

VOLUNTARY SECTOR MENTAL HEALTH PROVIDERS FORUM
(A Company Limited by Guarantee)

REPORT AND FINANCIAL STATEMENTS

FOR THE YEAR ENDED 31 MARCH 2025

Company number: 05536120
Charity number: 1120222

VOLUNTARY SECTOR MENTAL HEALTH PROVIDERS FORUM
REPORT AND FINANCIAL STATEMENTS
FOR THE YEAR ENDED 31 MARCH 2025

Contents	Page
Trustees' Report	2 – 13
Independent Examiner's Report	14
Statement of Financial Activities	15
Statement of Financial Position	16 - 17
Statement of Cash Flows	18
Notes to the Financial Statements	19 – 28

VOLUNTARY SECTOR MENTAL HEALTH PROVIDERS FORUM

REFERENCE AND ADMINISTRATIVE DETAILS

FOR THE YEAR ENDED 31 MARCH 2025

Status: The organisation is a charitable company limited by guarantee, incorporated on 15 August 2005 and registered as a charity on 24 July 2007.

Company Number: 05536120

Charity Number: 1120222

Registered Office and Operational Address: 85 Great Portland Street, Great Portland Street, London, England, W1W 7LT

Trustees The Directors of the charitable company are its Trustees for the purposes of charity law. The Trustees who have served from 1 April 2024 up to the date of approval of these financial statements were as follows:

Dr Sridevi Kalidindi	- Chair (resigned 31 July 2024)
Stephen Appleton	- Chair (appointed 1 August 2024)
Sanjay Shah	- Treasurer
Mark Winstanley-Kimmis	- CEO Rethink Mental Illness
Rachel Peacock	- CEO Making Space (resigned 31 January 2025)
Julie Layton	- CEO Advance UK
Steve Gilbert	- Independent Consultant (resigned 31 January 2025)
Steven Hill	- CEO Coventry and Warwickshire Mind
Linda Bryant	- CEO Together for Mental Wellbeing
Raymond Sheehy	- CEO Bridge Support
Sarah Maguire	- CEO Choice Support (resigned 31 March 2025)
Jane Hughes	- CEO Mental Health Matters
Maaria Mahmood	- CEO Muslim Youth Helpline (appointed 3 July 2024)

Chief Executive Officer and Company Secretary: Kathy Roberts

Bankers: CAF Bank Ltd
25 Kings Hill Avenue
Kings Hill
West Malling
Kent
ME19 4QT

Independent Examiner: George Shillam
Beever and Struthers
150 Minories
London
EC3N 1LS

VOLUNTARY SECTOR MENTAL HEALTH PROVIDERS FORUM

TRUSTEES' REPORT

FOR THE YEAR ENDED 31 MARCH 2025

The Trustees present their report and the examined financial statements of the charity for the year ended 31 March 2025. The Trustees have adopted the provisions of the Statement of Recommended Practice (SORP) "Accounting and Reporting by Charities" (FRS 102) published in October 2019, the Financial Reporting Standard applicable in the United Kingdom and Republic of Ireland (FRS 102), the Charities Act 2011 and the Companies Act 2006 in preparing the annual report and financial statements of the charity.

Structure, governance & management

The organisation is a charitable company limited by guarantee, incorporated on 15 August 2005 and registered as a charity on 24 July 2007.

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

Aims and public benefit

Voluntary Sector Mental Health Providers Forum trading as the Association of Mental Health Providers (The Association), formerly Mental Health Providers Forum, is a representative organisation for providers of mental health and wellbeing services. The Association want service users to have access to joined up, seamless services from the organisations that support them, and are committed to working in equal partnership with statutory agencies involved in providing health and social care support for people with mental health needs.

We facilitate this through supporting and promoting effective service delivery, information exchange and the sharing of best practice across the voluntary, statutory and private sectors.

Our charitable objects:

To relieve the needs of people with mental health conditions in England and Wales by:

- Improving the range, quality and volume of services and support available
- Contributing to policy and practice developments concerned with improving services and promoting better mental health
- Sharing information and experience with a view to improving services and promoting better mental health.

Our values

A society where everyone with mental health concerns has the right to get the support they need from a wide range of providers, implementing demonstrable values which include:

- Respecting service user perspectives, empowerment and choices
- Believing in and supporting recovery, social inclusion and enabling people with enduring mental health conditions to live their best lives.
- Commitment to collaboration, sharing partnership and coproduction.
- Commitment to service excellence, innovation, evidence-based practice and continuous improvement
- Developing and promoting the unique value-based contribution of the voluntary mental health sector.

