional background, continues to make a tangible difference to the well-being of families across the community.

# 'T' RAPHA VOLUNTEER CASE STUDY



'T' joined Bethel's Listening Service motivated by a genuine commitment to supporting individuals experiencing mental health challenges. She provided consistent one-to-one support to two clients, meeting weekly to offer a safe, confidential space where they could talk openly about their struggles. Her reliability and gentle approach helped service users feel grounded, understood and less isolated during vulnerable moments.

T's contribution extended beyond individual support. She is an active part of the Fairer Futures Project where she assists the facilitator in running monthly mental health wellbeing sessions enabling participants to engage more fully and feel supported within the group environment. She has also had the opportunity to facilitate and deliver a suicide awareness course for Bethel's staff and volunteers, strengthening the organisation's capacity to respond safely and confidently to individuals in distress.

Despite balancing personal responsibilities, 'T' continues to volunteer with dedication. She views the experience as both enriching and purposeful, valuing the opportunity to make a meaningful difference in people's lives while developing her own skills and confidence. Today 'T' is a valued and trusted presence within the Rapha Listening Service, recognised for the emotional support she provides marked by empathy, patience and attentive listening.

# MARKETING HIGHLIGHTS 2024-25



**Helping more people find support, and more volunteers and partners find us.**

This year, we strengthened Bethel's visibility through consistent email updates and regular social content, sharing service information, community activity, volunteer opportunities, and key moments across the network.

## Email marketing (Mailchimp)

- Total email sends: 5,812
- Average open rate: 36.2% (approx. 2,088 opens)
- Average click rate: 5.2% (approx. 300 clicks)

Campaign output: 32 email campaigns across the year, including 9 newsletters and key service and event updates.

## Social media (Facebook + Instagram)

Total content views: 44,684

- Facebook views: 32,463
- Instagram views: 12,221

Total interactions: 730

- Facebook interactions: 436
- Instagram interactions: 294

Profile / page visits: 2,423

- Facebook visits: 1,924
- Instagram profile visits: 499

Peak months (views):

- December: 9,083 total views
- November: 8,040 total views

## LinkedIn (organic)

- 8 posts published
- 1,092 impressions
- 145 clicks
- 50 reactions, 2 reposts

Content celebrating volunteers, partnerships, and community moments generated the strongest response.

# FINANCIAL REVIEW AND STATEMENTS



Income for the year amounted to £358,035 (2024: £393,839) whilst expenditure was £340,673 (2024: £386,053). This resulted in a surplus of £17,362 (2024: £7,787) and an increase in funds for the year to £27,247 (2024: £9,885). The plan for 2025 was to continue to build up reserves, this was achieved and will continue to be the focus in the next financial year.

## RESERVES POLICY

Reserves are required to:

- smooth out surpluses and deficits year on year;
- replace capital expenditure or restructure the organisation;
- deal with the effects of any risks that materialise e.g. significant losses of income and delays in payments;
- allow the organisation to take on opportunities that may arise in a timely manner;
- deal with the unexpected.

Trustees are required to set an appropriate minimum level of reserves, and in doing so take into account these reasons for holding reserves, as well as current and future financial needs. The trustees have decided to set minimum reserves at 3 months of unrestricted expenditure, as indicative of the operating reserves required by the nature and size of the charity. As at 31 March 2025, that will require minimum free reserves of approximately £105,426 to be held (2024: £98,535). Both the policy and its implementation are under regular scrutiny.

## TRUSTEE RESPONSIBILITIES FOR THE FINANCIAL STATEMENTS

Charity and Company Law require 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 at the balance sheet date and of its incoming resources and application of resources, including income and expenditure for that period. In preparing those financial statements, the Trustees are required to:

Select suitable accounting policies and apply them consistently to:

- Make judgements and estimates that are reasonable and prudent
- State whether applicable accounting standards have been followed, subject to any material departures disclosed and explained in the financial statements
- Prepare the financial statements on the going concern basis, unless it is inappropriate to assume that the Charity will continue in business

The Trustees are responsible for keeping financial records which disclose with reasonable accuracy at any time the financial position of the Charity and that enable them to ensure that the financial statements comply with the Companies Act 2006. They are also responsible for safeguarding the assets of the Charity and hence must take reasonable steps for the prevention and detection of fraud and other irregularities.

## **Bethel Health and Healing Network**

### **Independent Examiners Report to the Trustees of the Bethel Health and Healing Network**

I report on the financial statements of the Charity for the year ended 31st March 2025

#### **Respective responsibilities of trustees and examiner**

The charity's trustees are responsible for the preparation of accounts. The trustees consider that an audit is not required for this year under section 43(2) of the Charities Act 1993 ('the 1993 Act') and that an independent examination is needed. The charity has prepared accrued accounts and I am qualified to undertake the examination.

It is my responsibility to:

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

#### **Basis of Independent Examiner's Statement**

My examination was carried out in accordance with the General Directions given by the Charity Commissioners and with Regulation 11 of the 2006 Regulations. An examination includes a review of the accounting records kept by the organisation, and a comparison of the accounts presented with those records. It also includes consideration of any unusual items or disclosures in the accounts and seeking explanations from you as trustees concerning any such matters. The procedures undertaken do not provide all the evidence that would be required in an audit, and consequently I do not express an audit opinion on the view given by the accounts.

#### **Independent Examiner's Statement**

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

1. which gives me reasonable cause to believe that in any material respect, the requirements: to keep accounting records in accordance with section 41 of the 1993 Act and Regulation 4 of the 2006 Regulations; and to prepare accounts which accord with the accounting records and comply with the accounting requirements of the 1993 Act and Regulation 8 of the 2006 Regulations; and which are consistent with the methods and principles of the Statement of Recommended Practice: Accounting and Reporting by Charities have not been met, or
2. to which, in my opinion, attention should be drawn to enable a proper understanding of the accounts to be reached.

Signed:

*D Chittenden*

Date:

*30th September 2025*

David Chittenden  
18 Cunningham Road  
Peterborough  
PE2 9RG

**Statement of Financial Activities  
Year Ended 31st March 2025**

	Note	Restricted	Unrestricted	Total Funds 2025	Total Funds 2024
<b>Income and Endowments from:</b>					
Donations and legacies	2	73,493	13,298	86,791	85,811
Charitable activities	3	0	270,644	270,644	307,628
Interest			0	0	0
Other income			600	600	400
		<u>73,493</u>	<u>284,542</u>	<u>358,035</u>	<u>393,839</u>
<b>Expenditure on:</b>					
Raising funds	4		12,166	12,166	20,174
Charitable activities	5/6/7	73,493	255,015	328,508	365,878
Total expenditure		<u>73,493</u>	<u>267,180</u>	<u>340,673</u>	<u>386,053</u>
Net income		0	17,362	17,362	7,787
<b>Reconciliation of Funds</b>					
Total Funds brought forward		0	9,885	9,885	2,098
<b>Total Funds carried forward</b>		0	27,247	27,247	9,885
<b>Balance Sheet as at 31st March 2025</b>					
<b>Current Assets</b>					
Debtors	11			5,316	36,102
Cash at bank and in hand	12			<u>79,650</u>	<u>5,894</u>
				<u>84,967</u>	<u>41,997</u>
<b>Current Liabilities</b>					
Liabilities falling due within one year	13			57,720	32,112
<b>Net Assets</b>					
				<u>27,247</u>	<u>9,885</u>
<b>Represented by:-</b>					
Unrestricted Funds	15			27,247	9,885
Restricted Funds	15			0	0
<b>Total Funds</b>				<u>27,247</u>	<u>9,885</u>

The trustees (who are also the directors of the company for the purposes of company law) confirm that for the period ended 31 March 2025:-

- the company was entitled to exemption from audit under section 477 of the Companies Act 2006 ("the Act"), and
- members have not required the company to obtain an audit of its accounts for the period in question in accordance with section 476 of the Act. However, in accordance with section 145 of the Charities Act 2011 and section 44 of the Charities and Trustee Investment (Scotland) Act 2005, the accounts have been examined by an independent examiner.

The trustees acknowledge their responsibilities for complying with the requirements of the Act with respect to accounting records and the preparation of accounts.

The notes form an integral part of these accounts. They have been reviewed in the preparation of these accounts with changes to the classification and presentation.

These accounts, which have been prepared in accordance with the provisions in the Companies Act 2006 relating to small companies, were approved by the trustees on 27/3/25 and signed on their behalf by:

Trustee



Date: 27/3/25

**Notes:**

**1. Accounting Policies**

(a) Basis of Preparation

These accounts have been prepared on the basis of historic cost in accordance with the Accounting Regulations set out under the Charities Act 1993 and with the Charities Statement of Recommended Practice (SORP) 2005 - Second Edition

(b) Form of Financial Statements

- (i) Unrestricted funds are those that may be used at the discretion of the trustees in furtherance of the objects of the charity
- (ii) Restricted funds may only be used by specific purposes. Restrictions arise when specified by the donor or when funds are raised for specific purposes.

(c) Incoming Resources

- (i) Incoming Resources are recognised and included in the Statement of Financial Activities (SOFA) when the Charity becomes entitled to the resources; the trustees are virtually certain they will receive the resources; and the monetary value can be measured with sufficient reliability.
- (ii) Where incoming resources have related expenditure (as with fundraising), the incoming resources and related expenditure are reported gross in the SOFA.
- (iii) Donations are accounted for gross when received.
- (iv) Bank interest is recognised when it is credited to the account.

(d) Expenditure and Liabilities

- (i) Expenditure is accounted for on an accruals basis.
- (ii) Liabilities are recognised as soon as there is a legal or constructive obligation to pay out resources.

(e) Assets

Tangible fixed assets are capitalised if they cost more than £1,000 and can be used for more than one year. They are valued at cost or, if gifted, at value on receipt. The charity does not currently have any capitalised fixed assets.

(f) Taxation

The charity is not liable for income or capital gains tax on its charitable activities. Irrecoverable VAT is included in the asset cost or expense to which it relates.

**2. Income from donations and legacies**

	Restricted	Unrestricted	2025	2024
Donations received	0	1,973	1,973	956
Grants received:				
Albright Grimley Trust		500	500	0
Baron Davenport's Charity		750	750	0
Birmingham City Council	56,864		56,864	
Birmingham Voluntary Service Council			0	5,500
Church Urban Fund	796		796	0
Health Exchange			0	5,998
Heart of England Community Foundation		2,125	2,125	12,000
H J Sayer Trust		1,000	1,000	0
NHS Property Services Limited			0	9,999
Richard Kilcuppe Charity		1,000	1,000	600
The 29th May 1961 Charitable Trust			0	5,000
The Cole Charitable Trust		2,000	2,000	0
The Edward and Dorothy Cadbury Trust		1,500	1,500	0
The Edward Gostlin Foundation			0	0
The Eveson Charitable Trust	15,000		15,000	0
The Grimmitt Trust		1,200	1,200	1,200
The Michael Marsh Charitable Trust			0	2,500
The National Lottery Community Fund	833		833	9,164
The Richard Cadbury Charitable Trust		500	500	0
William A. Cadbury Charitable Trust		750	750	0
Other			0	0
	<b>73,493</b>	<b>13,298</b>	<b>86,791</b>	<b>85,811</b>

### 3. Income from charitable activities

Birmingham & Solihull Mental Health NHS Foundation Trust	24,782	24,782	38,653
Living Well Consortium	35,000	35,000	35,000
NHS Birmingham and Solihull ICB	181,755	181,755	191,975
Sandwell & West Birmingham Hospital NHS Trust	29,107	29,107	42,000
	<u>0</u>	<u>270,644</u>	<u>270,644</u>
			<u>307,628</u>

### 4. Expenditure on generating donations and legacies

#### Unrestricted funds

Raising funds		12,166	20,174
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### 5. Costs of charitable activities by fund type

Doula	46,128	167,072	213,200	197,365
Rapha listening service	27,365	20,371.17	47,736	115,158
Support costs		67,571	67,571	53,356
	<u>73,493</u>	<u>255,015</u>	<u>328,508</u>	<u>365,878</u>

### 6. Costs of charitable activities by activity type

	Activities undertaken			Total
	directly	Support costs	Total	
Doula	213,200	55,210	268,410	231,060
Rapha listening service	47,736	12,362	60,098	134,818
Trusted Charity (PQASSO)			0	0
	<u>260,936</u>	<u>67,571</u>	<u>328,508</u>	<u>365,878</u>

### 7. Analysis of support costs

	2025	2024
Communication costs	4,884	7,812
Office costs	14,307	16,065
Premises costs	23,311	17,256
Legal and professional	32,083	25,072
Other operating costs	16,569	25,885
	<u>91,153</u>	<u>92,090</u>

### 8. Independent examiner's remuneration

The Independent examiner provided services on a voluntary basis so no fee was charged (2024: Nil)

### 9. Trustees' remuneration and expenses

During the year, no Trustees received any remuneration or other benefits and no expenses were claimed (2024: Nil)

### 10. Staff costs and emoluments

Salaries and wages	228,148	271,154
Social security costs	17,895	21,643
Employers contribution to defined contribution pension scheme	6,011	7,049
	<u>252,054</u>	<u>299,846</u>

There were no employees whose emoluments (salaries, wages, benefits in kind) fell in a band in excess of £60,000 (2024: Nil)

The average number of persons employed by the Charity, including part time staff, calculated on a full time equivalent basis was:

Core staff	6.80	8.81
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### 11. Debtors

Accounts Receivable	3,218	33,217
Accrued Revenue	0	0
Prepaid Expenses	2,099	2,886
Other		
	<u>5,316</u>	<u>36,102</u>

### 12. Bank and Cash Balances

TSB current account	79,204	5,461
Triodos deposit account	177	177
Petty Cash	269	256
	<u>79,650</u>	<u>5,894</u>



**13. Current Liabilities (payable within one year)**

Accounts Payable	13,657	20,852
Accruals and deferred income	36,177	2,237
Payroll Liabilities	7,885	9,023
	<u>57,720</u>	<u>32,112</u>

**14. Related party transactions**

Donations without condition of £390 were received from one trustee (2023: £360 from 1 trustee)  
These amounts do not include the gift aid associated with these donations.

**15. Statement of Funds**

	At 1st April 2024	Income	Expenditure	Transfers	At 1st April 2025
<b>Unrestricted Funds</b>					
General	141,500	13,898	12,166		143,233
Doula designated	(131,616)	270,644	255,015		(115,986)
	<u>9,885</u>	<u>284,542</u>	<u>267,180</u>	<u>0</u>	<u>27,247</u>
<b>Restricted Funds</b>					
Doula	0	46,128	46,128		0
Rapha	0	27,365	27,365		0
	<u>0</u>	<u>73,493</u>	<u>73,493</u>	<u>0</u>	<u>0</u>
<b>Total Funds</b>	<u><b>9,885</b></u>	<u><b>358,035</b></u>	<u><b>340,673</b></u>	<u><b>0</b></u>	<u><b>27,247</b></u>

**Prior year**

<b>Unrestricted Funds</b>					
General	131,520	30,155	20,174		141,500
Doula designated	(129,421)	307,628	309,822		(131,616)
	<u>2,098</u>	<u>337,783</u>	<u>329,997</u>	<u>0</u>	<u>9,885</u>
<b>Restricted Funds</b>					
Doula		35,394	35,394		0
Rapha		20,662	20,662		0
	<u>0</u>	<u>56,056</u>	<u>56,056</u>	<u>0</u>	<u>0</u>
<b>Total Funds</b>	<u><b>2,098</b></u>	<u><b>393,839</b></u>	<u><b>386,053</b></u>	<u><b>0</b></u>	<u><b>9,885</b></u>

**BETHEL HEALTH AND HEALING NETWORK**

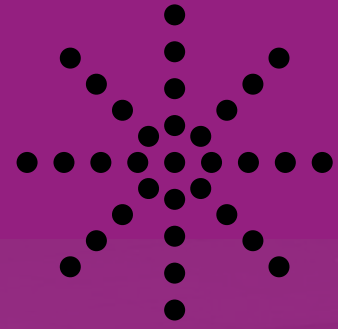
England & Wales - Charity number 1116225

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# Accounts

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# IMPACT & FINANCE REPORT



## POWERFUL PARTNERSHIPS POWERFUL IMPACT



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# REFLECTIONS FROM THE CHAIR



It's been yet another challenging year for Bethel Health and Healing Network (Bethel), along with the rest of the charity sector. It is a credit to all those small charities as to, not only how they survive, but also how they continue to provide vital services to their respective communities under such financial constraints. That said, I am once again immensely proud of every staff member and our loyal volunteer team for their continued effort and contributions in maintaining our excellent services, both our Doula Service in supporting vulnerable mothers during their pregnancy and our Rapha Listening Service, assisting those members of our communities who rely on our listening support during some very challenging personal situations. Well done!

A huge word of thanks to all our partners for your continued financial support, without which we could not provide these vital services, which in turn lead to improved outcomes for our communities. This leads me onto the exciting news that we will be moving into our new space at the 'Bloomsbury Health Centre', Nechells.

This will afford us increased space for staff and of equal importance, space for the new and improved Baby Bank, whilst also offering the opportunity for face to face listening sessions. This move sits succinctly in line with the prophetic vision of Bethel and ultimately having a future space to fulfil a wide and varied range of holistic health related services. Watch this space!

The future for Bethel will still remain a challenge. The new government will no doubt have the efficiency of the NHS and social services on their radar and as such, charities will have to see what unfolds in time. Until then, we continue to weather the storm with lots of bid submissions and remain hopeful and optimistic.

Finally, I am pleased that we are in the process of creating spaces on our Board for a service user and a volunteer to support co-design/ collaborative service provision, which should add new and fresh perspective to our already brilliant Board of Trustees.

# REFLECTIONS FROM THE CHAIR

(CONTINUED...)

In conclusion I once again make reference to the biblical quote that remains our mantra:

“*Fix your thoughts on what is true, and honourable, and right, and pure, and lovely, and admirable. Think about things that are excellent and worthy of praise...*”

**PHILIPPIANS 4:8**

**DUNCAN MOORE**

# CEO'S STATEMENT



Our focus in 23/24 has been to build on the impact of the previous year, increasing both the reach of Bethel, creating opportunities for deeper more meaningful partnerships and increasing our income through contracts and fundraising.

There are a number of highlights that stand out for me, including our soon-to-be move to our first ever Place of Wellbeing and Welcome. After 18 months of planning and negotiating, and with excellent support from NHS Estates, Property Services, NHS CSR and Jericho for the refurbishment work, we are due to move into Bloomsbury Health Centre in June 2024.

Being based in this space that sits at the heart of Nechells, where many unmet needs exist, we have made it our mission to work with existing community partners in the patch to improve outcomes for those who need our services in the area and beyond.

The work we do at Bethel is firmly planted in reducing health inequalities and challenges for local communities and working with those same communities as assets, providing training, upskilling and increased capacity to support even more service users.

- In this past year our Rapha, Doula and Support teams have worked incredibly hard to achieve amazing outcomes and outputs for community members that use our services.
- In our Doula Service, we have supported almost 450 vulnerable pregnant women with over 1,600 support sessions and home visits to over 200 women.
- In our Rapha Service we supported almost 100 service users providing just under 350 sessions of support, with over 273 hours of listening. We also continued to reduce our average waiting times to around 6–8 weeks.

# CEO'S STATEMENT

(CONTINUED...)

- Our volunteers are the foundation that allows to reach as many people as we do. This year we had 40 volunteers that signed up and were actively delivering sessions and support across both our services.

Funding within the sector continues to be a challenge, but with lots of hard work we have been able to work with a range of partners to support joint bids and consortia collaboration to support the increased access to services, reduce health inequalities and create sustainable outcomes for our communities.

One of the recent partnerships being explored is with Sandwell Hospitals Charitable Trust – we are looking at innovative ways of supporting our Doula Champions and Rapha Listeners into a range of opportunities to volunteer, take on extra learning, create opportunity for upskilling and increasing our capacity to support our service users.

As we move forward into 24/25 our focus is on deepening those partnerships and creating consortia bids that increase our impact, contribute to our income and provide even more opportunities to co-design our services into the future.

JENNIFER JONES-RIGBY

# PATRON'S STATEMENT



It is my great honour to stand before you today as Patron of Bethel Health and Healing Network, a role I have proudly held since 2017.

This incredible organisation, blessed with a dedicated and compassionate team, continues to do remarkable work in the face of challenging circumstances.

In today's climate, the third sector is being increasingly called upon to fill critical gaps in care and support for the most vulnerable among us.

The measure of a truly civilised society is how we protect and uplift those most in need, and Bethel exemplifies this in its mission and actions.

I am deeply grateful for the tireless work of the staff and volunteers who uphold the organisation's commitment to providing life-changing support to those who need it most. As a teenage single mother in the 1960s, I know first-hand how critical it is to have support in difficult times.

Back in those days, society often frowned upon young women like me, and little help was offered by both the community and family. It was through resilience and determination that many of us overcame these challenges. Today, organisations like Bethel provide vital lifelines to young women and others facing similar struggles.

A recent report highlighted the alarming decline in maternity services, with staggering rates of infant and maternal mortality becoming more common, even in this age of advanced technology.

It is beyond belief that we are facing such crises, and it underscores the invaluable work that organisations like Bethel do in supporting pregnant women, mothers, those who have experienced loss and families in need of a compassionate ear.

Each year, Bethel staff and volunteers serve over 650 individuals, with new partnership expanding our ability to reach those most in need.

# PATRON'S STATEMENT

(CONTINUED...)

While the organisation offers multiple services, the connection between physical health and mental well-being cannot be ignored. In fact, mental health issues among BAME (Black, Asian, and Minority Ethnic) pregnant women are about 13% higher than in other groups.

This can be attributed to various factors, including:

- A lack of awareness about where to seek help
- Language barriers
- Cultural traditions that can hinder access to care.

As a midwife in my earlier years, I witnessed these challenges first-hand, though they existed on a much smaller scale back then.

Today, in a city like Birmingham, which is home to over 120 languages, the need for culturally sensitive and accessible support services is greater than ever.

Bethel's vision is to empower the people of Birmingham, Solihull and the Black Country, particularly the most vulnerable to achieve physical, emotional, and spiritual well-being.

It is no surprise that a large percentage of our service users come from BAME communities. Bethel stands as one of the few charities offering such comprehensive support to these groups.

Recently, I had the pleasure of visiting our newly established Wellbeing and Welcome Centre, a wonderful space that provides more room for our team and volunteers to operate.

This Centre includes a growing baby bank, offering essential supplies to families who are struggling. Located in the heart of Nechells, the centre presents an exciting opportunity for us to deepen our engagement with the community and extend our reach in partnership with local organisations.

As Patron, my role is to serve as an ambassador for this incredible charity.

I am committed to expanding our network and encouraging others to answer the call to action put forth by our CEO Jennifer Jones-Rigby.

I urge our partners and supporters to continue engaging with the Bethel team and explore new ways we can collectively support the mission of Bethel in our communities.

# PATRON'S STATEMENT

CONTINUED...

To our sponsors and supporters—thank you. Your contributions are invaluable, but the funding climate remains challenging, and we must continue to work together to secure the future of Bethel's services.

I want to personally thank the Chairman Duncan Moore, the staff, and the volunteers for their unwavering dedication. A special thanks to our CEO Jennifer Jones-Rigby, for her vision and relentless pursuit of excellence in service we deliver.

Together, we are not just restoring lives; we are building a brighter future. Bethel's work transforms communities, one life at a time. But we cannot do it alone. We need your support—please DONATE, VOLUNTEER, and PARTNER with us to continue this vital work. Let's keep making a difference, transforming lives, and building a better future for all.

**Dr Beverly Lindsay OBE, OD, DL**

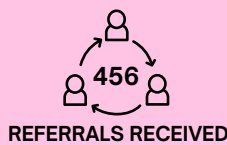
# DOULA SERVICE



“Bethel Doula Service provides emotional and practical support to vulnerable pregnant women and new mothers during the antenatal, birth and postnatal period.”

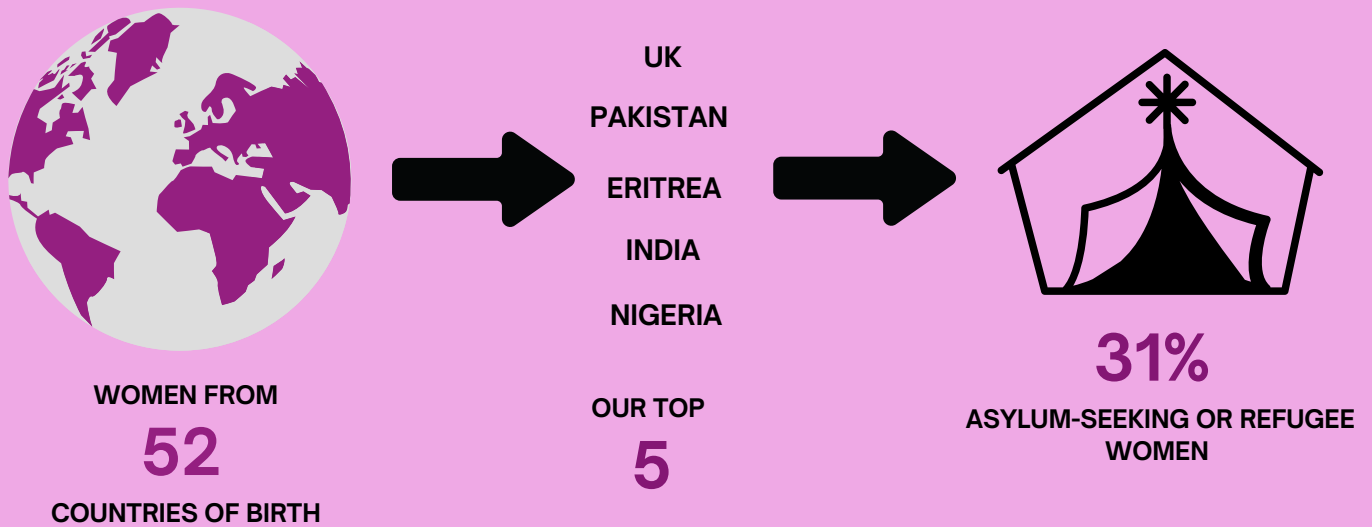
This year, we supported more women than ever before. On average we received 38 referrals a month from midwives in the Birmingham, Solihull and Sandwell areas, requiring support for women facing a range of economic and social issues and safeguarding concerns during their pregnancies including poverty, unstable housing, immigration issues, mental health, domestic abuse and FGM.

## ACHIEVEMENTS AT A GLANCE

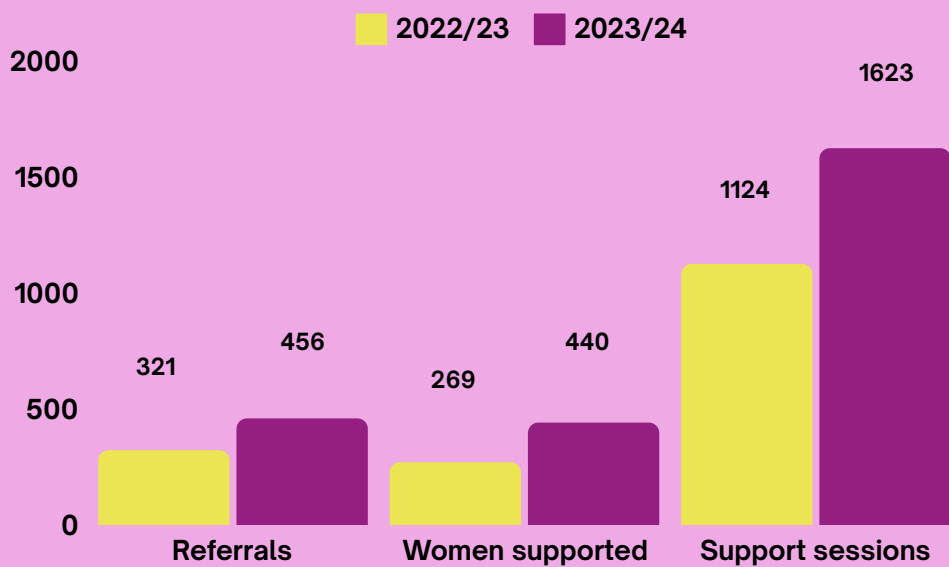


- **Service Reach:**
  - Supported 440 women from 52 countries of birth
  - Nearly a third were refugee or asylum-seeking women
- **Senior Doula Team:**
  - 4 senior doulas provided home visits and sourced essential items for mothers and babies
  - Advocated on behalf of women and attended appointments
  - Participated in safeguarding procedures and maintained contact throughout pregnancy and post-birth
  - Focused on building trust and promoting better outcomes for both mother and baby
- **Volunteer Doula Connectors:**
  - Recruited and trained volunteer Doula Connectors to enhance service capacity
  - Provided opportunities to learn the skills of a community doula
- **Mother and Baby Group:**
  - Weekly term-time sessions for service users and local women
  - On average 5–6 mothers attended each week with their children
  - Mothers accessed support from staff and peers
  - Children participated in free play, musical sessions, and group snack time to encourage social interaction
  - Craft workshops and guest speakers provided health advice
- **Cost of Doula Service:**
  - Average cost per woman: £602 (pregnancy, labour, and post-birth support)
  - Cost rises to an average of £1,668 if perinatal mental health and/or safeguarding needs are present

## WHO DID WE SUPPORT?



## DOULA SERVICE: COMPARITIVE CHART




## HOW DID SERVICE USERS BENEFIT?


**71%**  
ACCESSED  
ITEMS NEEDED

**44%**  
FELT LESS ISOLATED &  
ALONE

“I was new to motherhood in the UK, so I had no idea about certain aspects... I received exceptional care from the Doula Service that I was not getting back home so I am very happy. I have already referred a colleague to Bethel Service.”

 BLACK CARIBBEAN FEMALE, 33, VULNERABLE DUE TO DOMESTIC ABUSE

“I had received quick and effective support. I have learning difficulties, however, the doula made sure she explained everything so I could understand.”

 MIXED WHITE/BLACK CARIBBEAN FEMALE, 25, WITH A HISTORY OF MENTAL HEALTH & DOMESTIC ABUSE

### SATISFACTION AND BENEFITS OF SUPPORT

84%

WOULD RECOMMEND TO FAMILY AND FRIENDS

82%

SATISFIED WITH THE SUPPORT

51%

BENEFITED FROM HAVING SOMEONE TO TALK TO

71%

MOST BENEFITTED FROM THE PRACTICAL SUPPORT

# DOULA CASE STUDY 'A'



*“She (Senior Doula) was the best, she was there for us, she listened, even when my husband ranted and raged. She helped us remain calm, and to get an understanding as to what was happening. When I forgot or did not understand what was said at the appointment, I called her, and she calmly explained. It was so hard to attend a hospital where I had such bad experiences, but she held our hands throughout, spoke up, and helped us to speak up for ourselves. We are so happy to have a healthy baby. Thank you ....you are always welcome in our home. I would recommend the Doula Service to friends, and anyone who needs pregnancy support*”



**'A' DOULA SERVICE USER**

## A'S STORY

A was referred to the Doula Service after suffering traumatic miscarriages, including the loss of her son at 20 weeks gestation. When A found herself pregnant again, though unaware at first, she was troubled by frequent spotting. A's concerns were often dismissed, the Senior Doula advocated for her and provided emotional support.

At the 12+ week scan, A was tearful and neither she or her husband could look at the screen. The Senior Doula encouraged them and on hearing the baby's heartbeat there was instant relief. However, at the consultant appointment, A's husband was again on edge anticipating the 'worst-case scenario.' The Senior Doula helped them to listen as the consultant explained the benefits, risks, and options of having a suture inserted to prevent baby loss. A and her husband appreciated the Senior Doula compassionate support and asked her to attend future appointments.

During the labour, the Senior Doula encouraged A's husband when he was struggling to cope due to the birth taking place at the same hospital as the previous loss. Labour progressed well and A gave birth to a healthy baby.

## DOULA SUPPORT

- **Emotional Support:**
  - At key appointments, the Senior Doula provided emotional reassurance to A and her husband, helping them overcome their anxiety.
- **Advocacy and Guidance:**
  - The Doula helped the family understand complex medical procedures, such as the cervical suture, and ensured they received all relevant information.
- **Ongoing Care:**
  - The Doula's involvement didn't stop at the hospital; she continued to offer support throughout the early postnatal period, ensuring A's family felt secure and well cared for.
- **Group Support:**
  - A joined Bethel's Pregnancy Support After Loss Meetings (PSALM), providing an opportunity to listen to the experiences of the other women. This helped both her and her husband feel heard and understood, contributing to their emotional recovery.

## TIMELINE

### MISCARRIAGES AND BABY LOSS

A SUFFERED MULTIPLE MISCARRIAGES, INCLUDING THE LOSS OF HER SON AT 20 WEEKS GESTATION.

### PREGNANCY DISCOVERY

A DISCOVERED SHE WAS PREGNANT AGAIN, BUT AFTER WEEKS OF BLEEDING, FELT SOMETHING WAS WRONG.

### BETHEL DOULA SERVICE SUPPORT

A WAS REFERRED TO THE DOULA SERVICE BY A MENTAL HEALTH WORKER DUE TO THE IMPACT OF HER PREVIOUS TRAUMATIC PREGNANCIES.

### 12+ WEEK SCAN

WITH SUPPORT FROM THE SENIOR DOULA, A AND HER HUSBAND SAW THEIR BABY'S HEARTBEAT, PROVIDING MUCH-NEEDED REASSURANCE.

### CONSULTANT AND PRE-TERM PREVENTION CLINIC

THE DOULA ENCOURAGED A'S HUSBAND TO LISTEN TO THE CONSULTANT, HELPING THE COUPLE UNDERSTAND THE RISKS AND OPTIONS, INCLUDING THE CERVICAL SUTURE PROCEDURE.

### HEALTHY BIRTH

LABOUR PROGRESSED WELL AND A GAVE BIRTH TO A HEALTHY BABY. THE SENIOR DOULA CONTINUED TO SUPPORT THE FAMILY THROUGHOUT THE EARLY POSTNATAL PERIOD.

# DOULA CASE STUDY ‘B’



## B’S STORY

B’s pregnancy journey was clouded by anxiety due to two traumatic caesarean births and a history of mental health issues. At 30 weeks pregnancy, she was referred to the Doula Service to receive much-needed support. B felt her past birth experiences had not been handled well because her views were overlooked, and she feared this would happen again. For her last birth, she longed to experience labour and potentially have a vaginal birth.

B originally planned to give birth at a maternity unit outside Birmingham but feared the staff would not listen to her wishes. Despite her family and friends being satisfied with the care, B couldn’t face returning to her previous local unit. She explained that she would need support wherever she birthed, as she was anxious that her voice wouldn’t be heard.

## DOULA SUPPORT

- **Advocacy and Emotional Support:**
  - The Senior Doula had a in-depth conversation with B about her fears, helping her relocate care to a nearby maternity unit so she could be supported throughout labour.
- **Co-ordinated Care:**
  - Bethel’s Doula Manager collaborated with community midwives and consultants to ensure B received consistent midwifery, perinatal mental health, and Doula support.
- **Birth Planning and Debrief:**
  - The Senior Doula assisted B in crafting a detailed birth plan and organised a review of her previous births. A plan for a trial of labour (VBAC) was agreed upon, and the Doula provided continuous emotional support during the pregnancy.

## TIMELINE

### PREVIOUS TRAUMATIC BIRTHS

B EXPERIENCED TWO TRAUMATIC BIRTHS, BOTH RESULTING IN CAESAREAN SECTIONS, LEAVING HER WITH MENTAL HEALTH ISSUES.

### REFERRAL TO BETHEL DOULA SERVICE

B WAS REFERRED TO THE DOULA SERVICE AT 30 WEEKS OF PREGNANCY TO RECEIVE EMOTIONAL SUPPORT FOR HER FINAL BIRTH.

### DOULA SERVICE SUPPORT

B REQUESTED THE SENIOR DOULA ADVOCATE FOR HER, ENSURING HER VOICE WAS HEARD DURING HER BIRTH PLANNING. B WANTED TO ATTEMPT A VAGINAL BIRTH (VBAC) AFTER BEING MADE AWARE OF THE RISKS BY THE MIDWIFERY AND OBSTETRIC TEAM.

### RELOCATING CARE

AFTER DISCUSSING HER CONCERNS WITH THE DOULA, B AGREED TO RELOCATE HER CARE TO A LOCAL MATERNITY UNIT WHERE THE DOULA COULD PROVIDE CONTINUOUS SUPPORT THROUGHOUT THE BIRTH.

### BIRTH PLAN AND SUPPORT

THE SENIOR DOULA HELPED B CREATE A BIRTH PLAN AND ARRANGED A DEBRIEF SESSION TO DISCUSS HER PREVIOUS TRAUMATIC BIRTHS. THE DOULA SUPPORTED B EMOTIONALLY THROUGHOUT, INCLUDING DURING THE TRIAL OF LABOUR.

### BIRTH AND POSTNATAL SUPPORT

B GAVE BIRTH WITH THE SUPPORT OF THE DOULA, WHO CONTINUED TO PROVIDE EMOTIONAL CARE AND GUIDANCE DURING THE POSTNATAL PERIOD.

# COSTS AVOIDED



“New NHS England figures show that more than 57,000 new and expectant mums have received specialist support for mental health problems over the last year, up a third on 2022.”

**NHS ENGLAND, MAY 2024**

“Perinatal mental health problems are those that occur during pregnancy or in the first year following the birth of a child and affect up to 27% of women.”

**NHS ENGLAND, MAY 2024**

“In severe cases, perinatal mental health can result in a stay in a perinatal mental health unit where the average stay is 8 weeks.”

**ROYAL COLLEGE OF PSYCHIATRISTS, NOV 2018**

The service users in both case studies were experiencing mental health problems due to traumatic histories and/or previous birth experiences. Without the Senior Doula support, the women would likely have needed additional assistance from specialist midwives, consultant obstetricians, perinatal mental health teams and GPs. An escalation to an in-patient unit was avoided through the support and advocacy provided. Outlined below are the potential costs avoided in each case:

## COSTS SAVED

**£27,833**

## BREAKDOWN OF POTENTIAL COSTS SAVED:



28 DAYS IN AN IN-PATIENT PERINATAL MENTAL HEALTH UNIT

£947 X 28 DAYS

**£26,516**



6 ADDITIONAL VISITS BY A SPECIALIST MIDWIFE (INCLUDING TRAVEL TIME)

£55 X 12 HRS

**£660**



2 ADDITIONAL CONSULTANT OBSTETRICIAN APPOINTMENTS

£202.5 X 2 HRS

**£405**



6 ADDITIONAL GP APPOINTMENTS

£42 X 6

**£252**

Source: Unit Costs of Health and Social Care 2022. PSSRU (University of Kent) & Centre for Health Economics (University of York) & National Schedule of NHS Costs - Year 2021/22 - NHS trusts and NHS foundation trusts

# PREGNANCY SUPPORT AFTER LOSS MEETINGS



“It was an opportunity to meet other bereaved mums who are going through the same as me.”

PSALM PARTICIPANT

“For support with my mental health after my loss.”

PSALM PARTICIPANT, REASON FOR ATTENDING

“To help me cope, and prepare for my unborn after the loss.”

PSALM PARTICIPANT, BENEFITS OF ATTENDING

Bethel delivered monthly group sessions (PSALM) where women from vulnerable communities could talk about their loss and subsequent pregnancies in a safe and confidential space. The online and face-to-face sessions delivered at the Birmingham Mind Hub were led by a trained female facilitator from Bethel experienced in supporting pregnant women and dealing with perinatal mental health issues. Support included peer support, signposting, and professional advice and guidance.

## BENEFITS AT A GLANCE

**100%**  
SIGNPOSTED AND SUPPORTED TO ACCESS OTHER SUPPORT

**90%**  
PEER SUPPORT/ SHARING WITH OTHERS WITH SIMILAR EXPERIENCE

**80%**  
EXPERIENCED IMPROVED HEALTH AND WELLBEING

## REASON FOR ATTENDING

- Women aged 18 – 40 years plus attended the group primarily to connect with others who had gone through the same type of loss.
- Access to space for collective understanding and support with their mental health and wellbeing.
- Opportunity for participants to prepare for their new baby with more confidence.

## BENEFITS OF ATTENDING

Women felt that without the group they would have had to struggle alone with their current pregnancy and would have been less able to cope due to their mental health struggles.

# RAPHA LISTENING SERVICE



Rapha Listening Service

“The Rapha Listening Service supports people from diverse community backgrounds in their journey toward better mental health and well-being. We provide early intervention, interim or follow-on support through matching with a trained listener for up to 9 listening sessions.

Our service users were mostly referred for low mood, anxiety and depression. However, during the initial assessment and subsequent listening sessions, service users often disclosed other health and well-being concerns and more severe mental health issues. Some service users were on NHS mental health waiting lists awaiting support.

## ACHIEVEMENTS AT A GLANCE

346

SUPPORT SESSIONS DELIVERED

288

LISTENING SESSIONS

273

HOURS OF LISTENING SUPPORT

Our team of 2 staff and 23 volunteers delivered 346 support sessions as well as signposting and facilitating referrals to other community and mental health services. To manage reduced volunteering capacity, we also offered group support enabling service users to learn creative skills whilst sharing their lived experiences.

## THIS YEAR WE SUPPORTED 92 PEOPLE

76%:



29% South Asian

15% Black

7% Other ethnic groups

“Research indicates that 1 in 6 adults have experienced a 'common mental disorder' like depression or anxiety in the past week.

MIND

“22 million antidepressant items were prescribed to an estimated 6.8 million identified patients costing £56 million.

NHS BUSINESS SERVICES AUTHORITY, 2023

“1.94M people were in contact with mental health services in June 2024; 75,805 were within Birmingham and Solihull ICB.

NHS ENGLAND



# END OF SUPPORT EVALUATION



“It was a very positive experience as the person that I had was very good. My counseling was ending and it was almost like a bridge...Because I knew it was coming each week it helped me manage my week better...I was a bit worried before the sessions as it's a bit of a weird situation speaking to a complete stranger but it went well... it was what I needed as my confidence was not very high. Having the same person was good, he was quite encouraging and helped me to realise when I had done well. It made me realise I can do things!”

**WHITE BRITISH FEMALE, 36, REFERRED FOR DEPRESSION AND ANXIETY**

“I let out things that I have had on my mind for years and years. Things that happened to me from age 8/9, I am now in my 70s. Sometimes, I was not feeling well, and they were patient with me and gave me time to talk. The lady who listened to me was brilliant...she really helped me. I would like to access listening services again as I feel lonely.”

**BRITISH ASIAN FEMALE, 76, REFERRED FOR LOW MOOD AND STRUGGLING TO LIVE ALONE AND GOING OUT INTO THE COMMUNITY**

## BY THE END OF THE SUPPORT PERIOD

2/3

**MENTAL HEALTH AND WELL-BEING HAD IMPROVED**

**94%** SUPPORT RECEIVED MET OR EXCEEDED THEIR EXPECTATIONS

**78%** WOULD RECOMMEND THE RAPHA SERVICE

## BENEFITS OF SUPPORT



# RAPHA CASE STUDY ‘S’



## S STORY

S, a White British lady in her late 50s, was referred to Bethel’s Listening Service after a mental health assessment. She struggled with anxiety, depression, low self-esteem, and chronic physical illness. At first, S was nervous and uncertain about the listening sessions, unsure of what to expect.

During the initial sessions, S spoke at length about her poor self-image and the few worries she thought she had. As the sessions progressed, she revealed deeper concerns about her past and expressed sadness over her negative self-talk and the mistreatment she had experienced. These sessions became a space for her to express her grief over the life she felt she could have had, had her confidence not been eroded over the years.

As she continued with the listening sessions, S began to view herself differently. She started journaling as a way to capture her thoughts and reflect on her progress, which helped to boost her confidence and mental well-being.

## RAPHA SUPPORT

- **Matched to a Listener:**
  - S was paired with an experienced listener to ensure she felt comfortable opening up in her sessions.
- **Reassurance and Affirmation:**
  - During the first session, the listener reassured S that it was a safe, non-judgemental space, which encouraged her to open up more in future sessions.
- **Encouragement to Self-Reflect:**
  - The listener helped S explore her self-worth and suggested journaling as a way for her to track her achievements and reflect on her progress.
- **Emotional Support During Anti-Depressant Review:**
  - The listener supported S as she underwent a GP review, leading to the discontinuation of her anti-depressants while her mental health remained stable.

## TIMELINE

### STRUGGLING WITH ANXIETY AND LOW SELF-ESTEEM

S EXPERIENCED LONG-STANDING ANXIETY, DEPRESSION, AND CHRONIC PHYSICAL ILL HEALTH. SHE FREQUENTLY SOUGHT SUPPORT FROM HER GP.

### REFERRAL TO BETHEL’S LISTENING SERVICE

REFERRED FOR ADDITIONAL EMOTIONAL SUPPORT AFTER A LOCAL MENTAL HEALTH SERVICE ASSESSMENT. THE DOULA SERVICE MATCHED HER WITH AN EXPERIENCED LISTENER.

### OPENING UP DURING LISTENING SESSIONS

OVER THE COURSE OF HER SESSIONS, S BEGAN TO TALK OPENLY ABOUT HER SELF-ESTEEM ISSUES, WORRIES, AND SADNESS ABOUT THE PAST.

### JOURNALLING AND SELF-REFLECTION

S BEGAN TO JOURNAL HER PROGRESS, HELPING HER RECOGNISE HER SELF-WORTH AND REFLECT ON HER ACHIEVEMENTS.

### IMPROVEMENT IN MENTAL HEALTH

S’S MENTAL HEALTH IMPROVED SIGNIFICANTLY BY THE END OF HER LISTENING SESSIONS, LEADING TO THE DISCONTINUATION OF HER ANTI-DEPRESSANTS.

# COSTS AVOIDED



S felt her mental health problems were increasing, which would potentially have required more acute mental health interventions from the community mental health team, and additional GP appointments. However, the opportunity to talk through her concerns and fears with her listener resulted in stopping antidepressants and overall improvement in her mental health.

## BREAKDOWN OF POTENTIAL COSTS SAVED FOR 'S'



COSTS OF ANTI-DEPRESSANTS FOR 6 MONTHS (NICE)



£15 X 6 MONTHS

**£90**



6 ADDITIONAL GP APPOINTMENTS



£42 X 6

**£252**



6 IAPT APPOINTMENTS FOR A COMMON MENTAL HEALTH PROBLEM (LOW SEVERITY – GREATER NEED):



£432 X 6

**£2,592**



TOTAL COSTS AVOIDED (6 MONTHS)



**£2,934**

SOURCE: UNIT COSTS OF HEALTH AND SOCIAL CARE 2022. PSSRU (UNIVERSITY OF KENT) & CENTRE FOR HEALTH ECONOMICS (UNIVERSITY OF YORK) & NATIONAL SCHEDULE OF NHS COSTS - YEAR 2021/22 - NHS TRUSTS AND NHS FOUNDATION TRUSTS

# RAPHA CASE STUDY ‘K’



## K STORY

K, a middle-aged Asian British man, was referred to the Rapha Listening Service by Living Well Consortium. He had been struggling with low mood, negative thoughts, and severe sleep deprivation due to ongoing physical health problems. In addition to these challenges, K was also dealing with the recent loss of a family member and was feeling overwhelmed by suicidal thoughts. His initial assessment on the Warwick and Edinburgh Wellbeing Scale (WEMWBS) indicated probable clinical depression, which prompted immediate safeguarding monitoring.

K was placed on the waiting list for a listener, but his situation was closely watched due to the safeguarding concerns. When his sessions began, he was tearful as he was relieved to finally have someone who was listening to him.

## RAPHA SUPPORT

- **9 Listening Sessions Provided:**
  - K received 9 sessions in total, where he expressed his emotional struggles, including his grief and suicidal thoughts.
- **Encouragement to Express Feelings:**
  - Through the sessions, K began to open up more to his family about his feelings, and he was supported in taking steps to visit the grave of his deceased relative, aiding in his bereavement process.
- **Proactive Health Management:**
  - With encouragement from his listener, K became more proactive in managing his physical health, booking GP appointments before his symptoms worsened.
- **Safeguarding and Referral Support:**
  - As K was a safeguarding case, he was referred to other primary care services, which he accepted with gratitude.

## TIMELINE

### STRUGGLING WITH LOW MOOD AND SUICIDAL THOUGHTS

K, A MIDDLE-AGED ASIAN BRITISH MAN, EXPERIENCED LOW MOOD, NEGATIVE THOUGHTS, AND SLEEP DEPRIVATION, WORSENER BY PHYSICAL HEALTH PROBLEMS.