Statement of Public Benefit

The Directors confirm that they have complied with the duty in section 4 of the Charities Act 2011 to have due regard to the public benefit guidance published by the Charity Commission in determining the activities undertaken by the charity. How the charity delivers public benefit is explained under section 3 "Current Activities and Work Programmes" below.

1 Strategic overview

Association of Mental Health Providers continues to be the leading representative body for voluntary sector providers of mental health services with members drawn from national, regional and locally based organisations operating across England. As the only representative body for mental health VCSE providers, The Association is ideally placed to work across all types of service provision. Our members provide services covering the full range of provision from crisis care, liaison and diversion services, substance misuse services, complex needs, to advice and counselling to people with lived experience. Specialisms amongst our members include BME mental health, children and young people's mental health, housing and homelessness, employment support, IAPT and secure pathways – taking a whole-life and whole-person approach. Our members are united by their desire to improve the quality of care for people with mental health needs and the outcomes of the services provided.

2 Strategic priorities, objectives and activities

Overarching priorities

- Valuing the Voluntary and Community Sector and influencing sector sustainability and growth
- Improving practice in mental health
- Addressing inequalities
- Ensuring the VCSE mental health provider sector is represented in mental health policy
- Increasing membership.

Strategic objectives

- Representing Members and Lived experience Involvement, Engagement and coproduction
- Influencing Policy and Strategy
- Best Practice Profiling
- Shaping and Growing the Market for the Sector
- Facilitating Networks and Engagement
- Fostering Partnerships and Collaboration
- Development of Frameworks and Guidance
- Supporting Safer Practice
- Developing Positive Outcomes
- Supporting Equality and Parity in service Development and Implementation.

Support to members

- An authoritative, representative voice to policy makers, commissioners and other public funders
- Access to key decision making forums, expertise, policy makers and influence
- Translation between policy and practice
- Breaking down complexities of the market place
- Market intelligence and access to new markets
- Innovative products & tools
- Support and navigation in difficult and changing times
- Collaborative development opportunities
- Confidence in strength of numbers.

3. Achievements and Performance

3.1 Membership Engagement and Sector Insight

Throughout the reporting year from April 2024 to March 2025, the Association prioritised meaningful and consistent engagement with its diverse membership. This approach ensured that the Association's activities were deeply informed by the realities faced by members, enabling a responsive and collaborative model of advocacy and support. The fortnightly member meetings served as a vital space for discussing systemic challenges and opportunities, such as the implications of the National Living Wage increases, regulatory developments, and the integration of VCSE perspectives into national health and social care planning.

During the winter and spring quarters, discussions expanded to include critical national initiatives, such as the Mental Health Bill and the ongoing implementation of the Right Care, Right Person (RCRP) framework. These sessions emphasised the importance of VCSE involvement in shaping national reforms and tackling barriers to equitable service delivery. The Business and Service Continuity Subgroup also played a key role in guiding sector responses to operational challenges, such as fee rate negotiations and regulatory compliance, ensuring members were equipped with the tools needed to address immediate risks.

Member Networks

In response to member feedback, the Association reinvigorated and launched several Member Networks to provide tailored support and a platform for collaboration. These networks fostered safe and confidential spaces for professionals to connect, share challenges, and develop sector-wide solutions.

- **Minoritised Communities' Network:** Meeting monthly, this network explored nuanced issues such as racial solidarity, the adultification of minoritised children, and the intersection of poverty and mental health. While attendance fluctuated, the discussions were vibrant and pointed to the need for deeper engagement on systemic inequalities.
- **Business Development Leads Network:** This group addressed pressing issues such as financial sustainability, fee rate disparities, and challenges in contract bidding. Members shared experiences with fundraising, managing mergers, and navigating TUPE complexities, creating a shared repository of strategies for overcoming systemic obstacles.
- **CEO Network:** Meeting every six weeks, the CEO Network provided executive-level discussions on topics such as governance, commissioning, and the implications of NHS restructuring. These meetings offered peer support and enabled collaborative advocacy on shared concerns, such as workforce planning and equitable funding.
- **Lived Experience Leads Network:** This network brought together individuals with lived experience to inform the development of mental health social care policy. A key achievement was the group's input into the Casey-led Independent Commission on Adult Social Care, emphasising the unique value of community-based support systems.
- **HR Network:** Focused on recruitment and retention strategies, the HR Network explored ways to address workforce challenges, particularly in light of increased National Insurance contributions. Discussions emphasised non-financial rewards and workforce well-being as critical components of retention.

These networks significantly enhanced the Association's ability to provide targeted support and amplify member voices in national policy discussions.