### REFERRAL TO RAPHA LISTENING SERVICE

K WAS REFERRED BY LIVING WELL CONSORTIUM, WITH CONCERNS OVER HIS MENTAL HEALTH, FAMILY BEREAVEMENT, AND SUICIDAL THOUGHTS.

### LISTENING SESSIONS BEGIN

K STARTED HIS 9 LISTENING SESSIONS, WHERE HE EXPRESSED HIS DEEP CONCERNS, ALLOWING HIM TO BEGIN HIS EMOTIONAL HEALING JOURNEY.

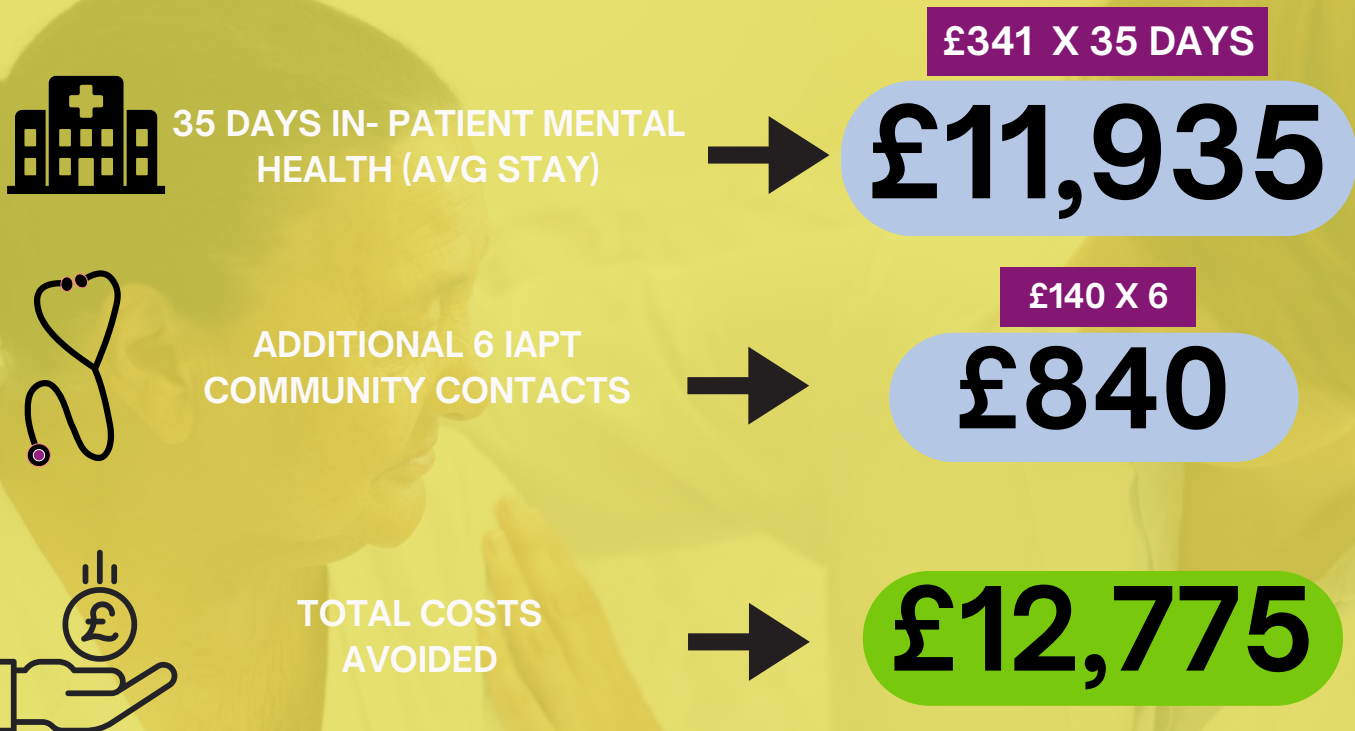
### IMPROVED MENTAL HEALTH

BY THE END OF THE LISTENING SESSIONS, K'S MOOD IMPROVED SIGNIFICANTLY, AND HE NO LONGER FELT SUICIDAL. HIS WEMWBS SCORES REFLECTED THIS POSITIVE CHANGE.

# COSTS AVOIDED



## BREAKDOWN OF POTENTIAL COSTS SAVED FOR 'K'



SOURCE: UNIT COSTS OF HEALTH AND SOCIAL CARE 2022. PSSRU (UNIVERSITY OF KENT) & CENTRE FOR HEALTH ECONOMICS (UNIVERSITY OF YORK) & NATIONAL SCHEDULE OF NHS COSTS - YEAR 2021/22 - NHS TRUSTS AND NHS FOUNDATION TRUSTS

# MEN'S HEALTH AND WELLBEING PROGRAMME



## SUMMARY OF ACTIVITIES (2023-2024)

Rapha collaborated with community partners to deliver targeted health and wellbeing activities for men from communities with low engagement. Over 40 men benefitted from increased mental health awareness, advice, guidance, health checks and physical activity.

### 1. Men's Health and Wellbeing Consultation Meeting

This online meeting focused on creating a comprehensive program targeting men's health and long COVID recovery. Key topics included long COVID awareness, access to healthcare services, mental health support, physical wellbeing, and the importance of community engagement.



### 2. Men's Health and Wellbeing Consultation Meeting: COGOP Acocks Green Community Centre

The event featured presentations on NHS services, prostate cancer, diabetes, and high blood pressure. A session by Bethel highlighted long COVID's impact and NHS support options. The symposium encouraged proactive health measures and timely interventions.

### 3. Open Discussion on Men's Health

This online discussion tackled the low uptake of NHS screening among Afro-Caribbean men aged over 40, emphasising barriers like historical distrust, lack of information, and healthcare service disparities. Solutions included targeted outreach, better communication with GPs, and advocacy for equitable healthcare services.

### 4. Blood Pressure Monitor & Long COVID Event: High Croft Community Centre

Attendees received blood pressure readings and free monitors, and Bethel presented on long COVID services. The event highlighted the importance of accessible healthcare and timely interventions.

### 5. Community Walk: COGOP Acocks Green Community Centre

The walk, supported by Birmingham Canals Trust, promoted physical activity and mental wellbeing through community engagement. The group is planning future walks.

# INTERNATIONAL WOMEN'S DAY 2024

## THEME: INSPIRE INCLUSION

This year's event, hosted with support from Near Neighbours, aligned with Rapha's ethos of respecting, hearing, and inspiring all to achieve optimal well-being. A total of 28 women from diverse backgrounds, including the **UK, Iran, Africa, West Indies, India, and Pakistan**, attended the event.

## HIGHLIGHTS OF THE DAY

**Opening Session:** Led by Bethel's CEO, women greeted each other in their native languages, emphasising the diversity and inclusion in the room.

**Breast Cancer Awareness:** A talk by Breast Cancer UK on the importance of breast self-examination.

**Pampering and Wellness Advice:** A Bethel staff member set up a pamper corner with sleep management and relaxation tips, creating a serene atmosphere.

**Poetry, Music, and Affirmations:** A reflective session combining music, poetry, and empowerment was led by former Bethel staff members, encouraging the women to share positive affirmations.

**Drumming Workshop:** The day concluded with an energetic drumming session by Beat It Percussion, bringing the event to a joyful close.



## Feedback

Attendees expressed deep gratitude for the event, describing it as empowering, thoughtful, and a meaningful way to connect with other women. Several mentioned how the event boosted their well-being and left them with lasting positive memories.

## Conclusion

The event was a success, embodying the theme of inclusion and inspiring all who attended. With goody bags, sunflower seeds symbolising hope, and a focus on well-being, the day left participants smiling and feeling connected.



# VOLUNTEERING AT BETHEL



“Love the support given to me by staff. I'm loving the training - both the face-to-face and the online opportunities. I feel really valued!”  
**RAPHA LISTENER 'A'**

## ACHIEVEMENTS AT A GLANCE



**40** VOLUNTEERS ACTIVE OVER THE YEAR

**309**

SUPPORT SESSIONS DELIVERED



**26** RAPHA VOLUNTEERS



**14** DOULA VOLUNTEERS

“I learn to be disciplined and focused during listening sessions and I learn a lot from listening to clients. It is very interesting...Clients and the team constantly express their appreciation of the service I offer.”

**RAPHA LISTENER 'B'**

“I'm always impressed at any of the face-to-face meetings how well-informed team members are and their openness to learn more and be better informed.”

**RAPHA LISTENER 'C'**

“I feel I have learned a lot being a volunteer for Bethel. I still feel I can learn more. Helping people is what I enjoy doing.”

**RAPHA LISTENER 'D'**

Volunteers are integral to our service delivery, providing 1-2-1 support and assisting at events and group activities. This year the Rapha and Doula services were again supported by 40 volunteers, although short-term volunteering continued as individuals needed to find paid employment to meet cost of living increases.

## VOLUNTEERS BENEFITED

**94%**

FELT APPRECIATED AND VERY WELL SUPPORTED

**88%**

VOLUNTEERING EXPERIENCE WAS A POSITIVE ONE

**82%**

APPROPRIATELY INFORMED

**88%**

OPPORTUNITY TO GIVE BACK



# VOLUNTEER CASE STUDY ‘AS’



## AS STORY

AS joined Bethel’s Doula Service over a year ago as a Doula Connector, driven by her desire to work with vulnerable people and contribute to their well-being. In her role, she provided crucial support to women, including emotional and birth-related assistance, helping them navigate difficult times with compassion and care.

One of AS’s key contributions was offering language support in Punjabi and Hindi to women at Collection Hotels, enabling better communication and understanding between the service users and healthcare providers. In September 2023, AS enhanced her skills by completing Bethel’s two day Doula Course, which equipped her with further knowledge and expertise in emotional support and post-natal care.

## BETHEL SUPPORT AND IMPACT

- **Doula Training:**
  - AS completed Bethel’s Doula Course, which equipped her with the skills to provide emotional and practical support to women during pregnancy, birth, and the post-natal period.
- **Language Support:**
  - AS’s fluency in Punjabi and Hindi allowed her to assist service users at Collection Hotels, ensuring they had access to care despite language barriers.
- **Career Progression:**
  - With the experience gained at Bethel, AS now works as a Health Care Support Worker and is also training as a social worker on Frontline’s three-year programme. Upon completion, she will register with Social Work England and will receive a Master’s degree in Advanced Relationship-Based Social Work Practice with Children and Families.

## TIMELINE

### JOINING BETHEL AS A DOULA CONNECTOR

AS JOINED THE DOULA SERVICE AS A DOULA CONNECTOR OVER A YEAR AGO, PROVIDING EMOTIONAL AND PRACTICAL SUPPORT TO SERVICE USERS.

### DOULA TRAINING COMPLETION

IN SEPTEMBER 2023, AS SUCCESSFULLY COMPLETED BETHEL’S TWO-DAY DOULA COURSE, GAINING ESSENTIAL SKILLS TO SUPPORT WOMEN DURING PREGNANCY AND POST-BIRTH.

### LANGUAGE SUPPORT PROVIDED

AS OFFERED LANGUAGE SUPPORT IN PUNJABI AND HINDI TO SERVICE USERS AT COLLECTION HOTELS, ASSISTING THEM DURING APPOINTMENTS AND ENSURING THEY RECEIVED PROPER CARE.

### CAREER PROGRESSION

‘AS’ NOW WORKS AS A HEALTH CARE SUPPORT WORKER AND IS TRAINING TO BECOME A SOCIAL WORKER THROUGH FRONTLINE’S THREE-YEAR PROGRAMME.

“I am really glad to have had the opportunity to volunteer with Bethel. As a Health Care Support Worker, I wanted to gain experience working with vulnerable people and offer my expertise. The wide range of training I accessed has helped me during my application for further studies, for which I am truly grateful.”

AS, DOULA CONNECTOR

# VOLUNTEER CASE STUDY 'KV'



## KV STORY

KV, who holds a Level 4 qualification in counselling, joined Bethel's Listening Service in January 2023, driven by her passion for helping others. Since then, she has volunteered for an impressive 63 hours, supporting service users through difficult times with empathy and compassion.

KV finds volunteering to be mentally and physically beneficial, explaining that she volunteers without any expectations, simply enjoying the opportunity to be there for others. Despite her busy schedule juggling family, work, and studies, KV makes time to organise meetings and provide a high level of care to service users. The experience has been deeply rewarding for her, both personally and professionally.

## BETHEL SUPPORT AND IMPACT

- **Mental and Physical Benefits:**
  - KV explains that volunteering brings her significant mental and physical health benefits, as she feels fulfilled by helping others and giving back to the community.
- **Skills in Action:**
  - Through her role, KV practices key skills such as being non-judgemental, congruent, and empathetic, all of which are vital in providing effective listening support.
- **Observing and Learning:**
  - By listening to others' stories, KV reflects on her own life, appreciating her experiences and has felt humbled by the opportunity to support those in need.
- **Positive Feedback:**
  - KV is especially grateful for the feedback she receives from service users and management, knowing that the service she provides has made a positive impact.

## TIMELINE

### JOINING THE LISTENING SERVICE

KV, PASSIONATE ABOUT HELPING OTHERS, JOINED BETHEL'S LISTENING SERVICE IN JANUARY 2023.

### 63 VOLUNTEERING HOURS

SINCE JOINING, KV HAS DEDICATED 63 HOURS OF HER TIME TO SUPPORTING OTHERS THROUGH THE SERVICE.

### UTILISING COUNSELLING SKILLS

HAVING COMPLETED A LEVEL 4 QUALIFICATION IN COUNSELLING, KV APPLIES NON-JUDGEMENTAL LISTENING AND EMPATHY IN HER VOLUNTEER ROLE.

# WHAT OUR PARTNERS TOLD US



*“We receive referrals often at short notice to house and support women who are sometimes in advanced stages of pregnancy. Many of these women have little or no basic English, have often missed vital check-ups, and have no recourse to public funds making it difficult for expectant mothers to provide the essential items for a baby. Bethel are able to help and support quickly if needed.”*

**COMMUNITY ORGANISATION**

*“Bethel Doula provides an invaluable service to Birmingham’s pregnant population. Many women need practical support with items for themselves and their babies as many have no recourse to public funds. Sometimes they don’t understand the emotional support that they can benefit from until contact is made the staff and volunteers are kind and generous and are often a lifeline for the women accessing services.”*

**COMMUNITY MIDWIFE**

*“Keep up the great work, appreciate all you do!”*

**REFERRAL AGENCY/FUNDER**

*“Always approachable and work well with vulnerable service users.”*

**INFRASTRUCTURE SUPPORT PROVIDER**

We surveyed and spoke to our partners throughout the year including funders, suppliers and referrers to our services such as midwives, local community organisations and public agencies. They felt that Bethel’s strengths lay in understanding the needs of our service users and the quality of our service delivery. They recognised our achievements despite being a relatively small team with capacity issues. Our partners encouraged us to raise awareness of the organisation, engage in more collaborative work, and continue listening to the voices of our service users.

**ALL OF OUR PARTNERS SURVEYED SAID THEY WOULD RECOMMEND BETHEL TO FAMILY AND FRIENDS**

## MOVING FORWARD

Due to the increasing demand for support, partners advised Bethel to continue to expand into the community mental health and wellbeing space. They also identified complementary services such as end-of-life support, additional talking therapies, and advice and guidance on immigration/housing.

*“The Family Support Team at Birmingham Women’s Hospital have been referring women to Bethel Doula Service since we started our new role in December 2023. The women we refer are often in vulnerable situations and are seeking emotional / pregnancy support. The women have reported to our team that they have experienced a high standard of support from the Doula Service. The feedback we have received has been very positive, the women have been supported throughout their pregnancy and postnatal journey, they have felt listened to, they feel the Doula Service has gone above and beyond to provide care, and they have been provided with essential baby items from the team.”*

*Our team at BWH have enjoyed working closely with Bethel doulas, and meeting with the team, they have helped with our service by providing valuable information, signposting us to external agencies, and often helping us when we need essential items for our families.”*

**SENIOR COMMUNITY FAMILY SUPPORT WORKER, BIRMINGHAM WOMEN’S HOSPITAL**

# MARKETING OVERVIEW



## f FACEBOOK REACH



**TOTAL REACH:** 11,558 (+38%)



**Organic Reach:** 7,808 (+289.8%)



**FROM ADS:** 3,630 (+45.1%)

The total reach on Facebook from January to September was 11,558, showing a 38% increase. Organic reach contributed 7,808 interactions, a significant increase of 289.8%, while ad reach accounted for 3,630, growing by 45.1%.

### CONTENT PUBLISHED

Based on up to 200 pieces of content, there was a 36% increase in published content compared to the previous period (2 April 2023 – 31 December 2023).

- **PHOTOS:** 25
- **TEXT:** 1
- **VIDEOS:** 5
- **STORIES:** 1
- **LINKS:** 2



## INSTAGRAM REACH



**TOTAL REACH:** 1,580 (+5.7%)



**Organic Reach:** 1,353 (+1.1K%)



**FROM ADS:** 247 (+100%)

Instagram's total reach was 1,580, making a 5.7% increase. Organic reach surged to 1,353, a remarkable 1,100% growth, while ad reach contributed 247, doubling with a 100% rise.

### CONTENT PUBLISHED

With up to 200 pieces of content, there was a 104.5% increase in published content compared to the previous period.

- **POSTS:** 38
- **STORIES:** 7

# FINANCIAL REVIEW AND STATEMENTS



Income for the year amounted to £393,839 (2023: £301,352) whilst expenditure was £386,053 (2023: £374,002). This resulted in a surplus of £7,787 (2023: deficit of £72,650) and an increase in funds for the year to £9,885 (2023: £2,098). After a disappointing year in 2023, the plan for 2024 was to stabilise the financial position and to start to build up reserves. This was achieved and will continue to be the focus in the next financial year.

## RESERVES POLICY

Reserves are required to:

- smooth out surpluses and deficits year on year;
- replace capital expenditure or restructure the organisation;
- deal with the effects of any risks that materialise e.g. significant losses of income and delays in payments;
- allow the organisation to take on opportunities that may arise in a timely manner;
- deal with the unexpected.

Trustees are required to set an appropriate minimum level of reserves, and in doing so take into account these reasons for holding reserves, as well as current and future financial needs. The trustees have decided to set minimum reserves at 4 months of unrestricted expenditure, as indicative of the operating reserves required by the nature and size of the charity. As at 31 March 2024, that will require minimum free reserves of approximately £98,535 to be held (2023: £95,752). Both the policy and its implementation are under regular scrutiny.

## TRUSTEE RESPONSIBILITIES FOR THE FINANCIAL STATEMENTS

Charity and Company Law require 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 at the balance sheet date and of its incoming resources and application of resources, including income and expenditure for that period. In preparing those financial statements, the Trustees are required to:

Select suitable accounting policies and apply them consistently to:

- Make judgements and estimates that are reasonable and prudent
- State whether applicable accounting standards have been followed, subject to any material departures disclosed and explained in the financial statements
- Prepare the financial statements on the going concern basis, unless it is inappropriate to assume that the Charity will continue in business

The Trustees are responsible for keeping financial records which disclose with reasonable accuracy at any time the financial position of the Charity and that enable them to ensure that the financial statements comply with the Companies Act 2006. They are also responsible for safeguarding the assets of the Charity and hence must take reasonable steps for the prevention and detection of fraud and other irregularities.

## Bethel Health and Healing Network

### Independent Examiners Report to the Trustees of the Bethel Health and Healing Network

I report on the financial statements of the Charity for the year ended 31st March 2024

#### Respective responsibilities of trustees and examiner

The charity's trustees are responsible for the preparation of accounts. The trustees consider that an audit is not required for this year under section 43(2) of the Charities Act 1993 ('the 1993 Act') and that an independent examination is needed. The charity has prepared accrued accounts and I am qualified to undertake the examination.

It is my responsibility to:

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

#### Basis of Independent Examiner's Statement

My examination was carried out in accordance with the General Directions given by the Charity Commissioners and with Regulation 11 of the 2006 Regulations. An examination includes a review of the accounting records kept by the organisation, and a comparison of the accounts presented with those records. It also includes consideration of any unusual items or disclosures in the accounts and seeking explanations from you as trustees concerning any such matters. The procedures undertaken do not provide all the evidence that would be required in an audit, and consequently I do not express an audit opinion on the view given by the accounts.

#### Independent Examiner's Statement

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

1. which gives me reasonable cause to believe that in any material respect, the requirements: to keep accounting records in accordance with section 41 of the 1993 Act and Regulation 4 of the 2006 Regulations; and to prepare accounts which accord with the accounting records and comply with the accounting requirements of the 1993 Act and Regulation 8 of the 2006 Regulations; and which are consistent with the methods and principles of the Statement of Recommended Practice: Accounting and Reporting by Charities have not been met, or
2. to which, in my opinion, attention should be drawn to enable a proper understanding of the accounts to be reached.

Signed:

*D. Chittenden*

Date:

*2/9/2024*

David Chittenden  
18 Cunningham Road  
Peterborough  
PE2 9RG



**Statement of Financial Activities  
Year Ended 31st March 2024**

	Note	Restricted	Unrestricted	Total Funds 2024	Total Funds 2023
<b>Income and Endowments from:</b>					
Donations and legacies	2	56,056	29,755	85,811	51,692
Charitable activities	3	0	307,628	307,628	249,558
Interest			0	0	0
Other income			400	400	101
		<u>56,056</u>	<u>337,783</u>	<u>393,839</u>	<u>301,352</u>
<b>Expenditure on:</b>					
Raising funds	4		20,174	20,174	16,232
Charitable activities	5/6/7	56,056	309,822	365,878	357,770
Total expenditure		<u>56,056</u>	<u>329,997</u>	<u>386,053</u>	<u>374,002</u>
Net income		0	7,787	7,787	(72,650)
<b>Reconciliation of Funds</b>					
Total Funds brought forward		0	2,098	2,098	74,749
<b>Total Funds carried forward</b>		0	9,885	9,885	2,098
<b>Balance Sheet as at 31st March 2024</b>					
<b>Current Assets</b>					
Debtors	11			36,102	72,149
Cash at bank and in hand	12			<u>5,894</u>	<u>57,726</u>
				<u>41,997</u>	<u>129,875</u>
<b>Current Liabilities</b>					
Liabilities falling due within one year	13			32,112	127,777
<b>Net Assets</b>				<u>9,885</u>	<u>2,098</u>
<b>Represented by:-</b>					
Unrestricted Funds	15			9,885	2,098
Restricted Funds	15			0	0
<b>Total Funds</b>				<u>9,885</u>	<u>2,098</u>

The trustees (who are also the directors of the company for the purposes of company law) confirm that for the period ended 31 March 2024:-

- the company was entitled to exemption from audit under section 477 of the Companies Act 2006 ("the Act"), and
- members have not required the company to obtain an audit of its accounts for the period in question in accordance with section 476 of the Act. However, in accordance with section 145 of the Charities Act 2011 and section 44 of the Charities and Trustee Investment (Scotland) Act 2005, the accounts have been examined by an independent examiner.

The trustees acknowledge their responsibilities for complying with the requirements of the Act with respect to accounting records and the preparation of accounts.

The notes form an integral part of these accounts. They have been reviewed in the preparation of these accounts with changes to the classification and presentation.