3.2 Policy Development and Strategic Influence

The Association expanded its influence on mental health policy significantly throughout the year. Contributions to the House of Commons Health and Social Care Select Committee Inquiry into Community Mental Health Services were a key achievement, combining detailed evidence with real-world case studies to demonstrate the essential role of VCSE organisations in delivering personalised, place-based care. This work led to an invitation for oral evidence, solidifying the Association's position as a trusted voice in national policymaking.

Engagement with the NHS Ten-Year Health Plan provided another avenue for influence, with the Association ensuring that VCSE perspectives were embedded in planning for both adult and child mental health services. Advocacy efforts emphasised the need for better integration between health and social care systems and highlighted the critical importance of population-level planning in addressing mental health disparities.

TRUSTEES' REPORT

FOR THE YEAR ENDED 31 MARCH 2025

The Association also played a leading role in discussions surrounding the Fair Pay Agreement for Social Care, advocating for greater clarity on how proposed changes would impact the VCSE sector. Collaborative efforts with the Care Provider Alliance and direct dialogues with DHSC policy teams helped ensure that the unique needs and contributions of mental health providers were represented in national conversations.

System Reform and Neighbourhood Health Integration

The Association's commitment to systemic reform was evident in its active participation in initiatives aimed at transforming community mental health systems. Through its involvement in the development of 24/7 Neighbourhood Mental Health Centres, the Association championed rights-based, person-centred care models that integrate housing, education, and employment support. These models align with the sector's strengths in early intervention and holistic care, setting a blueprint for future mental health service delivery.

In response to the Government's announcement of the Independent Commission on Adult Social Care, the Association coordinated a strategic narrative that underscored the VCSE sector's indispensable role in addressing complex mental health needs. This work emphasised the importance of neighbourhood-based health systems and called for consistent, equitable funding mechanisms to support their implementation.

Workforce, Regulation, and Evidence Building

Workforce challenges remained a central focus, with the Association's workforce mapping project revealing critical issues such as high vacancy rates, turnover, and recruitment gaps in specialist roles. These findings informed policy recommendations and practical tools aimed at addressing workforce sustainability.

Regulatory engagement with the Care Quality Commission (CQC) addressed systemic inconsistencies and explored ways to better integrate VCSE contributions into local and national oversight frameworks. The Association's Geographic Information System (GIS) mapping tools were highlighted as innovative resources for improving data-driven decision-making and regulatory accountability.

Collaborative efforts with academic and policy partners also supported evidence-building initiatives, such as the Mental Health Social Care Research Incubator. This program has advanced the sector's capacity for impactful, evidence-based practice, ensuring that VCSE contributions to mental health care are both visible and valued.

3.3 Data Observatory and Workforce Mapping

The Association's commitment to advancing data-driven decision-making was epitomised by the continued development and impact of the Mental Health Data Observatory and its associated workforce mapping initiatives. These projects provided critical insights into workforce trends, funding pressures, and service distribution, enabling more informed policy advocacy and operational planning across the VCSE mental health sector.

Key achievements during the reporting year included updates to the Mental Health Geographic Information System (GIS) and the Workforce Mapping Tool. The GIS now offers an integrated, longitudinal view of VCSE mental health services, filterable by local authority, Integrated Care Board (ICB), and parliamentary constituency. These enhancements allow stakeholders to visualise service gaps and opportunities, facilitating targeted interventions.

The Workforce Mapping Tool revealed significant challenges, including:

- A workforce vacancy rate of 13,500 positions, with turnover rates exceeding 40% in some regions.
- Persistent recruitment gaps in specialist roles, such as occupational therapy and mental health nursing, totalling over 3,000 unfilled positions nationally.
- A disproportionate financial strain on smaller providers, exacerbated by wage increases and insufficient fee uplifts.

Presentations of these findings to national forums, such as the NHS England/Improvement Mental Health, Learning Disability & Autism National Specialty & Clinical Advisors Meeting, emphasised the urgency of addressing these issues. Collaborations with the Quality Transformation Leads further supported the development of tools to illustrate how VCSE contributions can mitigate systemic pressures on statutory services. Additionally, the Association expanded the scope of its data analysis to include young people's mental health services. By integrating data from organisations like Barnardo's and the Centre for Young Lives, the Observatory highlighted critical concerns, such as the rising prevalence of mental health disorders among young people and the delays in accessing care. These insights are informing strategic responses to this growing crisis.

3.4 Mental Health Social Care

The Association underscored the indispensable role of mental health social care as a core component of the broader mental health ecosystem. This area of focus emphasised community-based, person-centred care that addresses clinical needs alongside broader social determinants, such as housing, relationships, and employment. Despite ongoing funding and regulatory challenges, mental health social care was celebrated for its distinct capacity to reach underserved populations and those with complex needs.