These accounts, which have been prepared in accordance with the provisions in the Companies Act 2006 relating to small companies, were approved by the trustees on 04/09/2024 and signed on their behalf by:



Duncan Moore  
Trustee

Date: 04/09/24



### 3. Income from charitable activities

Birmingham & Solihull Mental Health NHS Foundation Trust	38,653	38,653	24,991
Living Well Consortium	35,000	35,000	35,000
Murray Hall Community Trust Ltd		0	7,380
NHS Birmingham and Solihull ICB	191,975	191,975	104,490.00
NHS Black Country ICB		0	54,835
NHS Black Country and West Bham CCG		0	18,278
Sandwell & West Birmingham Hospital NHS Trust	42,000	42,000	4,583
	<u>0</u>	<u>307,628</u>	<u>307,628</u>
			<u>249,558</u>

### 4. Expenditure on generating donations and legacies

#### Unrestricted funds

Raising funds		20,174	16,232
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### 5. Costs of charitable activities by fund type

Doula	35,394	161,971	197,365	180,395
Rapha listening service	20,662	94,495.62	115,158	126,722
Trusted Charity (PQASSO)			0	0
Support costs		53,356	53,356	50,654
	<u>56,056</u>	<u>309,822</u>	<u>365,878</u>	<u>357,770</u>

### 6. Costs of charitable activities by activity type

	Activities undertaken			Total
	directly	Support costs	Total	
Doula	197,365	33,695	231,060	210,148
Rapha listening service	115,158	19,661	134,818	147,623
Trusted Charity (PQASSO)			0	0
	<u>312,522</u>	<u>53,356</u>	<u>365,878</u>	<u>357,770</u>

### 7. Analysis of support costs

	2024	2023
Communication costs	7,812	10,038
Office costs	16,065	12,393
Premises costs	17,256	15,555
Legal and professional	25,072	30,716
Other operating costs	25,885	16,339
	<u>92,090</u>	<u>85,040</u>

### 8. Independent examiner's remuneration

The Independent examiner provided services on a voluntary basis so no fee was charged (2023: Nil)

### 9. Trustees' remuneration and expenses

During the year, no Trustees received any remuneration or other benefits and no expenses were claimed (2023: Nil)

### 10. Staff costs and emoluments

Salaries and wages	271,154	263,913
Social security costs	21,643	20,372
Employers contribution to defined contribution pension scheme	7,049	5,751
	<u>299,846</u>	<u>290,035</u>

There were no employees whose emoluments (salaries, wages, benefits in kind) fell in a band in excess of £60,000 (2023: Nil)

The average number of persons employed by the Charity, including part time staff, calculated on a full time equivalent basis was:

Core staff	8.81	8.20
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### 11. Debtors

Accounts Receivable	33,217	70,213
Accrued Revenue	0	0
Prepaid Expenses	2,886	1,936
Other		
	<u>36,102</u>	<u>72,149</u>

### 12. Bank and Cash Balances

TSB current account	5,461	55,014
Triodos deposit account	177	2,677
Petty Cash	256	35
	<u>5,894</u>	<u>57,726</u>

### 13. Current Liabilities (payable within one year)

Accounts Payable	20,852	3,883
Accruals and deferred income	1,404	453
Payroll Liabilities	9,023	11,072
Prepaid Income	833	112,368
	<u>32,112</u>	<u>127,777</u>

### 14. Related party transactions

Donations without condition of £390 were received from one trustee (2023: £360 from 1 trustee)  
These amounts do not include the gift aid associated with these donations.

15. Statement of Funds	At 1st April 2023	Income	Expenditure	Transfers	At 1st April 2024
<b>Unrestricted Funds</b>					
General	131,520	30,155	20,174		141,500
Doula designated	(129,421)	307,628	309,822		(131,616)
	<u>2,098</u>	<u>337,783</u>	<u>329,997</u>	<u>0</u>	<u>9,885</u>
<b>Restricted Funds</b>					
Doula		35,394	35,394		0
Rapha		20,662	20,662		0
	<u>0</u>	<u>56,056</u>	<u>56,056</u>	<u>0</u>	<u>0</u>
<b>Total Funds</b>	<u>2,098</u>	<u>393,839</u>	<u>386,053</u>	<u>0</u>	<u>9,885</u>
<b>Prior year</b>					
<b>Unrestricted Funds</b>					
General	141,578	6,173	16,232		131,520
Doula designated	(66,829)	249,558	312,150		(129,421)
	<u>74,749</u>	<u>255,731</u>	<u>328,381</u>	<u>0</u>	<u>2,098</u>
<b>Restricted Funds</b>					
Doula		17,122	17,122		0
Rapha		28,499	28,499		0
	<u>0</u>	<u>45,621</u>	<u>45,621</u>	<u>0</u>	<u>0</u>
<b>Total Funds</b>	<u>74,749</u>	<u>301,352</u>	<u>374,002</u>	<u>0</u>	<u>2,098</u>

# WE'D LIKE TO THANK ALL OF OUR FUNDERS, DONORS AND VOLUNTEERS FOR THEIR AMAZING SUPPORT



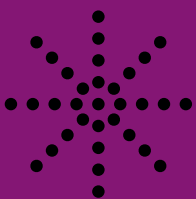
1ST FLOOR, BLOOMSBURY HEALTH CENTRE,  
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**BETHEL HEALTH AND HEALING NETWORK**

England & Wales - Charity number 1116225

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# Accounts

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# IMPACT REPORT AND FINANCES 2022/23



APRIL 2022-  
MARCH 2023

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# Executive Summary

Bethel Health and Healing Network is an impactful well-being organisation that supports improved outcomes for vulnerable women and others in need within some of our most deprived and challenged communities. This includes responsive care and support for vulnerable pregnant women, 31% of whom are asylum seekers or refugees in the desperate circumstances they find themselves in. Both men and women use our Rapha Listening Service to help improve their mental health and wellbeing, with tangible results showing positive mental health developments. The fantastic staff and volunteers of Bethel Health and Healing Network are the foundation of the organisation, and without them, the fantastic outcomes in this impact report would not have been possible. I extend a prodigious thank you to them all.

Over 300 vulnerable women were supported through the Bethel Doula Service, with many more receiving telephone support and support packages for them and their babies. With over 250 home visits for those who needed it most, signposting, breastfeeding support and, where possible, birth attendance, the Doula team has significantly impacted those women and their families. This time last year, we saw a marked increase of over 8% in complex needs referrals, including women with safeguarding, mental health challenges, housing and broader socio-economic issues or combinations of all the above. Many of these women are from BAME/Global majority communities.

Our Rapha Listening Team of staff and volunteers provided over 480 support sessions to over 130 individuals to improve their well-being. A first for Bethel, and with funding through Sport England, Rapha and our community partners launched a project to support BAME men aged 40 plus in the community through its Walk Talk Move Heal project. So far, this project has supported 25 men to access physical activity and wellbeing 'talk and support' leading to improved health and mental wellbeing. At Bethel, we believe in building social value in everything we do; this is done by upskilling and investing in local men and women who are passionate about their communities. We see them as local community assets who want to give back as volunteers who are the backbone and foundation of the organisation. Using this approach, Bethel secured Core 20 funding to train 10 new local Doula Champion Volunteer Connectors. We have created opportunities for the programme to be accredited, to provide an opportunity for scalability, and for the women to learn how to set up their own business, this being done in partnership with a local education provider in Birmingham.

*The current England rate of infant mortality is 3.9 deaths per 1,000 live births. The West Midlands has a much higher rate as a region at 5.6 deaths per 1,000 births, the highest in the country. England's top four local authorities with the highest infant mortality rates are all in the West Midlands. Stoke on Trent has the highest rate, then Sandwell and Birmingham are third highest nationally, at seven deaths per 1,000 live births. Infant Mortality Scrutiny Report Final, 2021*

This impact document shows the stories behind the numbers, and also gives a dashboard of the organisation's impact throughout 2022 and 2023. We have taken a case study approach, which demonstrates the value and impact of the services we provide.

It concludes with a clear call to action about how you can get involved by becoming an ongoing supporter of Bethel Health and Healing Network by making regular donations, making Bethel Health and Healing Network your charity of choice when looking at fundraising team building activities for your organisation, becoming a volunteer for one of our services or partnering with increase access to our services for those who need it most.

We hope you get an essence of the amazing impact Bethel had over 2022 and 2023, improving the health and well-being across Birmingham Solihull and the Black Country.

**Jennifer Jones-Rigby MBA, PGCE, CMgr, MCFI, FRSA**  
**CEO**  
**Bethel Health and Healing Network**

# Impact Report



Bethel Doula provides emotional, practical and birth partner support to vulnerable and isolated pregnant women and new mothers. We work with statutory and community partners across the health and social care sectors to ensure that vulnerable women and their children do not fall between the gaps in services. We supplement our face-to-face support with on-line activities, mother and baby group support, parenting skills courses and connect mothers and families to other support services.

321

REFERRALS RECEIVED

254

HOME VISITS

1116

SUPPORT SESSIONS  
DELIVERED

282

WOMEN SUPPORTED

84%

WOULD RECOMMEND THE  
SERVICE

89%

OVERALL LEVEL OF  
SATISFACTION

31%

ASYLUM SEEKERS OR  
REFUGEES

# DOULA SERVICE

This year has been a rewarding, albeit challenging year for the Doula Service. The team supported more vulnerable women with more complex needs than ever, pushing the service beyond its normal capacity. Increased referrals were received from specialist midwives for women with mental health concerns. Over a fifth of women were referred with known safeguarding concerns and 18 women were supported at child protection/ multi-disciplinary meetings. While fewer volunteers supported service delivery, we maintained a high-quality service with an 89% satisfaction rate.

Perinatal mood and anxiety disorders are among the most common pregnancy and childbirth complications and are associated with adverse outcomes. The Better Births maternity review recommended a continuity of carer throughout pregnancy, birth, and postnatally as it built trust and a better understanding of the patient's medical and pregnancy history, leading to better outcomes. However, according to the 2022 NHS Maternity Survey, only 37% of respondents saw or spoke to the same midwife at their antenatal check-ups, falling to 27% during postnatal appointments. This represents a decline in midwifery continuity of care since 2021 although comparable with the findings from the 2019 survey.

The Doula Service provided continuity of care for pregnant women and new mothers during the antenatal, birth and postnatal period, building trust in a supportive environment and promoting better outcomes for mother and baby. We visited women at home, sourced and provided essential items for mother and baby, and made those all-important calls to encourage, check-ups, supporting our service users with all aspects of their pregnancy and post-birth. We also provided access to our mother and baby group and parent education course, increasing opportunities for women to connect with others and their families to develop new skills.

The Doula Service provides a cost-effective approach to supporting the most vulnerable pregnant women and new mothers. In 2022/23 we spent on average £1,336 (without birth support) supporting service users with complex safeguarding and mental health needs. Critically, the team contributed to vulnerable women having better mental health during the perinatal period and reducing the need for specialist interventions and additional support from health professionals as demonstrated in the two case studies below.

# DOULA CASE STUDY 1



F was referred to Bethel Doula Service by her midwife after she noticed that F had no support network in Birmingham, having recently moved from London. F had undergone a traumatic birth with her first child three years earlier, followed by a miscarriage. Not long after the miscarriage, she discovered she was pregnant with her second child. F was matched with a senior doula, who attended hospital appointments with her and helped her to arrange a debrief at the hospital regarding the birth of her first child, and the subsequent advice and management of the miscarriage.

F felt she needed a debrief to move on and prepare for the birth of her second child. The senior doula provided F with emotional support throughout the pregnancy and helped her make informed decisions regarding the birth plan and prepare for her election to have a scheduled C-section. F stated, *"Following my first child, I led a very isolated life, leading me to suffer from postnatal depression. I am certain that had I been referred to the Bethel during this time I would have had a better pre-and post-birth experience which I got after the birth of my second child."*

F again suffered from post-natal depression, and the senior doula attended several post-birth hospital appointments. She helped her understand that what she was experiencing was common and that she need not suffer in silence as she had the first time. With the help of the senior doula, medication and therapy, F fully recovered and was able to be the best mother to her children. F stated that the Doula Service enabled her to engage with an experienced person who helped her understand her issues, choices available, and better plan for the pending birth, thereby reducing anxiety. She was also better able to manage her mental health and therefore her toddler and new baby with less fear and anxiety. F commented, "I did not require the attendance of other health professionals such as the mental health team, or a longer stay in hospital - maternity or mental health. I was not separated from my toddler or baby to have my mental health managed." F is now volunteering and preparing to start her career as a midwife in 2024.

## **Economic Impact of Support**

F previously had a nervous breakdown following her first pregnancy, and once again there were signs that due to her escalating anxiety and deteriorating mental health she might need more intensive mental health support, possibly an in-patient stay at a perinatal mental health unit. Perinatal mental illness affects up to 27% of new and expectant mums. The average stay in a mother and baby unit is 8 weeks. Admittance at a perinatal mental health unit cost £947 per bed day. Research indicates that the average cost to society of one case of perinatal depression is around £74,000, of which £23,000 relates to the mother and £51,000 relates to impacts on the child. With the senior doula's help, F addressed her anxieties and embraced her pregnancy, thereby avoiding intensive mental health interventions pre and post-birth. The doula support also meant that F needed fewer specialist midwife visits and GP appointments to discuss her mental health and a longer stay in the maternity unit following the caesarean was avoided.

## Summary of Potential Costs Avoided

Costs Avoided	Costs	Total cost	Assumptions
In-patient stay in perinatal mental health unit	£947 x 28 days	£26,516	4-week stay at £947 per day
Outpatient perinatal mental health services	£357 x 6 contacts	£2,142	Care contact unit cost £357 – 6 contacts
In-hospital care during pregnancy	£53 x 6 hours	£318	Hospital-based nurses/ midwife support £53 per hr – 6 hours assumed
Additional post-birth visits by a specialist midwife	£55 x 12 hours	£660	6 visits @ £55 per hour – 2 hrs assumed per visit including travel
GP consultation	£42 x 6 appointments	£252	6 appointments at £42 per consultation
<b>TOTAL £32,636</b>			

*Source: Unit Costs of Health and Social Care 2022. Personal Social Services Research Unit (University of Kent) & Centre for Health Economics (University of York)*

# DOULA CASE STUDY 2



T came to the UK as a postgraduate student with her husband and son, and soon after found that she was pregnant with triplets. T was referred to the Doula Service post-birth. Following heavy bleeding and the premature birth of the triplets one of the babies died soon after delivery. T stated that she did not have time to grieve. "That period was a difficult moment for us in my family, as we were settling in the country, and did not understand the system." The bereavement team supported her with the funeral arrangements as she did not have recourse to public funds.

T stated her mental health and that of her husband had been affected and there were times when she felt "emotionally numbed, suicidal, and generally tired." One weekend when at her lowest, she contemplated suicide as she'd had a tough week – the newborns had attended different hospitals on more than one occasion that week – treated for chest infections, including short inpatient stays.

T's husband had sourced, organised, and paid the first month's rent for a flat they were promised. They had saved money from limited funds for the removal van and packed up their belongings including baby clothes and food and transferred them to what was to be their new accommodation. They were pleased to be moving away from the cold house and the dark creeping mould which repeatedly returned even after they cleaned it with bleach. Whilst preparing to finally leave the old accommodation, T and husband were informed that the property was no longer available. They were distraught as all their property had been removed from the flat and left outside in heavy rain. Most of their belongings including the food, could not be salvaged. Following the referral to the Doula Service, T and her family received emotional support, resources for the babies, food parcels, and a referral to Early Help services. She was signposted to an organisation where she received a debriefing for baby loss. The suicidal thoughts became less invasive, and her self-esteem and ability to cope with everyday challenges improved. T stated that she appreciated the Doula Service for being an 'amicable organisation when they needed help.'

## **Economic Impact of Support**

Due to her mental state, T was prescribed a mild anti-depressant by her GP. However, receiving emotional support at a critical time meant that she did not have to be medicated further or need specialist perinatal mental health support. T and her husband had attempted to treat the mould on the wall with strong bleach. Unfortunately, the fumes impacted the babies' respiratory health, adding to their already compromised health. T had not been aware of the fumes generated by the bleach, but upon learning this the babies' hospital appointments soon reduced and further inpatient stays were avoided. T's husband was supported in getting a permanent post so he could support the family. They had relied on borrowing from friends, and this was causing tension and more emotional trauma.

## Summary of Potential Costs Avoided

Costs Avoided	Costs	Total cost	Assumptions
Neo-natal in-patient care	£952 x 14 days	£13,328	7 days stay in a critical care ward (Normal care) for 2 babies
GP consultation	£42 x 6 appointments	£252	6 appointments at £42 per consultation
Community perinatal mental health support	£246 x 6 contacts	£1476	Care contact unit cost £246 – 6 contacts
<b>TOTAL £15,056</b>			

## MOTHER & BABY GROUP

**53**

GROUP SESSIONS

**76**

WOMEN ENGAGED IN OPPORTUNITIES TO SOCIALISE, LEARN NEW SKILLS, AND TAKE PART IN PHYSICAL ACTIVITY LIKE SWIMMING FOR MOTHER AND BABY AND DANCE

## PARENT EDUCATION

**37**

WOMEN PARTICIPATED

**14**

SESSIONS DELIVERED

# Impact Report



**Rapha  
Listening  
Service**

Bethel Rapha provides a safe, non-judgmental listening service to adults experiencing anxiety, stress, isolation and depression often caused by the wider determinants of health such as social and economic conditions, difficult family and personal relationships, racism and sexism and other discrimination. In addition to telephone support, we work in partnership with statutory and community organisations to deliver face to face listening sessions in community settings across Birmingham and Solihull. People accessing the service receive up to 9 hours of listening support and signposting to additional mental health and wellbeing services.

**131**

PEOPLE SUPPORTED

**484**

SUPPORT SESSION  
DELIVERED

**383**

HOURS OF SUPPORT  
PROVIDED

**94%**

OVERALL LEVEL OF  
SATISFACTION

**64%**

MENTAL HEALTH  
IMPROVED

**92%**

WOULD RECOMMEND THE  
SERVICE



**"I really appreciate the listening services and my listener, as I felt these sessions improved my self-confidence and motivation"-  
White British male, 75, history of historical relationships issues**

# RAPHA SERVICE

The Rapha Listening Service supported 131 people with mental health needs and delivered 484 support sessions. This was down from the previous year due to a significant reduction in the active volunteer team as a result of the challenging economic environment. However, as referrals to the service remained steady, we continued to maintain a waiting list. We allocated staff time to direct listening and ensured service users were kept informed throughout as they waited to be matched to a trained listener.

1 in 4 people will experience a mental health problem of some kind each year in England. 1 in 6 people report experiencing a common mental health problem (like anxiety and depression) in any given week. In Birmingham and Solihull 7.3% of the population is in contact with mental health services compared to 6% nationally.

The Rapha Listening Service delivered a value for money service through its team of volunteer and staff listeners. It typically costs £297 to deliver 9 listening sessions with the support of a trained volunteer listener, and £390 when support is delivered exclusively by employed staff. As demonstrated by the case studies in this report, the service reduced the need for more costly mental health support such as IAPT services or a stay in an in-patient unit and avoided other social and economic impacts resulting from poor mental health.

Using the WEMWBs well-being scale, Rapha service users were typically in the bottom 15% of the population with a low-wellbeing category. Following the support of a trained listener, nearly two-thirds of service users said their overall mental health had improved. We achieved a 94% satisfaction rate with 89% of service users stating they would recommend the service to others.



# RAPHA LISTENER CASE STUDY

## 1

S, a middle-aged Pakistani female, self-referred to the Rapha Listening Service with a long history of anxiety and depression. At the initial assessment, she spoke of her ongoing challenges with her mental health, which was now being exacerbated by her concerns about finances and her ability to provide for her dependents.

S attended nine listening sessions with her trained listener and used the time to discuss her fears of having 'another nervous breakdown', panic attacks, the needs of her family, and the rising cost of living. She was also supported to contact her Community Mental Health Team and her pending appointment was brought forward, resulting in an increase in her medication which helped stabilise her mental health, preventing further deterioration. She also accepted a referral for an assessment of her social needs and was offered and accepted help from family support services. While S was often tearful during her listening sessions, she always expressed gratitude that someone had listened to her whilst she tried to deal with the complexities of her personal issues. At the final evaluation, S was positive about the support she had received and commented that her listener had really helped with appropriate signposting. S was also able to 'get things off her chest' and was now more hopeful that 'things might change'.

### Economic Impact of Support

86% of respondents to a Money and Mental Health survey of nearly 5,500 people with experience of mental health problems said that their financial situation had worsened their mental health problems. Acute episodes of mental health problems can also disrupt incomes. People can struggle to attend work, maintain their benefit claims, or keep on top of managing their money. 11 S felt she was heading towards a mental health crisis due primarily due to financial pressures. This would almost certainly have required more acute mental health interventions from the community mental health team, possibly in-patient support, and additional appointments with her GP. The average length of stay in an adult acute inpatient unit is 35 days.<sup>12</sup> However, the opportunity to talk through her concerns and fears with her listener and being supported to access other services more promptly meant a mental health crisis was avoided.

### Summary of Potential Costs Avoided

Costs Avoided	Costs	Total cost	Assumptions
In-patient mental health	£341 per bed day x 28 days	£9,548	Mean cost of mental health care clusters per bed day - 28 days stay assumed
Mental health initial assessment	£294	£294	Mean cost of mental health care clusters – Initial assessment

Additional GP appointments	£42 x 3 appointments	£126	3 appointments assumed
Additional IAPT contact	£140 x 6 sessions	£840	6 sessions assumed
<b>TOTAL £10,808</b>			

*SOURCE: UNIT COSTS OF HEALTH AND SOCIAL CARE 2022. PERSONAL SOCIAL SERVICES RESEARCH UNIT (UNIVERSITY OF KENT) & CENTRE FOR HEALTH ECONOMICS (UNIVERSITY OF YORK)*

# RAPHA LISTENER CASE STUDY

## 2



A, an Indian female in her mid-30s, was referred to the Listening Service by her GP with a history of anxiety, depression, and insomnia due to poor physical health. On initial assessment, she spoke of a history of suicidal ideation and what triggered these thoughts. A was matched with a listener, and she used the 9 weekly sessions to discuss relationship issues, negotiation skills, adopting a positive mindset and managing anxiety and worries. During the sessions, a new work issue arose whereby A felt she was being unfairly treated by others.

The focus now changed to building strength, resilience and self-advocacy. A identified that although things were difficult, she was 'keeping on going and staying positively minded'. As the sessions progressed, she became more confident about her plans to address the work issues. While suicide ideation had been an important disclosure for A during her initial assessment, she no longer raised this issue during the listening sessions as A became more confident. At the end of the support evaluation, A said that the listener's kindness and support had boosted her mood and that she had looked forward to the sessions. Overall, she felt that the sessions helped her cope with her difficulties and that she was now in a 'much better place.'

### Economic Impact of Support

Around 1 in 5 people have suicidal thoughts at some point in their lives. In 2021, in England and Wales, the suicide rate was 10.7 deaths per 100,000 people; while this was statistically significantly higher than the 2020 rate of 10.0 deaths per 100,000 people, it was consistent with the pre-COVID 19 pandemic rates in 2019 and 2018.<sup>14</sup> Each suicide costs an estimated £1.7m. Around 70% of this cost is the emotional impact on families and society.<sup>15</sup> Due to A's suicidal ideation, she was classed as a safeguarding risk with a potential for referral to social services and/or A&E. Having the opportunity to talk to her listener enabled A to build resilience and develop strategies that helped her manage her thoughts and take positive action. The safeguarding alert was therefore reduced, and further escalation to social services was not required, or an emergency attendance at A&E for a mental health assessment. A remained in work and avoided potentially having to sign on for Job Seeker's Allowance.

### Summary of Potential Costs Avoided

Costs Avoided	Costs	Total cost	Assumptions
Social services - Safeguarding escalation	£42 x 6 hours	£252	Social worker (adult services) £42 per hour – 6 hours
Avoided A & E visit	£312	£312	A&E mental health liaison services

GP appointments	£42 x 3 appointments	£126	3 appointments
JSA	£84.80 x 24 weeks	£2,035.20	JSA claim for 24 weeks - £84.80 single-person allowance
<b>TOTAL £2,725.20</b>			

*SOURCE: UNIT COSTS OF HEALTH AND SOCIAL CARE 2022. PERSONAL SOCIAL SERVICES RESEARCH UNIT (UNIVERSITY OF KENT) & CENTRE FOR HEALTH ECONOMICS (UNIVERSITY OF YORK)*

# Volunteer Impact Report



**“It keeps me in touch with the human reality. There can be good times and difficult times. Through Rapha Listening Service I’m able to offer something to those in need.” (Rapha Listener 2+ years)**

**Being able to help others makes me feel like I have done something good and positive, mentally it is a very rewarding process**

**40**

ACTIVE  
VOLUNTEERS

**407**

SUPPORT SESSION  
DELIVERED BY  
VOLUNTEERS

**93%**

HAD A POSITIVE  
EXPERIENCE

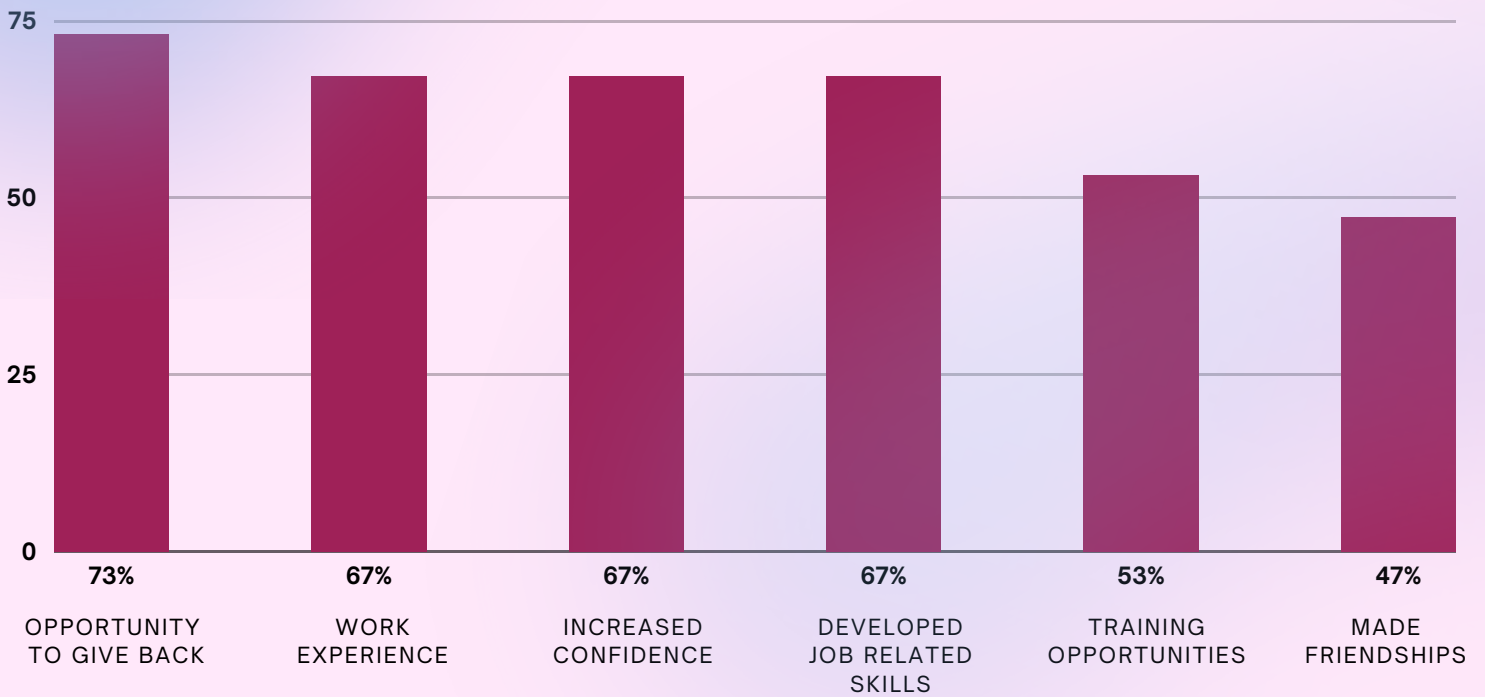
**50%**

BEEN WITH BETHEL FOR  
A YEAR OR MORE

**100%**

FELT APPRECIATED

## HOW VOLUNTEERS BENEFITTED



# Rapha Volunteer Listener Case Study



K, a Criminology and Psychology student, who was in full-time employment and a mother of two, sought to obtain experience in supporting people with mental health needs. K applied to volunteer with the Rapha Listening service in January 2023 and began client support in March following her training in reflective listening skills, safeguarding and confidentiality.

K has supported three service users from diverse ethnic backgrounds with anxiety and depression due to work stress, family and relationship issues, and health concerns. She has now delivered almost twenty telephone listening sessions and grown in confidence in engaging with people with mental health needs and responding appropriately to safeguarding concerns.

K feels she has benefitted both mentally and physically through volunteering with Bethel. Having listened to other people's stories and being there for those who need it, she said *"I very much appreciate what I have got and what I have achieved in my life so far. Volunteering makes me feel humble and I am very happy to help others whenever I can."* Through her volunteer listening role, K has been able to learn and practice how to support people in an empathetic and non-judgemental way. She has also become better at being organised and scheduling meetings that fit within her busy life schedule, family, work and study time. She stated, *"Being able to provide a good service makes me feel good. It is ever so rewarding to hear back from the service users and my management that the service I provided was useful."*

# Volunteer Doula Case Study



C, a mother of two young children from Romania is a placement student from an international institution providing vocational programmes. C began her Doula Service placement in early 2023 and participated in Bethel's doula training course which equipped her with the skills to support vulnerable pregnant women. Since the training C has provided telephone and face-to-face emotional support to several vulnerable and isolated pregnant women and supported the delivery of Moses baskets full of essentials to women in need of basic supplies for their babies. She also had the opportunity to provide administrative support to the team and collect feedback from service users.

C has valued her experience of being part of a dedicated team who works to improve the lives of women. She commented, *"The Doula team's unwavering commitment has been inspirational and has provided me with invaluable insights."*

C has learned about Bethel's structured process for ensuring women's well-being, both physically and emotionally. Having witnessed the transformational impact of the support on women and their families, C suggested outreach initiatives so that even more women can benefit from the support available and has grown in her desire to continue to make a difference in the lives of the most vulnerable people. She stated, *"The time spent volunteering with Bethel Doula will forever be etched in my memory as a significant period of learning, growth, and service."*

# Financial Review & Statements

Income for the year amounted to £301,352 (2022: £305,725), whilst expenditure was £374,002 (2022: £378,998). This resulted in a deficit of (£72,650) (2022: deficit of (£73,273) and a decrease in funds for the year to £2,098 (2022: £74,749).

Bethel continued to deliver its long-term plan of providing enhanced services through the increased staffing structure. Unfortunately, income generation did not meet the target and so more reserves were used than anticipated. This low level of reserves does leave Bethel vulnerable, but the Trustees are confident that the improved income levels and significant surplus budgeted in 23/24 are achievable and will place the Charity on a firm footing for the future.

## Reserves Policy

Reserves are required to:

- Smooth out surpluses and deficits year on year;
- Replace capital expenditure or restructure the organisation;
- Deal with the effects of any risks that materialise e.g., significant losses of income and delays in payments;
- Allow the organisation to take on opportunities that may arise in a timely manner;
- Deal with the unexpected.

Trustees are required to set an appropriate minimum level of reserves and in doing so, consider these reasons for holding reserves, as well as current and future financial needs. The trustees have decided to set minimum reserves at 4 months of unrestricted expenditure, as indicative of the operating reserves required by the nature and size of the charity. As of 31 March 2023, that will require minimum free reserves of approximately £95,752 to be held (2022: £98,270). Both the policy and its implementation are under regular scrutiny.

## Trustee Responsibilities for the Financial Statements

Charity and Company Law require 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 at the balance sheet date and of its incoming resources and application of resources, including income and expenditure for that period. In preparing those financial statements, the Trustees are required to:

Select suitable accounting policies and apply them consistently to:

- Make judgements and estimates that are reasonable and prudent
- State whether applicable accounting standards have been followed, subject to any material departures disclosed and explained in the financial statements
- Prepare the financial statements on the going concern basis, unless it is inappropriate to assume that the Charity will continue in business

The Trustees are responsible for keeping financial records which disclose with reasonable accuracy at any time the financial position of the Charity and that enable them to ensure that the financial statements comply with the Companies Act 2006. They are also responsible for safeguarding the assets of the Charity and hence must take reasonable steps for the prevention and detection of fraud and other irregularities.

## Bethel Health and Healing Network

### Independent Examiners Report to the Trustees of the Bethel Health and Healing Network

I report on the financial statements of the Charity for the year ended 31st March 2023

#### Respective responsibilities of trustees and examiner

The charity's trustees are responsible for the preparation of accounts. The trustees consider that an audit is not required for this year under section 43(2) of the Charities Act 1993 ('the 1993 Act') and that an independent examination is needed. The charity has prepared accrued accounts and I am qualified to undertake the examination.

It is my responsibility to:

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

#### Basis of Independent Examiner's Statement

My examination was carried out in accordance with the General Directions given by the Charity Commissioners and with Regulation 11 of the 2006 Regulations. An examination includes a review of the accounting records kept by the organisation, and a comparison of the accounts presented with those records. It also includes consideration of any unusual items or disclosures in the accounts and seeking explanations from you as trustees concerning any such matters. The procedures undertaken do not provide all the evidence that would be required in an audit, and consequently I do not express an audit opinion on the view given by the accounts.

#### Independent Examiner's Statement

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

1. which gives me reasonable cause to believe that in any material respect, the requirements: to keep accounting records in accordance with section 41 of the 1993 Act and Regulation 4 of the 2006 Regulations; and to prepare accounts which accord with the accounting records and comply with the accounting requirements of the 1993 Act and Regulation 8 of the 2006 Regulations; and which are consistent with the methods and principles of the Statement of Recommended Practice: Accounting and Reporting by Charities have not been met, or
2. to which, in my opinion, attention should be drawn to enable a proper understanding of the accounts to be reached.

Signed:



Date:

12/9/2023

David Chittenden  
18 Cunningham Road  
Peterborough  
PE2 9RG

Statement of Financial Activities  
Year Ended 31st March 2023

	Note	Restricted	Unrestricted	Total Funds 2023	Total Funds 2022
<b>Income and Endowments from:</b>					
Donations and legacies	2	45,621	6,072	51,692	66,613
Charitable activities	3	0	249,558	249,558	236,074
Interest			0	0	4
Other income			101	101	3,034
		<u>45,621</u>	<u>255,731</u>	<u>301,352</u>	<u>305,725</u>
<b>Expenditure on:</b>					
Raising funds	4		16,232	16,232	11,817
Charitable activities	5/6/7	45,621	312,150	357,770	367,181
Total expenditure		<u>45,621</u>	<u>328,381</u>	<u>374,002</u>	<u>378,998</u>
Net income		0	(72,650)	(72,650)	(73,273)
<b>Reconciliation of Funds</b>					
Total Funds brought forward		0	74,749	74,749	148,022
Total Funds carried forward		0	2,098	2,098	74,749
<b>Balance Sheet as at 31st March 2023</b>					
<b>Current Assets</b>					
Debtors	11			72,149	29,533
Cash at bank and in hand	12			<u>57,726</u>	<u>61,488</u>
				<u>129,875</u>	<u>91,021</u>
<b>Current Liabilities</b>					
Liabilities falling due within one year	13			<u>127,777</u>	<u>16,272</u>
				<u>2,098</u>	<u>74,749</u>
<b>Net Assets</b>					
<b>Represented by:-</b>					
Unrestricted Funds	15			2,098	74,749
Restricted Funds	15			0	0
Total Funds				<u>2,098</u>	<u>74,749</u>

The trustees (who are also the directors of the company for the purposes of company law) confirm that for the period ended 31 March 2023:-

- the company was entitled to exemption from audit under section 477 of the Companies Act 2006 ("the Act"), and
- members have not required the company to obtain an audit of its accounts for the period in question in accordance with section 476 of the Act. However, in accordance with section 145 of the Charities Act 2011 and section 44 of the Charities and Trustee Investment (Scotland) Act 2005, the accounts have been examined by an independent examiner.

The trustees acknowledge their responsibilities for complying with the requirements of the Act with respect to accounting records and the preparation of accounts.

The notes form an integral part of these accounts. They have been reviewed in the preparation of these accounts with changes to the classification and presentation.

These accounts, which have been prepared in accordance with the provisions in the Companies Act 2006 relating to small companies, were approved by the trustees on 15/09/2023 and signed on their behalf by:

  
Jeanette Burrows  
Trustee

Date: 15/09/23

**Notes:****1. Accounting Policies****(a) Basis of Preparation**

These accounts have been prepared on the basis of historic cost in accordance with the Accounting Regulations set out under the Charities Act 1993 and with the Charities Statement of Recommended Practice (SORP) 2005 - Second Edition

**(b) Form of Financial Statements**

- (i) Unrestricted funds are those that may be used at the discretion of the trustees in furtherance of the objects of the charity
- (ii) Restricted funds may only be used by specific purposes. Restrictions arise when specified by the donor or when funds are raised for specific purposes.

**(c) Incoming Resources**

- (i) Incoming Resources are recognised and included in the Statement of Financial Activities (SOFA) when the Charity becomes entitled to the resources; the trustees are virtually certain they will receive the resources; and the monetary value can be measured with sufficient reliability.
- (ii) Where incoming resources have related expenditure (as with fundraising), the incoming resources and related expenditure are reported gross in the SOFA.
- (iii) Donations are accounted for gross when received.
- (iv) Bank interest is recognised when it is credited to the account.

**(d) Expenditure and Liabilities**

- (i) Expenditure is accounted for on an accruals basis.
- (ii) Liabilities are recognised as soon as there is a legal or constructive obligation to pay out resources.

**(e) Assets**

Tangible fixed assets are capitalised if they cost more than £1,000 and can be used for more than one year. They are valued at cost or, if gifted, at value on receipt. The charity does not currently have any capitalised fixed assets.

**(f) Taxation**

The charity is not liable for income or capital gains tax on its charitable activities. Irrecoverable VAT is included in the asset cost or expense to which it relates.

**2. Income from donations and legacies**

	Restricted	Unrestricted	2023	2022
Donations received	0	3,322	3,322	2,898
Grants received:				
Baron Davenport's Charity			0	750
Birmingham Voluntary Service Council	3,000		3,000	0
Eveson Trust	12,500		12,500	0
GB Partnerships			0	2,000
Health Exchange	13,131		13,131	0
Heart of England Community Foundation	4,000		4,000	1,972
Legacy West Midlands	2,990		2,990	0
Lloyds Bank Foundation		2,250	2,250	25,000
Movement for Good (Benefact Group)			0	1,000
Pears Foundation			0	10,000
Richard Kilcuppe Charity		500	500	500
The 29th May 1961 Charitable Trust	5,000		5,000	5,000
The Arnold Clark Community Fund			0	3,500
The ASDA Foundation			0	900
The Big Give Trust Ltd			0	700
The Cole Charitable Trust			0	1,000
The Goodenough Charitable Trust			0	1,000
The Edward Gostlin Foundation	5,000		5,000	0
The National Lottery Community Fund			0	9,893
The W.E.D. Charitable Trust			0	500
Other			0	0
	<u>45,621</u>	<u>6,072</u>	<u>51,692</u>	<u>66,613</u>

### 3. Income from charitable activities

Birmingham & Solihull Mental Health NHS Foundation Trust	24,991	24,991	19,975
Living Well Consortium	35,000	35,000	32,998
Murray Hall Community Trust Ltd	7,380	7,380	7,380
NHS Birmingham and Solihull ICB	80,643	80,643	
NHS Birmingham and Solihull CCG	23,847	23,847	104,320
NHS Black Country ICB	54,835	54,835	
NHS Black Country and West Bham CCG	18,278	18,278	71,400
Sandwell & West Birmingham Hospital NHS Trust	4,583	4,583	
	<u>0</u>	<u>249,558</u>	<u>249,558</u>
			<u>236,074</u>

### 4. Expenditure on generating donations and legacies

<b>Unrestricted funds</b>			
<i>Raising funds</i>		16,232	11,817

### 5. Costs of charitable activities by fund type

Doula	17,122	163,273	180,395	231,544
Rapha listening service	28,499	98,223.42	126,722	76,066
Trusted Charity (PQASSO)			0	0
Support costs		50,654	50,654	59,571
	<u>45,621</u>	<u>312,150</u>	<u>357,770</u>	<u>367,181</u>

### 6. Costs of charitable activities by activity type

	Activities undertaken directly	Support costs	Total	Total
Doula	180,395	29,753	210,148	276,384
Rapha listening service	126,722	20,901	147,623	90,797
Trusted Charity (PQASSO)			0	0
	<u>307,117</u>	<u>50,654</u>	<u>357,770</u>	<u>367,181</u>

### 7. Analysis of support costs

	2023	2022
Communication costs	10,038	12,809
Office costs	12,393	13,435
Premises costs	15,555	12,452
Legal and professional	30,716	39,833
Other operating costs	16,339	13,793
	<u>85,040</u>	<u>92,322</u>

### 8. Independent examiner's remuneration

The Independent examiner provided services on a voluntary basis so no fee was charged (2022: Nil)

### 9. Trustees' remuneration and expenses

During the year, no Trustees received any remuneration or other benefits and no expenses were claimed (2022: Nil)

### 10. Staff costs and emoluments

Salaries and wages	263,913	260,418
Social security costs	20,372	17,482
Employers contribution to defined contribution pension scheme	<u>5,751</u>	<u>4,607</u>
	<u>290,035</u>	<u>282,507</u>

There were no employees whose emoluments (salaries, wages, benefits in kind) fell in a band in excess of £60,000 (2022: Nil)

The average number of persons employed by the Charity, including part time staff, calculated on a full time equivalent basis was:

Core staff	8.20	8.86
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### 11. Debtors

Accounts Receivable	70,213	26,814
Accrued Revenue	0	1,153
Prepaid Expenses	1,936	1,567
Other	<u>72,149</u>	<u>29,533</u>

### 12. Bank and Cash Balances

TSB current account	55,014	45,785
Triodos deposit account	2,677	15,677
Petty Cash	<u>35</u>	<u>26</u>
	<u>57,726</u>	<u>61,488</u>

**13. Current Liabilities (payable within one year)**

Accounts Payable	3,883	3,531
Accruals and deferred income	453	2,183
Payroll Liabilities	11,072	10,558
Prepaid Income	<u>112,368</u>	<u>0</u>
	127,777	16,272

**14. Related party transactions**

Donations without condition of £360 were received from one trustee (2022: £360 from 1 trustee)  
These amounts do not include the gift aid associated with these donations.

<b>15. Statement of Funds</b>	<b>At 1st April 2022</b>	<b>Income</b>	<b>Expenditure</b>	<b>Transfers</b>	<b>At 1st April 2023</b>
<b>Unrestricted Funds</b>					
General	141,578	6,173	16,232		131,520
Doula designated	(66,829)	249,558	312,150		(129,421)
	<u>74,749</u>	<u>255,731</u>	<u>328,381</u>	<u>0</u>	<u>2,098</u>
<b>Restricted Funds</b>					
Doula		17,122	17,122		0
Rapha		28,499	28,499		0
	<u>0</u>	<u>45,621</u>	<u>45,621</u>	<u>0</u>	<u>0</u>
<b>Total Funds</b>	<u>74,749</u>	<u>301,352</u>	<u>374,002</u>	<u>0</u>	<u>2,098</u>

**Prior year**

<b>Unrestricted Funds</b>					
General	106,259	47,136	11,817		141,578
Doula designated	41,763	238,074	344,666		(66,829)
	<u>148,022</u>	<u>283,210</u>	<u>356,483</u>	<u>0</u>	<u>74,749</u>
<b>Restricted Funds</b>					
Doula		18,043	18,043		0
Rapha		4,472	4,472		0
	<u>0</u>	<u>22,515</u>	<u>22,515</u>	<u>0</u>	<u>0</u>
<b>Total Funds</b>	<u>148,022</u>	<u>305,725</u>	<u>378,998</u>	<u>0</u>	<u>74,749</u>

# HOW CAN YOU HELP?

- Volunteer with the Doula or Rapha services to deliver vital support to those in need
- Partner with us to develop joint mental health and wellbeing services
- Create opportunities to reach vulnerable pregnant women in the Black Country and surrounding areas
- Access to practical resources, storage facilities and funding opportunities

## ABOUT BETHEL HEALTH AND HEALING NETWORK

**Our Vision:** To enable and empower people to become physically, emotionally, and spiritually healthy

**Our Mission:** Offer a range of holistic services that promote health and wellbeing to people in need

**Our Values:** Compassion, Integrity, Empowerment, Fairness, Partnership

### Our Strategic Aims:

- Diverse communities have access to quality mental health and wellbeing services
- Bethel Health and Healing Network continues to be a place of welcome for those in need
- Deliver and develop effective services for existing and new beneficiaries
- Increase our impact through strategic partnerships
- Bethel Health and Healing Network is an effective and sustainable organisation

## CONTACT US



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enquiries@bethelnetwork.org.uk



@bethel\_network



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Bethel Health and Healing Network 196 –198 Edward Road, Balsall Heath Birmingham B12 9LX  
Registered Charity No: 1116225 Company number: 05813084

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**BETHEL HEALTH AND HEALING NETWORK**

England & Wales - Charity number 1116225

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# Accounts

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# BETHEL HEALTH AND HEALING NETWORK'S ANNUAL REPORT AND FINANCIAL STATEMENTS



APRIL 2021 - MARCH 2022

**BETHEL'S YEAR OF IMPACT**



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## SECTION 5

Financial Review and  
Statements



# SECTION 1 - INTRODUCTION - A MESSAGE FROM THE CHAIR



I am honoured to represent Bethel Health and Healing Network as the new Chair and to present the 2021-2022 Annual Report. The report offers insight into our efforts, achievements, and how we have met our objectives over the past 12 months. It is a testament to our determination and ambitions to consistently deliver the highest level of excellence throughout our services, providing much needed support to our service users. The external challenges that we have all experienced during the past few years have been relentless, and I am immensely proud of the Bethel staff, volunteers, and the Board, who have daily gone beyond to ensure that our service user remains the most important focus at the end point of everything that we do as an organisation.

As an organisation, we evaluated how we previously delivered our services and challenged ourselves on areas of improvement. Following a review of our organisation, we restructured and acquired a new CEO, Jennifer Jones-Rigby. She has been tasked to set the foundations of growth for Bethel and forge closer relationships with the new ICBs and ICSs and the wider public health landscape, potential collaborative partners, and funders. She will also ensure that the charity grows unapologetically under the banner of our values, which fundamentally affirms the Christian faith that birthed Bethel's vision. We are currently looking to strengthen our Board of Trustees with 2-3 new Trustees to add to an already talented, diverse, and dynamic group, which I am grateful and honoured to lead.

The challenges in growth that face our two main services, the Bethel Doula Service (that provides an essential and unique service to the vulnerable and isolated pregnant women in Birmingham) and the Bethel Rapha Listening Service (that addresses low-level mental health issues), have grown significantly due to the national socio-economic and health challenges. For instance, within the maternity sector, we know that babies are more like to be born early or small, with its complications, to women from South Asian or Black communities from areas of deprivation. The ethnic and socio-economic inequalities in NHS and perinatal care for women and their babies are an ongoing concern. The mental health epidemic continues to grow and within one of the most extensive stress surveys carried out, 74% of people said that the impact that everyday stress has brought upon their lives has made them feel overwhelmed and unable to cope. As an organisation we are aware of these ongoing issues and, within the last 12 months, have met, faced, and overcome some of those challenges and geared up to stand with those who still are vulnerable within our society and communities.

As of the time of printing, we are observing a time of national mourning for the sudden loss of HRH Queen Elizabeth II, our Queen for seven decades, so in conclusion, and observation of her extraordinary life, what can we take and learn from her? Her life was exemplary, selfless, and always focused on doing the right thing. She was, of course, a woman of faith, and it has been said that although she was our Queen, everyday, without fail, she prayed to a God that she acknowledged as the King of Kings and Lord of Lords. She lived out my favourite biblical text, "whatever is true, whatever is noble, whatever is right, whatever is pure, whatever is lovely, whatever is admirable – if anything is excellent or praiseworthy...put it into practice" (Philippians 4:8). May she now and forever rest in perfect peace.

Bethel will get stronger in purpose, intention, and clarity and will continue to grow and fulfil its Godly purpose allowing and helping volunteers, staff and board members to find, develop and fulfil their purpose.

Duncan Moore, Chair of Trustees



# FROM THE TABLE OF THE CEO



”

When I look back at the impact of Bethel's work throughout 2021 and 2022, I can see an increase in the range, reach, and number of services offered, with an almost 20% increase across both Rapha Listening Service and the Doula Service. There has been remarkable growth in the number of volunteers and, more importantly, their impact.

I am so proud to have recently become part of Bethel Health and Healing Network as their new CEO. As a woman of faith, it is a privilege to lead a purpose-driven, faith-based organisation built on sound values that resonated with me and caused me to apply. Having joined the team in July, I have witnessed the staff and volunteers' passion and dedication to their support of our service users.

I have joined the organisation at a time when many Third Sector providers in the health sector are challenged with issues of short-term funding compounded by the current financial crisis, including the increased costs of fuel, with no real steer nationally as to where support will be coming from to assist organisations such as Bethel in these unpredictable times. That said, the senior management team and I are working tirelessly to secure Bethel's future and build growth within the organisation over the next year and beyond.

When I look back at the impact of Bethel's work throughout 2021-22, I can see an increase in the range, reach, and number of services offered, with an almost 20% increase across both Rapha Listening Service and the Doula Service. There has been remarkable growth in the number of volunteers and, more importantly, their impact.