Key to these efforts was the Association's leadership within the Mental Health Social Care Policy and Oversight Group, co-chaired by Kathy Roberts and the Association of Directors of Social Services. Meeting on a six-weekly basis, the Group's membership includes representatives from the Department of Health and Social Care (DHSC) and NHS England and has been strengthened by the inclusion of the Association's members Everyturn Mental Health and Creative Minds. The Group remains the leading national network and source of advice and intelligence for DHSC and other national partners on mental health social care policy and practice.

The Group also continues to provide the Association with a forum for reviewing the issues faced by its members as they endeavour to ensure the continuity and sustainability of VCSE-arranged mental health social care services and support. It also considers the policy and practice responses required to address these challenges. A significant area of focus this year has been identifying how best to engage with and inform the work of the independent Commission on Social Care, announced by the Government in December 2025 and led by Baroness Casey of Bostock. The Group aims to ensure that the Commission is informed by an understanding of the value of mental health social care—both for people experiencing poor mental health and their unpaid carers, as well as for the wider social care and support system.

The Association also contributed to the development of neighbourhood health models, such as the 24/7 Neighbourhood Mental Health Centres initiative, which integrates psychosocial care with housing, education, and employment services. This innovative framework aligns with the sector's strengths in early intervention and rights-based care, establishing a vision for the future of mental health support.

Collaborations with CQC leadership highlighted ongoing regulatory challenges, such as the exclusion of many VCSE providers from formal inspection frameworks, which has led to systemic underestimation of their impact. By advocating for inspection and assurance systems tailored to the nature of VCSE services, the Association has laid the groundwork for a more inclusive regulatory landscape.

Additionally, the Mental Health Social Care Research Incubator Collaborative, funded by the National Institute for Health and Social Care Research (NIHR), continued its valuable work. This partnership between the London School of Economics, the University of Manchester, and the Association identifies and enables research opportunities in mental health social care. The program places particular emphasis on facilitating the participation of people with lived experience and those working in the VCSE mental health sector. Through initiatives like the Stepping into Research program, colleagues from several member organisations have contributed to this important work in the past year.

3.5 Advancing Mental Health Equalities

Advancing mental health equalities remained a cornerstone of the Association's work throughout 2024-2025, with a particular focus on tackling disparities in access, outcomes, and experiences for marginalised groups. Through its leadership in NHS England's Advancing Mental Health Equalities Taskforce, the Association helped steer national efforts to reduce systemic inequities, ensuring that the VCSE sector's contributions were recognised and amplified.

Patient and Carer Race Equality Framework (PCREF)

The implementation of the Patient and Carer Race Equality Framework (PCREF) within VCSE settings was a major focus of the year. Working closely with members such as Everyturn, the Association supported the development of advisory boards and best practice guides. This collaboration provided practical tools for organisations to embed equity-focused policies into their operations.

VOLUNTARY SECTOR MENTAL HEALTH PROVIDERS FORUM

TRUSTEES' REPORT

FOR THE YEAR ENDED 31 MARCH 2025

The Association also participated in the PCREF communications subgroup, contributing to podcasts, webinars, and other materials designed to raise awareness and encourage widespread adoption of the framework. These efforts were bolstered by the development of an implementation guide tailored to the unique challenges and opportunities faced by VCSE providers.

Data-Driven Equity Initiatives

The Association's data projects further advanced the equity agenda by providing actionable insights into disparities across mental health systems. Through partnerships with ICBs and regional NHS teams, the Association hosted strategy sessions and roundtables to identify gaps in service delivery and resource allocation. These findings informed the creation of an evaluation framework designed to help ICBs measure progress toward reducing mental health inequalities.

A flagship project, funded through the VCSE Health and Wellbeing Alliance, involved mapping how local systems address mental health disparities. Insights from this work will be published in a briefing paper and used to develop training resources for commissioners and service providers.

3.6 Partnerships and Advocacy

The Association continued to advocate for systemic reforms through partnerships with national organisations. Collaborative responses to government initiatives, such as the Pathways to Work Green Paper, emphasised the intersection of social security policies and mental health inequalities. This work highlighted the disproportionate impact of proposed reforms on individuals with mental health conditions and unpaid carers, ensuring their experiences were reflected in policy deliberations.

3.7 Strategic Communications and Public Profile

The Association's communications strategy was instrumental in raising awareness of the VCSE mental health sector's contributions and challenges. By leveraging social media, blogs, webinars, and targeted campaigns, the Association amplified member voices and shaped public and political narratives around mental health care.