Building on previous incumbents' foundations, I am here to build Bethel at scale and enable the unique support services being offered to grow and flourish, increasing both the volume of services being provided and the income for the organisation. We will continue to reach the most challenged communities, working with community assets to ensure long-term sustainable change within these neighbourhoods.

You will see that Board Member, Jonathan Hindle, has written a piece on the Place of Well-being and Welcome (POWW). Our ambitions as an organisation are huge, and unashamedly so. We know that what we provide is excellent, and we intend to continue working with our current commissioners and funders while looking for new partners, investors, and funders to continue this journey with us.

I want to thank the senior management team, staff, volunteers, and, of course, the Board for their continued input to Bethel, and I look forward to working with them all to realise the growth goals and ambitions of Bethel Health and Healing Network.

Jennifer Jones-Rigby, CEO



# ABOUT BETHEL

## VALUES

COMPASSION

INTEGRITY

EMPOWERMENT

FAIRNESS

PARTNERSHIP








### VISION

To enable and empower people to become physically, emotionally and spiritually healthy.

### MISSION

Offer a range of holistic services that promote health and wellbeing to people in need.

## STRATEGIC AIMS

-  Diverse communities have access to quality mental health and wellbeing services.
-  Bethel Health and Healing Network continues to be a place of welcome for those in need.
-  Deliver and develop effective services for existing and new beneficiaries.
-  Increase our impact through strategic partnerships.
-  Bethel Health and Healing Network is an effective and sustainable organisation.



# OUR YEAR IN PICTURES



# OUR YEAR IN PICTURES



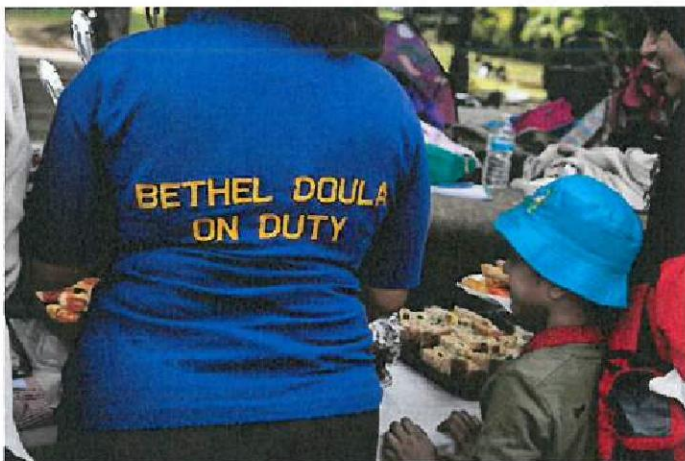
# SECTION 2 - REVIEW OF OUR SERVICES- BETHEL DOULA SERVICE

The Doula service continued to provide safe, confidential support to our vulnerable women and families, some of whom felt abandoned by health and other services. Organisations that they had grown to rely on had disappeared or were inaccessible due to the impact of COVID-19.

Some women were fearful and anxious about leaving their homes and learned how to use varied platforms to communicate and learn. To support and enable them to adjust to 'the new era,' we encouraged, supported, walked with them, signposted, and helped them to build confidence and raise self-esteem, to benefit them and their children.

The restrictions at the maternity units where the Senior Doula or volunteer could only attend when the women were in active labour resulted in some births being missed. The recruitment of volunteers can be challenging and more-so for the doula service, however we were able to provide ongoing support for women all through the year.

At the end of the year, six of our service users had moved on from our Mother and Baby Group and are pursuing their careers including ESOL classes, cyber security, health and social care, health and beauty, and sociology.

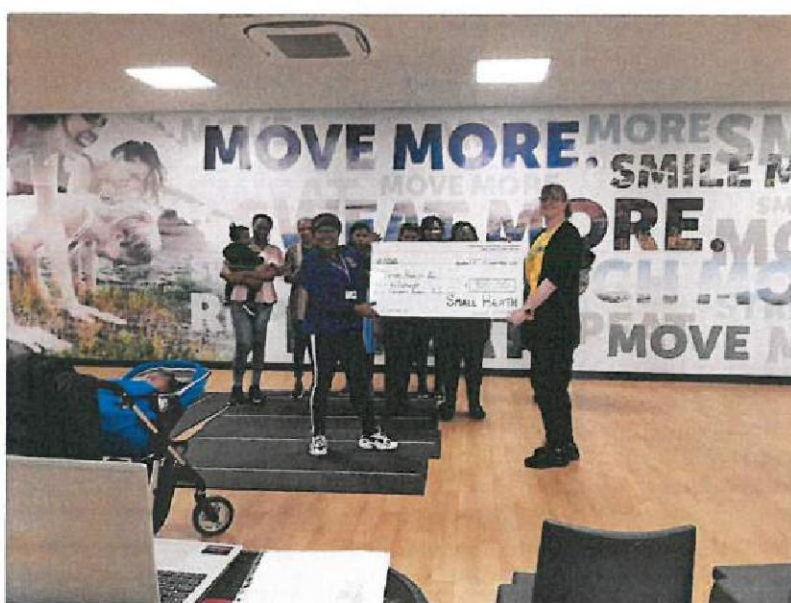


# KEY ACHIEVEMENTS & PROJECTS

- Supported 90% of 188 referrals from referral to discharge
- Supported 90 women to access essential items required for their babies and themselves with support from Baby Basics and the Muslim women volunteers
- Senior Doula and volunteers in spite of the COVID-19 restrictions were able to support a number of women in hospital over the last year
- Doula team and volunteers sourced and delivered food parcels to 40 women
- Supported women with varied child safeguarding issues, attending conferences, planning meetings, supporting them with a budget, parenting skills, and building self-esteem

## PROJECTS

- Our weekly Lunch, Learn and Play mother and baby group at Ladywood Leisure Centre, funded through Awards for All, was attended by our service users and mothers from the local community. We provided a varied support programme, including health sessions and massage, craft activities using items from the kitchen to make jewellery and memory pots, and nature walks in the local community.
- Mooresville Theatre Production facilitated discussions on mental and physical health, pregnancy, relationships, building self-esteem, encouraging personal growth, and engaging with children through play and storytelling. The sessions culminated in an event titled 'Looking in looking Out', with participation from mothers, babies/toddlers, staff, and volunteers.
- We continued collaborating with Starting Well to provide a wraparound service for vulnerable women through Maternity Navigators
- Our project to support women who have experienced pregnancy loss in collaboration with Birmingham Maternal Mental Health Service was extended to 2023
- 40 plus participants, including husbands and partners attended parent education sessions delivered in the community by a trainer through funding from the maternity unit at City Hospital



# DOULA SERVICE FEEDBACK

- "Thank you for supporting S; I feel happy referring to your service as I know you will provide the support needed. The Doula support was instrumental in ensuring that she was not admitted for Mental health support." **Perinatal Mental Health Nurse**
- "Your service and the support of the Senior Doula and volunteer were invaluable in the baby staying with her. Thank you." **Social Worker**
- "I was introduced to your service by a colleague as I am new to Birmingham, I never knew of such a service and the support the team provide, and it's free. Thank you for supporting me; I will be calling on you again." **Community Midwife**
- "I did not know what 'Affirmations' were until I met my doula volunteer; she was encouraging. She helped me to write my birth plan, and she told me encouraging words and phrases to encourage me at the birth. They were pinned on the delivery room wall and helped me focus. She is lovely and caring." **Service User**
- "I had a quick delivery and did not have time to call the Doula; she helped me so much when I was pregnant. I wanted her to be with me, but could not contact her until I was 4cms, then I delivered. She visited me on the ward, which was good, and is still in touch." **Service User**
- "I met my Senior Doula today; she has helped me a lot, lifted my mood, she made me laugh. I feel happy to have her. I will be glad to attend the M&B group." **Service User**
- "I enjoy attending the M&B group. The singing, the storytelling, the theatre group. I enjoyed it all. I have friends for life; they are supportive." **Service User**
- "I was unhappy with my care in the hospital, and the Doula did not get to the birth. I went into labour early at 32 weeks. I recommend that the Doula stays in touch more in the later part of pregnancy, especially if you are pregnant with twins and likely to deliver early." **Service User**

"We are grateful for the impact we made this year. This would not have been possible without our funders and volunteers. We look forward to doing more with your help. Visit [www.bethelnetwork.org.uk](http://www.bethelnetwork.org.uk) for more information on how you can be a part of this." **Doula Team**



# REVIEW OF OUR SERVICES - BETHEL RAPHA SERVICE

The Rapha Listening Service, established in 2017, continued to develop over this last year and was embedded into the range of community mental health support services offered during the pandemic. The volunteer workforce remained stable as the country came out of the pandemic to return to the 'new normal'. The Rapha Service offered up to nine listening sessions per service user with a trained volunteer listener, including those who spoke other languages such as Hindi, Urdu and Gujarati.

Regular referrals were received from GPs, social prescribers, and support workers from organisations such as Gateway, Living Well Consortium and Creative Support. When asked, referrers commented that "their confidence in Rapha was based on the knowledge that clients previously referred had received good care and support from the service".

In 2021-22, the listening service supported a diverse group of people from Birmingham and surrounding areas: 69% were female, half were aged 50+, and approximately 49% were from an ethnic background other than White British.

## FEEDBACK FROM SERVICE USERS

- "This service helps me and supports me to think positively. I have improved my trust as I know that the person I am talking with understands the confidentiality." **Black British female, 57**
- "This service has helped me. This service may help lots of people like me. It helps you get to know the same person, increasing my confidence." **Indian female, 55**
- "He's done a fantastic job, and I feel so much better than I did before. Though I am still reluctant to go out, he has helped restore my confidence, and now I can cope with my isolation much better." **White British male, 52**



# KEY ACHIEVEMENTS

## Midpoint feedback

- 100% having someone to talk to
- 87% felt valued
- 92% helping to get things off my chest
- 89% having someone listen
- 79% reduced isolation and loneliness

## End of support feedback

- 75% felt less lonely and isolated
- 72% felt more positive about themselves
- 64% felt more able to cope with their personal circumstances
- 48% improved health and wellbeing

## HIGHLIGHTS:

- 196 referrals were received, and 172 individuals (88%) engaged with the Listening Service
- Top 3 reasons for referral: low mood 42.6%, anxiety 21.3% and depression 19.3%
- 643 support sessions delivered, compared to 558 in 2020/21 (15% increase)
- 551 hours of support provided
- 44 volunteers engaged in providing support



# SECTION 3 – STRUCTURE, GOVERNANCE AND MANAGEMENT

## Governing Document

The charity is controlled by its governing document, a deed of trust, and is also constituted as a limited company by guarantee, as defined by the Charities Act 2006. The trustees, who are also directors of the charity for the purposes of the Companies Act 2006, present their report, with the financial statements of the charity for the year ended 31 March 2022. The trustees have adopted the provisions of the Statement of Recommended Practice (SORP) 'Accounting and Reporting by Charities' issued in March 2005.

Finance: Mr Nick Wallace

Independent Examiner: Mr David Chittenden

In setting objectives and planning for activities, the trustees have given due consideration to general guidance published by the Charity Commission relating to public benefit.

## Duncan Moore - Chair of Trustees

Duncan has enjoyed a long successful career as a leader in Medical Sales and Marketing within the Healthcare sector spanning over 30 years. In the past 15 years, he has specialised in working with SMEs and particularly enjoys the challenge of taking on big institutions. Duncan is currently the business owner of a small independent Orthopaedic company and an innovative Medical Technology distribution company.

Duncan is respected, motivated, focussed and well known within the community of Professors, Consultants and Clinicians throughout the UK, and this has driven one of his passions to advocate for men's health.

As a committed Christian and former Pastor, Duncan allows his faith to influence how he behaves and interacts with those around him.

His passion for seeing social, racial, health and economic justice prevail for all levels of society has led Duncan to be an active Board Member for the Human Rights Organisation, Journey to Justice, who assists those with no voice to be heard.

Duncan is happily married and has three grown-up children. He enjoys a healthy lifestyle, regularly exercises and plays golf.



## Jacynth Ivey

Jacynth currently sits at the helm of two companies: Inspiring Hope, Ltd and jacynthivey.com. She is a multi-award-winning Transformational Leader, Coach, Author, Mentor and sought-after Inspirational Speaker. Having launched her career as a nurse, midwife and health visitor, things evolved from there and Jacynth found her true passion in developing people and organisations, supporting them to achieve their goals. She has over 30 years of experience as a senior leader - former NHS Executive Director of Nursing and a senior leader in commercial, third sector organisations and SMEs. In addition to her nursing and senior leadership roles, Jacynth is a competent and experienced speaker and advocate. Jacynth enjoys inspiring others and is known for her expertise in diversity, inclusion, organisational development and corporate culture transformation. She credits her success to having strong beliefs, being clear and focused, and fostering strong relationships with others.





**Christine Parkinson**

Dr Christine Parkinson obtained a doctorate in medical research at a London hospital, in Child Behaviour, then moved to Birmingham in the 80s to become involved with inner-city regeneration. She set up, with others, a women's refuge in 1994, a training and employment project for the long-term unemployed in 1998 and was the founder of the Bethel Health and Healing Project in 2006.

She is also a trustee of another charity, which supports young people in Uganda to become social entrepreneurs. She is committed to social justice, as well as in working to combat climate change, and has an interest in prayer ministry. She has published three books, as well as numerous scientific papers in learned journals.

**Michele Lawrence**

Having gained nursing, midwifery and health visiting qualifications and experience over three decades, Michele's expertise has been at the population public health level. Working on emergency planning and immunisation coordination. Michele has a vast amount of experience in managing teams and developing quality and safeguarding systems.



**Jonathan Hindle**

Jonathan spent 35 years in the technology industry in a variety of senior roles ranging from Engineering to Sales and Marketing. He has worked with teams across the globe bringing cross-cultural knowledge to Bethel. His knowledge of sales and marketing brings a perspective to Bethel, helping develop outbound communications and fundraising activities. Jonathan is married and has three daughters. In his spare time, he plays football, tennis and enjoys walking in the countryside.

**Tim Tranter**

Tim Tranter, Trustee and Chair of our Finance & Risk Sub Committee has extensive experience in disaster relief, project management and logistics with Doctors without Borders (MSF) UK & Ireland. Tim is also experienced as a recruiter.



**Louise Jackson-Sanders**

Louise has a background of working in public health and the third sector. She has an interest in maternal health and wellbeing and was drawn to Bethel due to the amazing work the Doula service does to reduce the inequity some women experience in accessing maternity services and support.



# STAFF MEMBERS

## CORE TEAM



Jennifer Jones-Rigby  
Chief Executive Officer



Santosh Rai  
Senior Operations  
Manager



Calis Roberts  
Volunteer Coordinator



Mariam Momoh  
Marketing and  
Communications Officer



Iram Tariq  
Administrator

## DOULA TEAM



Margaret King  
Doula Service Manager



Jennifer Marlow  
Senior Doula



Dionne Augustine  
Senior Doula



Teresa Richards  
Senior Doula



Buki Hannaway  
Peer Support Worker -  
Baby Loss



Maverney Kettle  
Group Facilitator



Raj Kaur  
Group  
Facilitator

## RAPHA TEAM



Alison Thompson  
Rapha Service Manager



Iffat Abbas  
Rapha Support Officer



Dilara Begum  
Rapha Support Officer

## PREVIOUS STAFF

Madge Milligan-Green (Finished March 2022) - Chief Executive Officer

Fiona MacNeil (Finished Dec 2021) - Fundraising Officer

Georgette Wright (Finished May 2022) - Marketing and Communications Officer

Kathy Sennessie (Finished Jan 2022) - Rapha Support Officer

Julia Brown (Finished April 2022) - Senior Doula



# VOLUNTEER HIGHLIGHTS

Bethel was supported by 58 volunteers comprising six trustees, 8 Doula volunteers and 44 Rapha listeners.

Following the challenges arising from the COVID-19 pandemic and its impact on income, volunteers began transitioning from a home-based lifestyle back into the workforce, reducing the number available to offer support. Additionally, individuals needing to upskill became available to volunteer as they sought opportunities to gain experience in mental health services and maternity professions. Bethel quickly embarked on marketing campaigns to attract volunteers initially to the Rapha Listening Service and then to the Doula Service. These campaigns resulted in overwhelming expressions of interest. The Listening Service received 74 expressions of interest, with 24 individuals shortlisted for interview. Likewise, the Doula Service received 99 expressions of interest, and 26 were shortlisted for interviews over the period.

From July to October 2021, applicants were primarily university students seeking placement opportunities rather than ongoing volunteering opportunities. However, most of these were not shortlisted due to limited capacity, as each service could only accommodate one placement student.

Several potential volunteers shortlisted experienced personal bereavement, which meant they could not continue with the onboarding process. We all felt this impact with the sad loss of one of our beloved volunteers, Robert Peart. A thanksgiving service was conducted during our quarterly Volunteer Thanksgiving Event in December 2021 in his honour with the support of the whole team.



# VOLUNTEER HIGHLIGHTS

## FEEDBACK

"Many thanks for your thank you card and attached pen; much appreciated. It was unexpected, which makes it more appreciated. Being a listener is a blessing as it keeps me in contact and attuned to reality." **Ray**

"The training equips you well to go out and do the job, lots of useful tips, delightful and nice to sit with a group of like-minded people." **(Feedback on Doula Training Course)**

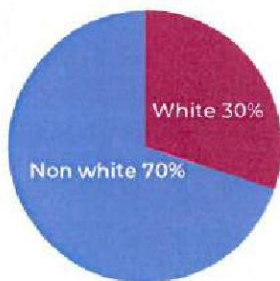
"Thank you so much for providing a reference in support of my application for a job with a medical project; I appreciate it." **Ruth**

"I am currently a Midwifery student looking for volunteer work. I was happy to be trained and volunteered with you in 2017 - 2018 for one year." **Demi**

"The most memorable experience for me over the past five years has been the look on my ladies' faces when I have been supporting them, especially over the Covid period where I continued along with others supporting the families by dropping items to them." **Dionne**

## STATISTICS

Ethnic diversity



Trainings

- 1X Doula course
- 6X Listening courses
- 2X Safe guarding sessions
- 1X Confidentiality
- 2X Suicide first aid/domestic violence
- 2X Mental health first aid
- 1X Mental capacity training

Languages spoken

- English
- Urdu
- Punjabi
- Bengali
- French
- Romanian
- Hindi



# SECTION 4 - STRATEGY

## PLACE OF WELCOME AND WELLBEING (POWW)

A key strategic aim for Bethel is to establish a place of welcome and wellbeing. To that end, we have been working closely with key contacts across the NHS to explore locations and possible funding. We have established a vision and proposal for the services that would be delivered and the principles that would apply to the building.



Figure 1: Major Themes at the Place of Welcome

During our work to identify a location, we have been working with the Heart of England Baptist Association to explore the viability of a building in Sparkbrook. This is a very exciting option as it aligns to both the spiritual aspect of Bethel's work, as well as being an ideal location from which to deliver a broad range of services.

Work is underway to understand the cost of developing the site so that it can be a modern and efficient location that will meet the needs of the local community as well as becoming the new headquarters of Bethel.

We will continue to work closely with key stakeholders to deliver a Place of Welcome and Wellbeing that serves the needs of the local community in conjunction with the NHS.

- Jonathan Hindle, Trustee



# SECTION 5 – FINANCIAL REVIEW & STATEMENTS

## Trustee Responsibilities for the Financial Statements

Charity and Company Law require 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 at the balance sheet date and of its incoming resources and application of resources, including income and expenditure for that period. In preparing those financial statements, the Trustees are required to:

Select suitable accounting policies and apply them consistently to:

- Make judgements and estimates that are reasonable and prudent
- State whether applicable accounting standards have been followed, subject to any material departures disclosed and explained in the financial statements
- Prepare the financial statements on the going concern basis, unless it is inappropriate to assume that the Charity will continue in business

The Trustees are responsible for keeping financial records which disclose with reasonable accuracy at any time the financial position of the Charity and that enable them to ensure that the financial statements comply with the Companies Act 2006. They are also responsible for safeguarding the assets of the Charity and hence must take reasonable steps for the prevention and detection of fraud and other irregularities.

## Financial Review

Income for the year amounted to £305,725 (2021: £383,490) whilst expenditure was £378,998 (2021: £284,797). This resulted in a deficit of (£73,273) (2021: surplus of £98,694) and a decrease in funds for the year to £74,749 (2021: £148,022). The plan for this year was to run a deficit, and utilise the surplus and associated reserves from the previous year to further develop services and implement an enhanced staffing structure.

## Reserves Policy

Reserves are required to:

- smooth out surpluses and deficits year on year;
- replace capital expenditure or restructure the organisation;
- deal with the effects of any risks that materialise e.g. significant losses of income and delays in payments;
- allow the organisation to take on opportunities that may arise in a timely manner;
- deal with the unexpected.

Trustees are required to set an appropriate minimum level of reserves, and in doing so take into account these reasons for holding reserves, as well as current and future financial needs. The trustees have decided to set minimum reserves at 4 months of unrestricted expenditure, as indicative of the operating reserves required by the nature and size of the charity. As at 31 March 2022, that will require minimum free reserves of approximately £98,270 to be held (2021: £70,190). Both the policy and its implementation are under regular scrutiny.



## **Bethel Health and Healing Network**

### **Independent Examiners Report to the Trustees of the Bethel Health and Healing Network**

I report on the financial statements of the Charity for the year ended 31st March 2022

#### **Respective responsibilities of trustees and examiner**

The charity's trustees are responsible for the preparation of accounts. The trustees consider that an audit is not required for this year under section 43(2) of the Charities Act 1993 ('the 1993 Act') and that an independent examination is needed. The charity has prepared accrued accounts and I am qualified to undertake the examination.

It is my responsibility to:

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

#### **Basis of Independent Examiner's Statement**

My examination was carried out in accordance with the General Directions given by the Charity Commissioners and with Regulation 11 of the 2006 Regulations. An examination includes a review of the accounting records kept by the church, and a comparison of the accounts presented with those records. It also includes consideration of any unusual items or disclosures in the accounts and seeking explanations from you as trustees concerning any such matters. The procedures undertaken do not provide all the evidence that would be required in an audit, and consequently I do not express an audit opinion on the view given by the accounts.

#### **Independent Examiner's Statement**

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

1. which gives me reasonable cause to believe that in any material respect, the requirements: to keep accounting records in accordance with section 41 of the 1993 Act and Regulation 4 of the 2006 Regulations; and to prepare accounts which accord with the accounting records and comply with the accounting requirements of the 1993 Act and Regulation 8 of the 2006 Regulations; and which are consistent with the methods and principles of the Statement of Recommended Practice: Accounting and Reporting by Charities have not been met, or
2. to which, in my opinion, attention should be drawn to enable a proper understanding of the accounts to be reached.

Signed:

Date:

14/9/2022

David Chittenden  
18 Cunningham Road  
Peterborough  
PE2 9RG



Statement of Financial Activities  
Year Ended 31st March 2022

	Note	Restricted	Unrestricted	Total Funds 2022	Total Funds 2021
<b>Income and Endowments from:</b>					
Donations and legacies	2	22,515	44,098	66,613	177,077
Charitable activities	3	0	236,074	236,074	202,976
Interest			4	4	8
Other income			3,034	3,034	3,430
		<u>22,515</u>	<u>283,210</u>	<u>305,725</u>	<u>383,490</u>
<b>Expenditure on:</b>					
Raising funds	4		11,817	11,817	13,769
Charitable activities	5/6/7	22,515	344,666	367,181	271,028
Total expenditure		<u>22,515</u>	<u>356,483</u>	<u>378,998</u>	<u>284,797</u>
Net income		0	(73,273)	(73,273)	98,694
<b>Reconciliation of Funds</b>					
Total Funds brought forward		0	148,022	148,022	49,328
Total Funds carried forward		0	74,749	74,749	148,022
<b>Balance Sheet as at 31st March 2022</b>					
<b>Current Assets</b>					
Debtors	11			29,533	15,986
Cash at bank and in hand	12			<u>61,488</u>	<u>148,235</u>
				91,021	164,221
<b>Current Liabilities</b>					
Liabilities falling due within one year	13			16,272	16,199
<b>Net Assets</b>				<u>74,749</u>	<u>148,022</u>
<b>Represented by:-</b>					
Unrestricted Funds	15			74,749	148,022
Restricted Funds	15			0	0
<b>Total Funds</b>				<u>74,749</u>	<u>148,022</u>

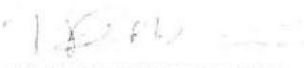
The trustees (who are also the directors of the company for the purposes of company law) confirm that for the period ended 31 March 2022:-

- the company was entitled to exemption from audit under section 477 of the Companies Act 2006 ("the Act"), and
- members have not required the company to obtain an audit of its accounts for the period in question in accordance with section 476 of the Act. However, in accordance with section 145 of the Charities Act 2011 and section 44 of the Charities and Trustee Investment (Scotland) Act 2005, the accounts have been examined by an independent examiner.

The trustees acknowledge their responsibilities for complying with the requirements of the Act with respect to accounting records and the preparation of accounts.

The notes form an integral part of these accounts. They have been reviewed in the preparation of these accounts with changes to the classification and presentation.

These accounts, which have been prepared in accordance with the provisions in the Companies Act 2006 relating to small companies, were approved by the trustees on 04/10/2022 and signed on their behalf by:

  
Duncan Moore  
Chair of Trustees

Date: 04/10/22

Notes:

1. Accounting Policies

(a) Basis of Preparation

These accounts have been prepared on the basis of historic cost in accordance with the Accounting Regulations set out under the Charities Act 1993 and with the Charities Statement of Recommended Practice (SORP) 2005 - Second Edition

(b) Form of Financial Statements

- (i) Unrestricted funds are those that may be used at the discretion of the trustees in furtherance of the objects of the charity
- (ii) Restricted funds may only be used by specific purposes. Restrictions arise when specified by the donor or when funds are raised for specific purposes.

(c) Incoming Resources

- (i) Incoming Resources are recognised and included in the Statement of Financial Activities (SOFA) when the Charity becomes entitled to the resources; the trustees are virtually certain they will receive the resources; and the monetary value can be measured with sufficient reliability.
- (ii) Where incoming resources have related expenditure (as with fundraising), the incoming resources and related expenditure are reported gross in the SOFA.
- (iii) Donations are accounted for gross when received.
- (iv) Bank interest is recognised when it is credited to the account.

(d) Expenditure and Liabilities

- (i) Expenditure is accounted for on an accruals basis.
- (ii) Liabilities are recognised as soon as there is a legal or constructive obligation to pay out resources.

(e) Assets

Tangible fixed assets are capitalised if they cost more than £1,000 and can be used for more than one year. They are valued at cost or, if gifted, at value on receipt. The charity does not currently have any capitalised fixed assets.

(f) Taxation

The charity is not liable for income or capital gains tax on its charitable activities. Irrecoverable VAT is included in the asset cost or expense to which it relates.

2. Income from donations and legacies	Restricted	Unrestricted	2022	2021
Donations received	0	2,898	2,898	923
Grants received:				
Baron Davenport's Charity	750		750	0
Edward Cadbury Charitable Trust			0	5,000
GB Partnerships	2,000		2,000	0
Groundworks			0	500
Hall Green Neighbourhood Network Scheme			0	7,886
Heart of England Community Foundation	1,972		1,972	3,410
Lloyds Bank Foundation		25,000	25,000	94,776
Lord Mayor of Birmingham's Charity			0	0
Movement for Good (Benefact Group)		1,000	1,000	0
Oakdale Trust			0	0
Pears Foundation		10,000	10,000	0
Richard Kilcuppe Charity	500		500	0
Roger & Douglas Turner Charitable Trust			0	2,000
St Thomas Dole Charity			0	1,575
The 29th May 1961 Charitable Trust	5,000		5,000	0
The Arnold Clark Community Fund		3,500	3,500	0
The ASDA Foundation	900		900	0
The Big Give Trust Ltd		700	700	0
The Cole Charitable Trust	1,000		1,000	1,000
The Edward and Dorothy Cadbury Trust			0	500
The Goodenough Charitable Trust		1,000	1,000	2,000
The Grimmit Trust			0	2,000
The National Lottery Community Fund	9,893		9,893	49,757
The Roughley Trust			0	3,000
The Tudor Trust			0	1,000
The W.E.D. Charitable Trust	500		500	0
Other			0	1,750
	22,515	44,098	66,613	177,077

3. Income from charitable activities	Restricted	Unrestricted	2022	2021
Best Beginnings			0	1,345
Birmingham Maternal Mental Health Service		19,975	19,975	
Living Well Consortium		32,998	32,998	0
Murray Hall Community Trust Ltd		7,380	7,380	0
NHS BHAM Women & Childrens NHSFT			0	12,000
NHS Birmingham and Solihull CCG		104,320	104,320	104,320
NHS Hodge Hill			0	13,911
NHS Black Country and West Bham CCG		71,400	71,400	71,400
	0	236,074	236,074	202,976
<b>4. Expenditure on generating donations and legacies</b>			<b>2022</b>	<b>2021</b>
<b>Unrestricted funds</b>				
<i>Raising funds</i>			11,817	13,769
<b>5. Costs of charitable activities by fund type</b>			<b>2022</b>	<b>2021</b>
Doula	18,043	213,501	231,544	176,526
Rapha listening service	4,472	71,594	76,066	45,668
Trusted Charity (PQASSO)			0	0
Support costs		59,571	59,571	48,834
	22,515	344,666	367,181	271,028
<b>6. Costs of charitable activities by activity type</b>	<b>Activities undertaken directly</b>	<b>Support costs</b>	<b>Total</b>	<b>Total</b>
Doula	231,544	44,840	276,384	215,322
Rapha listening service	76,066	14,731	90,797	55,705
Trusted Charity (PQASSO)			0	0
	307,610	59,571	367,181	271,028
<b>7. Analysis of support costs</b>			<b>2022</b>	<b>2021</b>
Communication costs			12,809	8,978
Office costs			13,435	22,761
Premises costs			12,452	11,809
Legal and professional			39,833	36,725
Other operating costs			13,793	9,520
			92,322	89,793
<b>8. Independent examiner's remuneration</b>				
The Independent examiner provided services on a voluntary basis so no fee was charged (2021: Nil)				
<b>9. Trustees' remuneration and expenses</b>				
During the year, no Trustees received any remuneration or other benefits and no expenses were claimed (2021: Nil)				
<b>10. Staff costs and emoluments</b>			<b>2022</b>	<b>2021</b>
Salaries and wages			260,418	154,786
Social security costs			17,482	10,679
Employers contribution to defined contribution pension scheme			4,607	2,548
			282,507	168,013
There was one employee whose emoluments (salaries, wages, benefits in kind) fell in a band between £60,000 and £70,000 (2021: Nil)				
The average number of persons employed by the Charity, including part time staff, calculated on a full time equivalent basis was:				
Core staff			8.66	5.16
<b>11. Debtors</b>			<b>2022</b>	<b>2021</b>
Accounts Receivable			26,814	5,315
Accrued Revenue			1,153	9,320
Prepaid Expenses			1,567	1,351
Other				
			29,533	15,986
<b>12. Bank and Cash Balances</b>			<b>2022</b>	<b>2021</b>
TSB current account			45,785	132,342
Triodos deposit account			15,677	15,673
Petty Cash			26	220
			61,488	148,235

13. Current Liabilities (payable within one year)

	2022	2021
Accounts Payable	3,531	8,729
Accruals and deferred income	2,183	787
Payroll Liabilities	10,558	3,713
Prepaid Income	0	2,970
	<u>16,272</u>	<u>18,199</u>

14. Related party transactions

There were no donations from trustees (2021: £360 from 1 trustees)  
 These amounts do not include the gift aid associated with these donations

15. Statement of Funds

	At 1st April 2021	Income	Expenditure	At 1st April 2022
<b>Unrestricted Funds</b>				
General	106,259	47,136	11,817	141,578
Doula designated	41,763	236,074	344,666	(66,829)
	<u>148,022</u>	<u>283,210</u>	<u>356,483</u>	<u>74,749</u>
<b>Restricted Funds</b>				
Doula		18,043	18,043	0
Rapha		4,472	4,472	0
	<u>0</u>	<u>22,515</u>	<u>22,515</u>	<u>0</u>
<b>Total Funds</b>	<u>148,022</u>	<u>305,725</u>	<u>378,998</u>	<u>74,749</u>
<b>Prior year</b>				
<b>Unrestricted Funds</b>				
General	13,740	106,288	13,769	106,259
Doula designated	35,589	202,976	196,802	41,763
	<u>49,328</u>	<u>309,264</u>	<u>210,570</u>	<u>148,022</u>
<b>Restricted Funds</b>				
Doula		44,466	44,466	0
Rapha		29,760	29,760	0
	<u>0</u>	<u>74,226</u>	<u>74,226</u>	<u>0</u>
<b>Total Funds</b>	<u>49,328</u>	<u>383,490</u>	<u>284,797</u>	<u>148,022</u>



# SUMMER PINIC AT CANNON HILL PARK



WE HAVE OPPORTUNITIES FOR VOLUNTEERING, PLEASE CONTACT  
[CALIS@BETHELNETWORK.ORG.UK](mailto:CALIS@BETHELNETWORK.ORG.UK)  
IF INTERESTED



# LIST OF FUNDERS

- Birmingham and Solihull ICB (Formerly Birmingham and Solihull CCG)
- Black Country NHS ICB (formerly Black Country and West Birmingham CCG)
- Living Well Consortium
- Birmingham and Solihull Mental Health Foundation Trust
- Murray Hall
- GB Consulting
- Birthbliss
- Lloyds Bank Foundation
- 1961 Charitable Trust
- Heart of England Community Trust
- Awards for All
- Sport England
- The Cole Trust
- Movement for Good
- Arnold Clark
- Asda Foundation
- Luv Brum





**Registered Charity Number: 1116225**

**Company Number: 05813084**



**[enquiries@bethelnetwork.org.uk](mailto:enquiries@bethelnetwork.org.uk)**



**0121 661 4276**



**Bethel Health and Healing Network  
196 - 198 Edward Road, Balsall Health Birmingham  
B12 9LX**



**BETHEL HEALTH AND HEALING NETWORK**

England & Wales - Charity number 1116225

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# Accounts

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# Bethel Health and Healing Network

Annual Report and Financial Statements 2021

Rising to the challenge of COVID-19



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# A Message from the Chair



It is a great honour to present Bethel Health and Healing Network's Annual Report for 2020/2021. The report offers a great overview of the fantastic things we have achieved in the past 12 months and the aspirations we have going forward.

We can all agree that COVID-19 turned our world upside down. However, despite the enormous challenges, staff and volunteers have adapted at pace and worked tirelessly to ensure our service users & clients receive the best care possible and that we continue to serve our community. Because of their willingness to embrace change and technology we reached more members of the community than ever before through our listening service. Whilst our doula service was perhaps hardest hit by restrictions of COVID-19, we maintained our core contract reflecting the high regard the service is held in by the NHS in Birmingham, Sandwell and Solihull. In addition, we successfully attracted other funding, enabling us to develop additional support packages.

This year is particularly poignant for me as I step down from my role as Chair and hand over the reins to our recently appointed incoming chair. I am proud to have witnessed the growth and development of Bethel Health & Healing Network, an organisation committed to its charitable objectives and underpinned by a strong value base. During the last year, Bethel has refreshed its three-year strategic plan, recruited new trustees, a new chair designate, recruited new staff and volunteers, all whilst delivering a first-rate service

We have achieved Trusted Charity, level one quality standard demonstrating the organisation's commitment to continual improvement. Like many organisations COVID-19 has left us facing uncertain times, I believe that with the resilience of the organisation and the committed individuals who work in and support Bethel, we will remain alert to the uncertainties that are ahead of us and continue to seize opportunities for growth.

As ever, on behalf of the Board, I would like to express my continued gratitude to all those who have played a part in ensuring our service users & clients receive the high-quality support that we are so proud to deliver. To our Chief Executive for her leadership and guidance, our fantastic staff team for their hard work and enthusiasm in making a difference, our brilliant volunteers for their time, commitment and dedication, the clinical commissioning groups, charitable trusts and foundations, companies and individuals who have all given us financial support, I thank you. I would also like to thank my colleagues, the trustees, who give of their time and share a wealth of knowledge and expertise to support Bethel and its commitment to the community, putting our clients & service users at the heart of what we do.

It's been a challenging year, indeed turbulent at times, however, Bethel has successfully ridden out of the storm and is facing the future with greater clarity and in a position of strength.

**Jacynth Ivey, Chair of Trustees**

# A Message from the CEO



My heartfelt thanks to staff, trustees, volunteers, partners and service users for supporting Bethel over the last 12 months. Who would have thought the world would be in this position? If nothing else we have learnt how to live with each other and times of adversity. We have lost love ones along the way but we remember them with fondness and respect.

As we reflect on the last 12 months, dominated by the pandemic, unprecedented was the word of the year and it was not overused. The other phrase of the year was of course, 'You're on mute'.

Bethel adapted both services to cope with the ever-changing landscape we found ourselves navigating. Health and safety and safeguarding our staff, volunteers and service users have been the main priority, together with keeping the organisation on task. Bethel continues to work with many partners and developing new relationships.

Whilst we have worked with fewer women as a result of measures in place during lockdowns we were able to secure contracts with Black Country and West Birmingham CCG & Birmingham and Solihull CCG.

These were important gains that have allowed us to continue working with the most vulnerable citizens of Birmingham, Sandwell and Solihull.

I am extremely proud to work with such a committed team, whose passion and enthusiasm for this very important work encourages me on a daily basis. Staff, volunteers, services users and our board fully embrace Bethel's values and have a genuine commitment to improving the health, wellbeing and quality of life for Birmingham's most vulnerable and isolated residents.

Despite COVID-19, we have managed to grow our activities and our staffing base. I cannot predict the future and who knew I would still be writing about Covid-19, 12 months later, but I am confident Bethel will continue to uphold its vision and mission and work towards our new 3 year strategic plan. As we face the future with hope, aspiration and expectancy our focus will always be the service users.

**Madge Milligan-Green CEO**

# About us

## VALUES

COMPASSION

INTEGRITY

EMPOWERMENT

FAIRNESS

PARTNERSHIP








### VISION

To enable and empower people to become physically, emotionally and spiritually healthy.

### MISSION

Offer a range of holistic services that promote health and wellbeing to people in need.

## STRATEGIC AIMS

-  Diverse communities have access to quality mental health and wellbeing services.
-  Bethel Health and Healing Network continues to be a place of welcome for those in need.
-  Deliver and develop effective services for existing and new beneficiaries.
-  Increase our impact through strategic partnerships.
-  Bethel Health and Healing Network is an effective and sustainable organisation.



AN EXAMPLE OF ONE OF THE NEW BEGINNINGS BABY BASKETS DELIVERED IN APRIL 2020

## HIGHLIGHTS

### APRIL

- Secured coronavirus resilience funding.
- CEO Madge appeared on New Style radio to talk about how we were supporting service users during the lockdown.

### MAY

- Madge appeared on BBC Radio WM to talk about the Rapha Service
- Madge was a guest on Unity FM talking about mental health along with Beresford Dawkins from Birmingham and Solihull Mental Health Trust.



THANKS TO OUR FUNDERS WE PROVIDED MOBILE PHONE TOP-UPS FOR OUR VULNERABLE PREGNANT SERVICE USERS SO THAT THEY COULD STAY IN TOUCH WITH US.



**Acorn Christian** @AcornChristian · 23 Apr 2020

A big thank you to Bethel #Health and #Healing Network and all the volunteers who invited us into their homes over the past few days, via Zoom, to carry out some listening training. What a privilege!

@Bethel\_Network #training #community #listening #hope #wellbeing @wasutton



OUR LISTENING TRAINING WENT ONLINE,  
THANKS TO OUR PARTNER, ACORN



THERE WAS A GREAT RESPONSE TO OUR  
CHRISTMAS APPEAL

## HIGHLIGHTS

### JUNE

- Secured funding through Tesco's
- Bags of Help

### NOVEMBER

- Achieved Trusted Charity Mark Level 1
- Secured funding from Lloyds Bank Foundation and DCMS



# Bethel Doula Service

## REVIEW OF THE YEAR

Bethel Doula Service provides an essential and unique service to a substantial proportion of the vulnerable and isolated pregnant women in Birmingham. It is the only service offering antenatal, intrapartum and postnatal support around the clock. The service is unique because it offers 'wrap around' care that health professionals and specialist agencies cannot provide. For example, we are often presented with women experiencing emotional distress resulting from the trauma that they have sustained. They, therefore, require time, a listening ear and a supportive voice to simply get through such a difficult time in their lives.

Bethel Doula Service works with health and other agencies when women are referred to the organisation so that they do not fall through current gaps in service. The service works collaboratively with, but ultimately independently of, all statutory services such as the social care and health, border agencies, police etc. Bethel Doula Service is thus able to build an impartial and highly trusted rapport with these very vulnerable and often distressed service users.

Crucially, the Bethel Doula Service's ethos is one of enabling women to build resilience and self-efficacy and therefore reduce reliance on the state. Bethel's senior and volunteer doulas support women to integrate into British society and are more knowledgeable about what services and support are available to them; including those outside the remit of their pregnancy. This has clearly saved significant public resources - for example reduced reliance on such services as ambulance, acute mental health, and social services.

Despite the COVID-19 pandemic, the Doula Service has continued to support women, conducting telephone assessments and interviews and, occasionally, Senior Doulas and volunteers have delivered essential items for mother and baby whilst maintaining social distancing.



SENIOR DOULA JULIA BROWN  
WITH A SERVICE USER



SENIOR DOULA TERESA RICHARDS

## KEY ACHIEVEMENTS

- Launched a Zoom Mother and Baby Group
- Provided online training for staff and volunteers in Safeguarding, Mental Capacity, and other topics.
- Continue online collaboration with Birmingham City University and the University of Central Birmingham.
- Worked collaboratively with BUMP midwives on the Link workers project, supporting women in attending appointments and addressing safeguarding issues.
- Working in partnership with Best Beginnings and Barnados in providing emotional and signposting support for women and families as they navigated the effect of Covid restrictions.
- Continued funding from Birmingham and Solihull CCG, and SWBH CCG
- Doula Service is represented on the platforms of several influential committees and forums.

### User feedback

"I am grateful for the quick response of the Doula who attended and supported me as a birth partner at very short notice, and then the continued care and support I received. She listened."

*A service user who received urgent birth partner support*

"I found Covid time frightening, I did not know whether I should go out. I could not contact the midwife; I did not know whether I could go to the hospital or what to do. The Doula service gave me direction and supported me with food parcels. Thank you."

*A service user*

"I enjoy attending the mother and baby group as I have learnt so much. You supported me with my pregnancy and baby. You encouraged me with my studies. I have secured a place at university, and I am learning to drive. Thank you also for supporting my friend."

*Former asylum seeker now refugee*



SENIOR DOULA JENNIE MARLOW



# Rapha Listening Service

## REVIEW OF THE YEAR

Our confidential listening service forms part of our planned holistic health and wellbeing support offered by Bethel Rapha Service. This service is designed to support people from all backgrounds with 'low-level' mental health issues such as anxiety, depression or those who are isolated and lonely, often a precursor to reduced emotional wellbeing. Our volunteer listeners are trained in the 'reflective listening framework' which provides an environment for the individual to be listened to in a non-judgemental setting that empowers them to find their own solutions.

The development of the local hub model was suspended as a result of Covid-19 restrictions instead we delivered telephone support across Birmingham and in targeted constituencies. Our initial focus was on strengthening the volunteer team to meet the new approach to service delivery and comply with government guidelines. While the demand for services was slow at the beginning it quickly picked up pace as the impact of the pandemic took hold. We have seen an increase in people accessing support who are experiencing anxiety, social isolation and loneliness.

We have been able to recruit a diverse volunteer team with language skills in Urdu, Punjabi and Bengali. Several of our Urdu speaking volunteers have been trained in completing the initial assessments and evaluations to help support those clients that cannot speak English particularly from the Pakistani community which has enabled us to better engage with this community.

We worked closely with Hodge Hill and Hall Green Neighbourhood Network Schemes who provided Covid-19 emergency funding to primarily support older adults living in these areas. As a result, we had an increase in referrals from some of Birmingham's most disadvantaged communities. Funding from the Eveson Trust enabled us to reach other parts of Birmingham such as Northfield, Selly Oak and Kingstanding.

This year we saw an increasing number of organisations referring to us including Spurgeons, Kingstanding Food Community, St Peters Housing, Norton Hall, Pegasus, Gateway Family Services, Health Exchange, Creative Support, Family Action, Gilgal Birmingham, Age UK, The Sweet Project, Trident Reach, Go-Woman Alliance, Anawim, Birmingham Mind and Asirt. We also experienced growth in referrals from the statutory sector through NHS social prescribers and social workers.

Only 17% of service users were male although the proportion has steadily been growing. The ethnic diversity of service users also increased; where disclosed 50% were from ethnicities other than White British, with 33% coming from South Asian backgrounds. Almost half were under 50 and a fifth was aged 65+.

## KEY ACHIEVEMENTS

- 141 referrals received
- 111 initial assessments carried out
- 90 service users accessed listening sessions
- 558 listening sessions delivered
- £22K received from Hodge Hill and Hall Green Neighbourhood Network Schemes
- £33K agreed by Living Well Consortium to support Mental health activities in 2021/22
- The Rapha Listening Service finished with 30 volunteers at the end of March 2021. Our committed team of listeners supported 90 service users over the 12 months.

### Service user feedback

The feedback this year highlights the impact of being listened to for many of our service users. The majority experienced reduced stress and anxiety and have been able to take positive steps forward in relation to their personal challenges. Others felt less lonely and isolated in otherwise difficult circumstances. Service users valued engaging with the same volunteer throughout their Rapha experience enabling them to build trust and avoid repeating their story each time.

End of support feedback (41 responses)

- 88% Rapha service met or exceeded expectations
- 85% feel more positive about themselves
- 66% feel less lonely and isolated
- 56% are more confident in connecting with other people

### User feedback

"It's been the best service that I have ever received, better than the statutory services that I have had."

"I was able to open up to J about a lot of stuff and feel so much better for it."

"She is a very good listener, never spoke about herself and I really appreciated that. The timing of the calls was very much appreciated."

"Whilst speaking with my listener, I feel more positive but still very unsure of myself currently. Family problems that have occurred recently have shaken my confidence and I really need to continue with my listener."



# Section 2

## Structure, governance and management

### Governing Document

The charity is controlled by its governing document, a deed of trust, and constitutes a limited company, limited by guarantee, as defined by the Charities Act 2006. The trustees, who are also directors of the charity for the purposes of the Companies Act 2006, present their report, with the financial statements of the charity for the year ended 31 March 2021. The trustees have adopted the provisions of the Statement of Recommended Practice (SORP) 'Accounting and Reporting by Charities' issued in March 2005.

Finance: Mr Nick Wallace  
Independent Examiner: Mr David Chittenden

In setting objectives and planning for activities, the Trustees have given due consideration to general guidance published by the Charity Commission relating to public benefit.

### Trustees



#### Jacynth Ivey Chair of Trustees

Jacynth Ivey currently sits at the helm of two companies: Inspiring Hope, Ltd and jacynthivey.com. She is a multi-award-winning Transformational Leader, Coach, Author, Mentor and sought-after Inspirational Speaker. Having launched her career as a nurse, midwife and health visitor, things evolved from there and Jacynth found her true passion in developing

people and organisations, supporting them to achieve their goals. She has over 30 years of experience as a senior leader - former NHS Executive Director of Nursing and a senior leader in commercial, third sector organisations and SMEs.

In addition to her nursing and senior leadership roles, Jacynth is a competent and experienced speaker and advocate. Over many years, she has supported national bodies, large corporate organisations, charities, entrepreneurs and senior leaders. Jacynth enjoys inspiring others and is known for her expertise in diversity, inclusion, organisational development and corporate culture transformation.

She credits her success to having strong beliefs, being clear and focused, and fostering strong relationships with others.



#### Christine Parkinson

Dr Christine Parkinson obtained a doctorate in medical research at a London hospital, in Child Behaviour, then moved to Birmingham in the 80s to become involved with inner-city regeneration. She set up, with others, a women's refuge in 1994, a training and employment project for the long-term unemployed in 1998, and was the founder of the Bethel Health & Healing Project in 2006.

She is also a trustee of another charity, which supports young people in Uganda to become social entrepreneurs. She is committed to social justice, as well as in working to combat climate change, and has an interest in prayer ministry. She has published three books, as well as numerous scientific papers in learned journals.



**Jonathan Hindle**

Jonathan spent 35 years in the technology industry in a variety of senior roles ranging from Engineering to Sales and Marketing. He has worked with teams across the globe bringing cross-cultural knowledge to Bethel. His knowledge of sales and marketing brings a perspective to Bethel, helping develop outbound communications and fundraising activities. Jonathan is married and has three daughters. In his spare time, he plays football, tennis and enjoys walking in the countryside.