Social Media and Campaigns

The Association's campaigns, such as #ValueSocialCare and #TheFinalStraw, galvanised public support and elevated the sector's profile. These initiatives highlighted the economic and social impact of VCSE mental health services, emphasising the urgent need for sustainable funding and equitable recognition.

A key milestone was the Providers Unite Day of Action on February 25, 2025, where members convened in Westminster to demand systemic reforms. The Association played a pivotal role in organising this event, providing members with resources for engaging MPs and amplifying their messages through coordinated social media activity.

Across social media platforms, the Association experienced significant growth. On LinkedIn, engagement increased by over 20%, driven by content that resonated with both members and policymakers. The shift from X (formerly Twitter) to Bluesky and Threads reflected a commitment to maintaining an inclusive and values-aligned online presence. Posts highlighted critical issues, including responses to the Spring Budget and the Mental Health Bill, as well as campaigns on mental health awareness and stigma reduction.

Member Communications

The Association's fortnightly bulletins provided a mix of sector news, funding opportunities, and insights into advocacy efforts. Topics ranged from fee rate surveys and benefits reform to grassroots campaigns like #DumpTheScales. These bulletins ensured members remained informed and equipped to engage with evolving policy landscapes.

In addition to bulletins, the Association hosted two highly attended webinars on care planning and accommodation-based support, providing members with actionable guidance on navigating complex regulatory frameworks. These sessions were recorded and made available to all members, extending their reach and impact.

Media and Narrative Development

The Association took a proactive approach to challenging harmful narratives in the media, particularly those framing mental health conditions and poverty as personal failings. Discussions within the Communications Leads Network focused on crafting empathetic and accurate messaging to counter stereotypes and influence policy.

VOLUNTARY SECTOR MENTAL HEALTH PROVIDERS FORUM

TRUSTEES' REPORT

FOR THE YEAR ENDED 31 MARCH 2025

Blogs and news articles authored by the Association and its members tackled key issues, such as the benefits reform Green Paper and community mental health funding disparities.

Through these efforts, the Association not only elevated the profile of its members but also positioned itself as a leading voice in the national conversation on mental health care.

Conclusion

Through its comprehensive engagement with members, strategic communications, data observatory, workforce mapping, and equity-focused initiatives, the Association has demonstrated its unwavering commitment to systemic change. These efforts reflect the critical contributions of the VCSE mental health sector to the broader health and social care landscape, ensuring that the needs of the most vulnerable populations remain at the forefront of national reform agendas.

3.8 Strategic Influencing

The Association has been in a good position to influence the shaping of mental health policy and practice and has undertaken several key tasks in order to ensure that the not-for-profit mental health provider community has a clear voice:

- Representation of the Care Providers Alliance
- Chair of the Mental Health Leaders Group
- Chair of the Mental Health and Wellbeing Policy and Oversight & Advisory Group
- Representation on the Think Local Act Personal Programme Board,
- Representation on the Adult Social Care Time to Act Reform Board
- Representation of the community Mental Health rehab guidance task force
- Representation of the NHSE Mental Health and policy Group plus
- Representation on NHSE Adult Mental Health Steering Group
- Representation and Participation in CQC External Reference Panels
- Care and Support Programme Board
- Representation on DHSC Capacity and Discharge planning
- Representation on the Right Care, Right Person National Oversight Group
- CQC ASC Trade association monthly meetings
- CQC External Strategic Advisory Group quarterly meetings.
- Representation and Participation in the All-Party Parliamentary Group sessions

3.9 Plans for Future Periods

The Association will continue to

- Advocate clearly so that minister their officials and system leaders obtain a greater understanding of the breadth and depth of the Mental Health Voluntary and Community Sector, its role, reach and impact so as to utilise existing charitable and public sector resources
- Stand in an independent space to engage and be representative of the wider Mental Health and Community Sector of providers
- Emphasise equity, concentrating on creating a whole system service with an even spread across providers of mental health services; based on ability to deliver what people want and need irrespective type of provider.
- Produce guidelines and briefings for ministers and commissioners that contain a more consistent and clarified understanding of outcomes and benefits of services provided, including cost analysis, properly showcasing the added value of the voluntary and community sector
- Endorse and encourage a better understanding of integration and contribution to whole system solutions beyond looking at process and joint resources
- Endorse and encourage overall improved commissioning and viable contracting, that demonstrates a clear understanding of the needs of a changing and evolving health and care landscape
- Endorse and encourage a sustained commitment to better resourcing of prevention in mental health, with the foresight that such investment can save both resource and human lives