**Louise Jackson-Sanders**

Louise has a background of working in public health and the third sector. She has an interest in maternal health and wellbeing and was drawn to Bethel due to the amazing work the Doula service does to reduce the inequity some women experience in accessing maternity services and support.



**Michele Lawrence**

Having gained nursing, midwifery and health visiting qualifications and experience over three decades, Michele's expertise has been at the population public health level. Working on emergency planning and immunisation co-ordination. Michele has a vast amount of experience in managing teams and developing quality and safeguarding systems.



**Tim Tranter**

Tim has extensive experience working in senior roles across the globe within the charity sector, including over 10 years working within emergency disaster relief responding to natural and man-made disasters. It was through this work that he ran maternal care and mental health projects.



**Mei Wong**

Born in Malaysia, Dr Mei Wong came to the UK in 1976 for her nursing training at Chesterfield Royal Hospital and later midwifery at Birmingham Women Hospital. She later pursued a psychological career becoming a Doctor of Clinical Psychology at Leicester University in 2004. In 2012, Dr Wong retired from her position as Consultant Clinical Psychologist, Head of Specialty in SSHNFT.

## STAFF TEAM



**Madge Milligan-Green**  
Chief Executive Officer



**Calis Roberts**  
Administrator and  
volunteer co-ordinator



**Margaret King**  
Doula Service Manager



**Julia Brown**  
Senior Doula



**Teresa Richards**  
Senior Doula



**Jennifer Marlow**  
Senior Doula



**Fareisha Kelasi**  
Marketing and  
Communications Officer



**Maverney Kettle**  
Link Worker



**Raj Kaur**  
Link Worker



**Santosh Rai**  
Rapha Manager



**Kathy Senessie**  
Rapha Support Officer



**Judith Miller**  
Senior Operations Manager



**Rosie Steer-Palmer**  
Marketing Consultant



**Andrea Porter-Bent**  
HR Consultant



**Jeanette Burrows**  
Fundraising Officer

# VOLUNTEERS Highlights

## Volunteer feedback

‘As a midwife, I never got the opportunity to see what truly happened with these women after birth. I believe that working with Bethel gave me that opportunity in real life.’- Doula volunteer’s feedback

‘I needed a placement at Uni, and I wanted to break away from what I was doing, and Bethel provided me with the opportunity, thank you Bethel’ – A placement volunteer’s feedback

‘Opened my eye to identify and how to act when someone has been abused and the different types of abuse that I would not know they existed’- Volunteer’s feedback to safeguarding training

‘Thank you for your card and bracelet – it made my day’- Rapha volunteer’s response to gifts received as part of our Volunteer Appreciation celebration

‘The time I spent with the project was one of the most enjoyable and fulfilling times of my life. It was also a very humbling time - helping another woman during childbirth and the early days after they have given birth - the times when they are most vulnerable - has had a profound impact on me as a person. It put a lot of things into perspective and made me realise how strong women are, what they can achieve and what they can overcome. Thank you for allowing me to be part of the project. - Former volunteer now residing in New Zealand



**VOLUNTEER DOULA, GAIL SAULT**

## Statistics

50% White British

50% Non-White British

## Training opportunities provided

Effective Listening, Safeguarding, Prevent, Suicide First Aid and Mental Health First Aid  
Monthly scheduled group supervision along with ongoing support

## Languages spoken

Urdu, Punjabi, Bengali, English, French, Romanian and Hindi



**ZOOM EVENT FOR VOLUNTEERS**

# VOLUNTEERS

Leading up to the pandemic year, our volunteer recruitment and processing were heavily concentrated around the Doula volunteer recruitment as the listening service emerged and gradually grew.

As both services grew there was a need to embark on a campaign with an emphasis on recruitment of mature volunteers, persons with various language skills and male volunteers.

## THE YEAR IN REVIEW

Bethel was supported by 46 volunteers comprising six Bethel Board of Trustees, 10 Doula volunteers and 30 Rapha Listening volunteers. As the year progressed, we quickly and effectively adjusted to the reality of the Covid 19 Pandemic and shifted to an online approach to volunteering to meet the needs of our service users. There was an improvement in the recruitment process with various methods of recruitment pursued. All our training, supervision and volunteer appreciation activities were conducted online. Additionally, with there being a surge in the demand for our listening service, volunteers quickly responded to the demand and filled the gaps as more persons were now available to offer their services remotely.

This meant that volunteers now needed to be equipped with mobile phones and sim cards provided through funds sourced by our CEO and fundraising officer, to ensure that they were able to meet the needs of the service users securely and effectively.

Additionally, our two WhatsApp group chats for the Doula and Listening Service Volunteers were very active and became an effective means of communication. We also had volunteers expressing an interest in supporting both the Doula and Rapha services.

Our flexibility also extended to other regions outside of Birmingham as listeners from as far as London were now willing and able to support our listening services. DBS processing was also fast-tracked, and the turnover time was up to two days in most cases. During the first two quarters of the year, over 30 applications were successfully processed for the listening service. This meant that persons from diverse backgrounds, ethnic and age groups were able to join our listening service.

### Challenges:

The Doula service saw a natural decline in volunteer numbers. People were unavailable to volunteer or there was low volunteer confidence in engaging with the public especially amongst our more mature volunteer base. This meant that staff have had to double up on caseloads with a reduced volunteer availability.

Additionally, the well sought after three-day free mandatory Doula training could not be pursued during the year due to the challenges faced with Covid-19. However, a new online version of the Doula training course was developed which became available for future new recruits.

# PARTNERSHIPS

## Partnerships

Bethel has collaborated or worked with numerous organisations and we wish to thank them all for their support and cooperation. Bethel is a founding member of the Cairn Consortium with three other third sector organisations sharing a similar value base and ethos: Jericho Foundation, Gilgal and Small Heath Baptist Church.

The Consortium meets quarterly for the purposes of support, encouragement and exploring joint working initiatives. We are also members of the Small Charities Coalition, Living Well Consortium, Foundation for Social Improvement, What Works Wellbeing and our CEO is a member of the Association for Chief Executives of Voluntary Organisations (ACEVO)



**SANTOSH RAI AND MADGE MILLIGAN-GREEN  
WITH CHEQUE FROM LORD MAYOR**

# Section 3

## Strategy

As we move into 2021-2022, we will implement our new strategic plans with 5 strategic aims for Bethel. Our annual plan and budget will be developed and reviewed regularly, ensuring that we carry out our objectives.

### Plans

#### Over the next 3 years

Bethel will only succeed over the next three years by providing effective services with a purpose: to ensure that those we support can inspire even greater levels of trust and confidence in our service delivery.

We cannot, however, succeed on our own. We need to work in partnership with others and draw on their expertise. This has been identified as one of Bethel's strategic aims.

As we determine how best to deliver our strategic objectives, we will do so in conversation with our partners, peers, government, and others in the sector. Bethel is continuing to demonstrate our impact, and to command confidence from our stakeholders, we will need to demonstrate our own transparency and accountability.

Delivering the 3-year strategic plan will mean changing the way we work. Our staff and volunteers will continue to work differently to carry out their roles, ensuring we fulfil our vision and mission. Unfortunately, we do not have all the resources necessary to fulfil these ambitions, but that cannot be an excuse to wait. We must start the journey now, which is what our 3-year strategic plan is all about: maximising the benefit of Bethel to the public by delivering effective services to our clients.



SENIOR DOULA DIONNE AUGUSTINE WITH ONE OF THE BABIES SHE HELPED TO DELIVER



LADY MAYORESS, LORD MAYOR AND MADGE MILLIGAN-GREEN

### **Responding to the COVID-19 pandemic**

Like so many charities, Bethel's work has been challenged and changed by the pandemic response. As an organisation, we acted swiftly in our initial response to the pandemic, putting in place arrangements to secure the health and safety of our staff and mobilising the workforce to operate remotely. Throughout the year we have supported our staff to continue to work from home and adopted flexible working arrangements as staff have juggled the challenges of home-schooling, COVID-related illness, and caring responsibilities. As a small charity, we adapted our approach to help ensure the charity remained resilient and able to play its part in working collaboratively with our partners. As a small charity, we played our part in supporting NHS staff, volunteers, and care workers in the fight against COVID-19.

We continue to explore opportunities by scanning the horizon and will collaborate with a number of partners to expand our main services. The mother and baby group will continue online and future funding will be sought to secure premises to deliver this vital support that has been a lifeline for all attendees both here and abroad.

### **Embracing digital marketing**

We will look to develop our digital marketing knowledge and use of tools such as analytics, search engine optimisation (SEO) and content marketing. We will make improvements to our website to allow us to apply for a Google Adword Grant in 2021. Collectively, this will enable us to be more visible to people who are either digital natives or have been 'forced' online because of the impact of COVID-19.



HEAD OF DOULA SERVICE, MARGARET KING,  
WITH DONATION FROM MUSLIM WOMEN  
VOLUNTEERS

# Section 4

## Financial review and statements

### Trustee Responsibilities for the Financial Statements

Charity and Company Law require 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 at the balance sheet date and of its incoming resources and application of resources, including income and expenditure for that period. In preparing those financial statements, the trustees are required to select suitable accounting policies and apply them consistently to:

- Make judgements and estimates that are reasonable and prudent
- State whether applicable accounting standards have been followed, subject to any material departures disclosed and explained in the financial statements
- Prepare the financial statements on the going concern basis, unless it is inappropriate to assume that the charity will continue in business.

The trustees are responsible for keeping financial records which disclose with reasonable accuracy at any time the financial position of the Charity and that enable them to ensure that the financial statements comply with the Companies Act 2006.

They are also responsible for safeguarding the assets of the charity and hence must take reasonable steps for the prevention and detection of fraud and other irregularities.

### Financial Review

income for the year amounted to £383,490 (2020: £252,944) whilst expenditure was £284,797 (2020: £258,578). This resulted in a surplus of £98,694 (2020: deficit (£5,634) and an increase in funds for the year to £148,022 (2020: £49,328). During the year, the Charity was very successful in attracting additional funding relating to the Covid pandemic and was therefore able to provide substantially enhanced services. The resulting surplus and increase in reserves will also enable services to be further developed in the coming year including a revised staffing structure.

### Reserves Policy

Reserves are required to:

- smooth out surpluses and deficits year on year;
- replace capital expenditure or restructure the organisation;
- deal with the effects of any risks that materialise e.g. significant losses of income and delays in payments;
- allow the organisation to take on opportunities that may arise in a timely manner;
- deal with the unexpected.

Trustees are required to set an appropriate minimum level of reserves, and in doing so take into account these reasons for holding reserves, as well as current and future financial needs. The trustees have decided to set minimum reserves at 4 months of unrestricted expenditure, as indicative of the operating reserves required by the nature and size of the charity. As at 31 March 2021, that will require minimum free reserves of approximately £70,190 to be held (2020: £66,034). Both the policy and its implementation are under regular scrutiny.

### **Income Generation**

Bethel engaged a Fundraising Officer to support with income-generating and as a result, Bethel has secured additional funding for small projects and to add value to our existing services.

Through our partnerships and collaboration Bethel will continue to grow our income and diversify to ensure we maintain a high level of service and also our reserves.



## **Bethel Health and Healing Network**

### **Independent Examiners Report to the Trustees of the Bethel Health and Healing Network**

I report on the financial statements of the Charity for the year ended 31st March 2021

#### **Respective responsibilities of trustees and examiner**

The charity's trustees are responsible for the preparation of accounts. The trustees consider that an audit is not required for this year under section 43(2) of the Charities Act 1993 ('the 1993 Act') and that an independent examination is needed. The charity has prepared accrued accounts and I am qualified to undertake the examination.

It is my responsibility to:

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

#### **Basis of Independent Examiner's Statement**

My examination was carried out in accordance with the General Directions given by the Charity Commissioners and with Regulation 11 of the 2006 Regulations. An examination includes a review of the accounting records kept by the church, and a comparison of the accounts presented with those records. It also includes consideration of any unusual items or disclosures in the accounts and seeking explanations from you as trustees concerning any such matters. The procedures undertaken do not provide all the evidence that would be required in an audit, and consequently I do not express an audit opinion on the view given by the accounts.

#### **Independent Examiner's Statement**

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

1. which gives me reasonable cause to believe that in any material respect, the requirements: to keep accounting records in accordance with section 41 of the 1993 Act and Regulation 4 of the 2006 Regulations; and to prepare accounts which accord with the accounting records and comply with the accounting requirements of the 1993 Act and Regulation 8 of the 2006 Regulations; and which are consistent with the methods and principles of the Statement of Recommended Practice: Accounting and Reporting by Charities have not been met, or
2. to which, in my opinion, attention should be drawn to enable a proper understanding of the accounts to be reached.

Signed:



Date:

24th September 2021

David Chittenden  
18 Cunningham Road  
Peterborough  
PE2 9RG

**Statement of Financial Activities  
Year Ended 31st March 2021**

	Note	Restricted	Unrestricted	Total Funds 2021	Total Funds 2020
<b>Income and Endowments from:</b>					
Donations and legacies	2	74,226	102,850	177,077	61,824
Charitable activities	3	0	202,976	202,976	184,994
Interest			8	8	8
Other income			3,430	3,430	6,118
		<u>74,226</u>	<u>309,264</u>	<u>383,490</u>	<u>252,944</u>
<b>Expenditure on:</b>					
Raising funds	4		13,769	13,769	14,727
Charitable activities	5/6/7	74,226	196,802	271,028	243,851
Total expenditure		<u>74,226</u>	<u>210,570</u>	<u>284,797</u>	<u>258,578</u>
Net income		0	98,694	98,694	(5,634)
<b>Reconciliation of Funds</b>					
Total Funds brought forward		0	49,328	49,328	54,962
Total Funds carried forward		0	148,022	148,022	49,328
<b>Balance Sheet as at 31st March 2021</b>					
<b>Current Assets</b>					
Debtors	11			15,986	2,731
Cash at bank and in hand	12			<u>148,235</u>	<u>53,137</u>
				<u>164,221</u>	<u>55,868</u>
<b>Current Liabilities</b>					
Liabilities falling due within one year	13			16,199	6,539
<b>Net Assets</b>				<u>148,022</u>	<u>49,328</u>
<b>Represented by:-</b>					
Unrestricted Funds	15			148,022	49,328
Restricted Funds	15			0	0
<b>Total Funds</b>				<u>148,022</u>	<u>49,328</u>

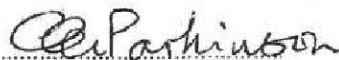
The trustees (who are also the directors of the company for the purposes of company law) confirm that for the period ended 31 March 2021:-

- the company was entitled to exemption from audit under section 477 of the Companies Act 2006 ("the Act"), and
- members have not required the company to obtain an audit of its accounts for the period in question in accordance with section 476 of the Act. However, in accordance with section 145 of the Charities Act 2011 and section 44 of the Charities and Trustee Investment (Scotland) Act 2005, the accounts have been examined by an independent examiner.

The trustees acknowledge their responsibilities for complying with the requirements of the Act with respect to accounting records and the preparation of accounts.

The notes form an integral part of these accounts. They have been reviewed in the preparation of these accounts with changes to the classification and presentation.

These accounts, which have been prepared in accordance with the provisions in the Companies Act 2006 relating to small companies, were approved by the trustees on 05/10/2020 and signed on their behalf by:



Christine Parkinson  
Trustee

Date:

Notes:

1. Accounting Policies

(a) Basis of Preparation

These accounts have been prepared on the basis of historic cost in accordance with the Accounting Regulations set out under the Charities Act 1993 and with the Charities Statement of Recommended Practice (SORP) 2005 - Second Edition

(b) Form of Financial Statements

- (i) Unrestricted funds are those that may be used at the discretion of the trustees in furtherance of the objects of the charity
- (ii) Restricted funds may only be used by specific purposes. Restrictions arise when specified by the donor or when funds are raised for specific purposes.

(c) Incoming Resources

- (i) Incoming Resources are recognised and included in the Statement of Financial Activities (SOFA) when the Charity becomes entitled to the resources; the trustees are virtually certain they will receive the resources; and the monetary value can be measured with sufficient reliability.
- (ii) Where incoming resources have related expenditure (as with fundraising), the incoming resources and related expenditure are reported gross in the SOFA.
- (iii) Donations are accounted for gross when received.
- (iv) Bank interest is recognised when it is credited to the account.

(d) Expenditure and Liabilities

- (i) Expenditure is accounted for on an accruals basis.
- (ii) Liabilities are recognised as soon as there is a legal or constructive obligation to pay out resources.

(e) Assets

Tangible fixed assets are capitalised if they cost more than £1,000 and can be used for more than one year. They are valued at cost or, if gifted, at value on receipt. The charity does not currently have any capitalised fixed assets.

(f) Taxation

The charity is not liable for income or capital gains tax on its charitable activities. Irrecoverable VAT is included in the asset cost or expense to which it relates.

2. Income from donations and legacies	Restricted	Unrestricted	2021	2020
Donations received	200	723	923	12,039
Grants received:				
Alfred Haines Charitable Trust			0	1,000
Baron Davenport			0	500
Edward Cadbury Charitable Trust	5,000		5,000	
Greggs Foundation			0	2,000
Groundworks		500	500	
Hill Green Neighbourhood Network Scheme	7,886		7,886	
Heart of England Community		3,410	3,410	
Lloyds Bank Foundation	55,065	39,711	94,776	1,660
Lord Mayor of Birmingham's Charity			0	4,350
Oakdale Trust			0	1,000
Renewal Christian Fellowship			0	3,000
Richard Kilcupper Charity			0	500
Roger & Douglas		2,000	2,000	
St Thomas Dole Charity	1,575		1,575	1,575
The Bewley Charitable Trust			0	200
The Cole Charitable Trust	1,000		4,000	500
The Edward and Dorothy Cadbury Trust	500		500	
The Eveson Charitable Trust			0	10,000
The Goodenough Charitable Trust		2,000	2,000	
The Grinmill Trust	2,000		2,000	1,000
The National Lottery Community Fund		49,757	49,757	
The Roughley Trust		3,000	3,000	
The Tudor Trust	1,000		1,000	20,000
The William Dudley Trust			0	1,000
William A. Cadbury Charitable Trust			0	500
Zurich			0	1,000
Other		1,750	1,750	0
	74,226	102,850	177,077	61,824

### 3. Income from charitable activities

Best Beginnings	1,345	1,345	
NHS BHAM Women & Childrens NHSFT	12,000	12,000	8,000
NHS Birmingham and Solihull CCG	104,320	104,320	102,100
NHS Hodge Hill	13,911	13,911	
NHS Sandwell and West Bham CCG	71,400	71,400	74,894
	<u>0</u>	<u>202,976</u>	<u>202,976</u>
			<u>184,994</u>

### 4. Expenditure on generating donations and legacies

<b>Unrestricted funds</b>			
Raising funds		13,769	14,727

### 5. Costs of charitable activities by fund type

Doula	26,269	150,257	176,526	141,154
Rapha listening service	25,052	20,617	45,668	38,506
Trusted Charity (PCASSO)			0	5,522
Support costs	<u>22,906</u>	<u>25,928</u>	<u>48,834</u>	<u>58,669</u>
	74,226	196,802	271,028	243,851

### 6. Costs of charitable activities by activity type

	Activities undertaken			Total
	directly	Support costs	Total	
Doula	176,526	38,797	215,322	187,249
Rapha listening service	45,668	10,037	55,705	51,080
Trusted Charity (PCASSO)			0	5,522
	<u>222,194</u>	<u>48,834</u>	<u>271,028</u>	<u>243,851</u>

### 7. Analysis of support costs

	2021	2020
Communication costs	8,978	5,749
Office costs	22,761	14,500
Premises costs	11,809	9,534
Legal and professional	36,725	19,650
Other operating costs	9,520	9,236
	<u>89,793</u>	<u>58,669</u>

### 8. Independent examiner's remuneration

The independent examiner provided services on a voluntary basis so no fee was charged (2020: Nil)

### 9. Trustees' remuneration and expenses

During the year, no Trustees received any remuneration or other benefits and no expenses were claimed (2020: Nil)

### 10. Staff costs and emoluments

Salaries and wages	154,786	156,494
Social security costs	10,679	11,571
Employers contribution to defined contribution pension scheme	<u>2,548</u>	<u>2,449</u>
	168,013	170,514

There were no employees whose emoluments (salaries, wages, benefits in kind) fell in a band in excess of £60,000 (2020: Nil)

The average number of persons employed by the Charity, including part time staff, calculated on a full time equivalent basis was:

Core staff	5.16	4.95
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### 11. Debtors

Accounts Receivable	5,315	500
Accrued Revenue	9,320	2,231
Prepaid Expenses	1,351	
Other		
	<u>15,986</u>	<u>2,731</u>

### 12. Bank and Cash Balances

TSB current account	132,342	37,252
Triodos deposit account	15,673	15,665
Petty Cash	<u>220</u>	<u>220</u>
	148,235	53,137

**13. Current Liabilities (payable within one year)**

Accounts Payable	8,729	2,866
Accruals and deferred income	787	450
Payroll Liabilities	3,713	3,223
Prepaid income	2,970	
	<u>16,199</u>	<u>6,539</u>

**14. Related party transactions**

Donations without condition of £360 were received from one trustee (2020: £590 from 2 trustees)  
These amounts do not include the gift aid associated with these donations.

<b>15. Statement of Funds</b>	<b>At 1st April 2020</b>	<b>Income</b>	<b>Expenditure</b>	<b>Transfers</b>	<b>At 1st April 2021</b>
<b>Unrestricted Funds</b>					
General	13,740	106,268	13,769		106,259
Doula designated	35,589	202,976	196,802		41,763
	<u>49,328</u>	<u>309,264</u>	<u>210,570</u>	<u>0</u>	<u>148,022</u>
<b>Restricted Funds</b>					
Doula		44,466	44,466		0
Rapha		29,760	29,760		0
	<u>0</u>	<u>74,226</u>	<u>74,226</u>	<u>0</u>	<u>0</u>
<b>Total Funds</b>	<u>49,328</u>	<u>383,490</u>	<u>284,797</u>	<u>0</u>	<u>148,022</u>
<b>Prior year</b>					
<b>Unrestricted Funds</b>					
General	11,224	27,977	14,727	(10,734)	13,740
Doula designated	37,144	184,994	186,549		35,589
	<u>48,368</u>	<u>212,971</u>	<u>201,276</u>	<u>(10,734)</u>	<u>49,328</u>
<b>Restricted Funds</b>					
Doula		700	700		0
Rapha	3,500	37,613	51,080	9,967	0
Trusted Charity (PCASSO)	3,095	1,660	5,522	767	0
	<u>6,595</u>	<u>39,973</u>	<u>57,302</u>	<u>10,734</u>	<u>0</u>
<b>Total Funds</b>	<u>54,962</u>	<u>252,944</u>	<u>258,578</u>	<u>0</u>	<u>49,328</u>



# A Message from our Patron

I am extremely honoured to be a Patron of Bethel Health and Healing Network, who relentlessly continues to carry out remarkable work in extremely difficult circumstances.

Traditionally, it is women who are attracted to volunteering as 'listeners' but we are now seeing more men coming forward, which for us, is a very positive development.

Mental health issues are increasing due to Covid-19, as the series of 'Lockdown' has deprived us of so many things that we take for granted and as a result, there is a great demand for our services.

Social isolation and lockdown rules have had such an impact on pregnant women and their families and have been very challenging for our doulas who need to be with their clients.

Currently, there is an overwhelming number of pregnant women being hospitalised with COVID-19 symptoms, who have not had the vaccine. These concerning statistics can weigh heavily on those vulnerable and isolated pregnant women, increasing their mental health issues and overall well-being.

Again, the third sector is being pulled on to fill the gap and provide true life-enhancing solutions for the most vulnerable in our society, the measure of a civilised society is determined by how we all protect those most in need.

I am greatly thankful for the splendid and continuing work that Bethel is doing, to maintain resilience and supportive care for those who need it most.

Whilst we will remember 2020 for so many reasons, we are reminded again of the value of the services Bethel Health and Healing Network and its volunteers deliver to transform lives and building a better future.

**Dr Beverly Lindsay OBE, OD, DL**

# Bethel Health and Healing Network



Bethel Health and Healing Network  
196-198 Edward Road, Balsall Heath  
Birmingham B12 9LX

Registered Charity Number: 1116225  
Company Number: 05813084