VOLUNTARY SECTOR MENTAL HEALTH PROVIDERS FORUM

TRUSTEES' REPORT

FOR THE YEAR ENDED 31 MARCH 2025

- Market widely the qualities of Mental Health Voluntary and Community Sector providers, and encourage their involvement in the development of regulation and statute, ensuring that there is an open and responsive dialogue between Voluntary and Community Sector practice and statute
- Endorse and encourage the current commitment to creating parity of esteem for mental health care, and would like to encourage Government to continue the commitment to a reduction in waiting times and standards for mental health, to improve access for people to appropriate care
- Encourage policymakers to take note of the weight that regulation and commissioning requirements can impose on high quality smaller scale voluntary and community sector organisations, resulting in an inability to retain or support workforce, and a reduction in the quality of overall practice and support
- Encourage policymakers to take note of existing innovation and pilot models already existing in the voluntary and community sector and to allocate resources for a wide range of mental health services, to ensure there is a choice for all
- Showcase and encourage developing partnership models that bring NHS and voluntary and community sector providers together effectively to create new and more flexible collaborative whole system vehicles delivering a more holistic range of person-centred services.

4. Governance

The Chief Executive is responsible to the Chair for organisational management and supporting the Governance. The Board of Trustees meets quarterly where quarterly performance and strategies are discussed. The Board of Trustees then delegate operational responsibility to the Chief Executive who is supported by staff in delivering The Association's objectives.

Board of Directors/Trustees

The Association's Board is elected from the membership at Chief Executive level of organisations involved in the mental health sector. Dr Sri Kalidindi was appointed as Chair on 3 November 2021 and resigned on 31 July 2024. Stephen Appleton was appointed as Chair on 1 August 2024. Sanjay Shah, Finance Director for Certitude was appointed as Treasurer in December 2009. Trustees are familiar with the aims of the organisation through their work in the sector. Training is provided as required to assist Trustees in making decisions to benefit the work of The Association.

Staff

The Association employed a total of 6 staff during the year:

Kathy Roberts	Chief Executive Officer – FT
Dania Hanif	Director of Policy and Programmes – FT
Duncan Tree	Director of Strategy and Relationships – FT
Jyoti Shah	Finance Officer – PT
Ella Dunthorne	Communications Officer – FT
Aqsa Suleman	Policy and Projects Officer – PT (contract ended February 2025)

Membership

The Association had 175 members (plus 137 Local Mind associations, plus 11 associate members) at the year end. A full list of members at 31st March 2025 is given on pages 11 to 12.

5. Financial Review

The Association has continued to manage resources well despite the significant tightening of funds available across the sector due to financial pressures in the current economic climate. Grant income decreased in 2024/25 to £108,230 (2023/24 : £330,538). This includes £90,000 for the Health & Wellbeing Alliance, £13,230 from Care Provider Alliance (CPA) and £5,000 from the Registered Nursing Home Association.

Membership subscription in 2024/25 decreased to £88,418 (2023/24: £92,761). The full membership list is included on pages 11 to 12.

VOLUNTARY SECTOR MENTAL HEALTH PROVIDERS FORUM

TRUSTEES' REPORT

FOR THE YEAR ENDED 31 MARCH 2025

Access funded a three-year Enterprise Development Programme which ended on 30 September 2022 and then provided further funding to continue the programme to 31 March 2024. We have £29,297 left from this funding to utilise in 2025/26. We also have £14,901 from CPA to utilise in 2025/26.

At the year end the financial statements show a deficit of £177,021 (2023/24: £5,509 surplus). Expenditure has been managed well leaving £12,078 of unrestricted reserves to be utilised for future years.

There has been an increase in debtors to £12,026 (2023/24 : £7,564) which are mainly trade debtors.

There has been an increase in creditors to £6,316 (2023/24: £3,408). Creditors have been managed well by the team during the year thus maximising the overall cash position.

At present we are budgeting for new grant income of £145,000 for 2025/26, however the ongoing impact of cost-of-living price increases and the economic climate will continue to make accessibility to new grant income more challenging.

Reserves policy

The Board have agreed to keep a minimum of 3 months operating costs as reserves to ensure the on-going viability of the organisation. The Association is reliant on membership and grant income which remains difficult to maintain and has fluctuated over the past few years. To ensure The Association can continue to provide good effective support to its members it needs to ensure it has sufficient reserves to manage further reduction in income and protect its core activities to its members.

Following the deficit generated on restricted funds for 2024/25, the restricted funds have decreased from £233,297 in 2023/24 to £44,198 in 2024/25. Further detail on these restricted funds can be found in the accounts on page 25.

Following the surplus generated on unrestricted funds for 2024/25, the unrestricted funds have increased from £362,276 in 2023/24 to £374,354 in 2024/25.

The reserves target is currently being exceeded with reserves of over 12 months based on 2025/26 budgeted expenditure.

Going Concern

We have set out above a review of financial performance and the organisations reserves position. We have adequate financial resources and are well placed to manage the business risks. Our planning process, including financial projections, has taken into consideration the current economic climate and its potential impact on the various sources of income and planned expenditure. We believe that there are no material uncertainties that call into doubt the organisation's ability to continue. The accounts have therefore been prepared on the basis that the organisation is a going concern.

Detailed cash flow projections have been undertaken for the next 12 months and there are no material changes projected to both cash and reserves. We can manage our expenditure should the need arise where our income is reduced.

Staff Remuneration

Our approach to remuneration is designed to ensure we can attract and retain the talented and motivated people we need to achieve our mission and deliver our strategic goals. It is applied consistently across the organisation. We aim to pay competitively in the not-for-profit sector within the context of affordability. The Chief executive reviews and recommends pay reviews for all staff to the Board, the chair reviews and recommends the Chief Executive's remuneration review to the Board.

Related parties

The organisations for which the Trustees hold Chief Executive Positions are also members of The Association

VOLUNTARY SECTOR MENTAL HEALTH PROVIDERS FORUM

TRUSTEES' REPORT

FOR THE YEAR ENDED 31 MARCH 2025

with membership fees paid under the same terms as for all members. The Association holds the lead and co-ordination role for the Health and Wellbeing Alliance funded by the Department of Health and Social Care. Funds are distributed to the Mental Health Foundation, Mind National, National Survivor User Network, Rethink Mental Illness and Centre for Mental Health, where appropriate. Please see note 17 for any related party transactions.

MEMBERSHIP

- | | |
|--|---|
| 1. Action for Aspergers | 49. Hackney Herbal CIC |
| 2. Addictions North East | 50. Hammersley Homes |
| 3. Addictions UK | 51. Happy Times Activities |
| 4. Advance | 52. hArt |
| 5. Al Hurraya | 53. Headssup CIC |
| 6. Alridha Foundation | 54. HoardingUK Ltd |
| 7. Anne Robson Trust | 55. Home Start Elmbridge |
| 8. Anorexia and Bulimia Care | 56. Home Start South & West Devon |
| 9. Anxiety UK | 57. Hope for the Community |
| 10. Anxious Minds | 58. HOPE- South Yorkshire Fire, Road and
Water-related Trauma Support for Families |
| 11. Arterne: Enriching the next generation CIC | 59. I Can Do That! CIC |
| 12. Artlift | 60. Illuminate |
| 13. Asian Family Counselling Service (AFCS) | 61. Imagine Independence |
| 14. Asperger's Children and Carers Together | 62. In Your Corner |
| 15. Autism Family Support Oxfordshire | 63. Independent Mental Health Network |
| 16. Baby Umbrella | 64. Infinite Wellbeing C.I.C. |
| 17. Bipolar UK | 65. Just for Women |
| 18. Black Health Initiative | 66. Just Psychology CIC |
| 19. BLAM UK | 67. Kab's & Kabs cares CIC |
| 20. Bridge Support | 68. KAG Advocacy |
| 21. Bridges for Children CIC | 69. Kanlungan Filipino Consortium |
| 22. Care in Mind | 70. Keren |
| 23. CASSPLUS | 71. KeyRing |
| 24. Centre for Better Health | 72. Kids Inspire |
| 25. Centre of Wellbeing, Training & Culture
(CWTC) | 73. Kindred Minds |
| 26. Certitude | 74. Little Miracles Charitable Incorporated
Organisation |
| 27. Chasing the Stigma | 75. Living Well Consortium |
| 28. Chester Sexual Abuse Support Service | 76. London Nightline |
| 29. Chilli Studios | 77. Make A Difference |
| 30. Chiltern Music Therapy | 78. Make a move |
| 31. Choice Support | 79. Making space |
| 32. Choices Islington | 80. ManHealth |
| 33. Chrysalis Care New Generation | 81. Maytree |
| 34. Citizen Coaching | 82. Mental Health Concern |
| 35. Cocoon Kids - Creative Counselling and Play
Therapy CIC | 83. Mental health Matters |
| 36. Community Glue | 84. MHFA England |
| 37. Coping with Cancer North East | 85. MhIST (Mental Health Independent Support
Team) |
| 38. Crea8ing Careers | 86. Mindful Peak Performance CIC |
| 39. Creativity Works | 87. Minds Ahead |
| 40. Cycling Minds CIC | 88. Moodswings |
| 41. Deaf-initely Women | 89. Mosac |
| 42. Dementia Friendly Keighley | 90. Mosaic Clubhouse |
| 43. Encompass (Dorset) | 91. Mthwakazi Queens |
| 44. Every Life Matters | 92. Multicultural Resource Centre |
| 45. Family Compass | 93. Mums Aid |
| 46. First Steps ED | 94. Music24 |
| 47. Free Your Instinct | 95. Muslim Women's Council |
| 48. Growing Well | |

VOLUNTARY SECTOR MENTAL HEALTH PROVIDERS FORUM

TRUSTEES' REPORT

FOR THE YEAR ENDED 31 MARCH 2025

- | | |
|--|---|
| 96. Muslim Youth Helpline | 136. Studio Upstairs |
| 97. Mustaqbill (Future) Foundation | 137. Suicide Prevention Bristol Charity |
| 98. N Compass | 138. Support ME Maternal Project |
| 99. Next Chapter NW CIC | 139. Swans CIC |
| 100. NIWE Eating distress service | 140. Sydenham Garden |
| 101. No5 Young People | 141. Talk for Health |
| 102. North East Wellbeing | 142. Tandem |
| 103. North London Music Therapy | 143. Taraki Wellbeing |
| 104. Oakleaf Enterprise | 144. The 180 Programme CIC |
| 105. Off the record - BANES | 145. The Brave Project Community Interest Company |
| 106. Open Briefing | 146. The Cellar Trust |
| 107. Open Door Charity | 147. The Centre for Specialist Educational Assistance Ltd |
| 108. Our Place Support CIC | 148. The Craig Tyler Trust |
| 109. Our Time | 149. The Flowhession Foundation |
| 110. Oxfordshire Chinese Community and Advice Centre (OCCAC) | 150. The Grow Project |
| 111. Oxygen | 151. The Harbour Project |
| 112. PANDAS Foundation | 152. The Listening Place |
| 113. Parenting Project | 153. The Parent House |
| 114. Pregnancy Crisis Care (Plymouth & SE Cornwall) | 154. The Recovery Circle |
| 115. Radiate Arts C.I.C | 155. The Restoration Trust |
| 116. RAHAB PROJECT | 156. The Sporting Memories Foundation |
| 117. Reach Out for Mental Health | 157. The Warrior Programme |
| 118. Recovery Republic CIC | 158. Together for Mental Wellbeing |
| 119. Relate Chesterfield and North Derbyshire | 159. Turning point |
| 120. Rethink Mental Illness | 160. Tyneside Women's Health |
| 121. Reverse The Trend Foundation | 161. Ultimate Counselling |
| 122. Richmond Fellowship | 162. Unforgettable Experiences |
| 123. Ripple Suicide Prevention Charity | 163. Viewpoint (Herts Viewpoint) |
| 124. Sandwell African Caribbean Mental Health Foundation | 164. Voades |
| 125. Scarborough Survivors | 165. Voice Ability |
| 126. Seaview | 166. Warrington Community living |
| 127. Second Step | 167. Winchester Youth Counselling |
| 128. Seed of Hope | 168. Wish |
| 129. Self Help Services | 169. Working Well Trust |
| 130. Sheffield Flourish | 170. Worth-it Positive Education CIC |
| 131. Somewhere House Somerset | 171. Yellow House |
| 132. South Asian Health Action | 172. YIS |
| 133. Southside Rehab | 173. You Raise Me Up |
| 134. Space to Breathe CIC Ltd | 174. Youth Arts and Health Trust |
| 135. Step Out Mentoring (The Wells Trust) | 175. Youthline Ltd |

ASSOCIATE MEMBERSHIP

- | | |
|--|---|
| 1. Agenda | 6. Mental Health Foundation |
| 2. Centre for Mental Health | 7. Mental Health North East |
| 3. Consortium - The National LGB&T partnership | 8. Mind |
| 4. Faith Action | 9. National Survivor User Network |
| 5. Men's Health Forum | 10. Suicide Prevention and Intervention |
| | 11. Volition |

VOLUNTARY SECTOR MENTAL HEALTH PROVIDERS FORUM

TRUSTEES' REPORT

FOR THE YEAR ENDED 31 MARCH 2025

Trustees' Responsibilities in Relation to the Financial Statements

A resolution proposing that Beever and Struthers be re-appointed as independent examiners of the charity will be put to the Annual General Meeting.


The report of the Trustees has been prepared taking advantage of the small companies' exemption of section 415(A) of the Companies Act 2006.

The financial statements have been prepared in accordance with the accounting policies set out in notes to the financial statements and comply with the charity's governing document, the Charities Act 2011 and Accounting and Reporting by Charities: Statement of Recommended Practice applicable to charities preparing their financial statements in accordance with the Financial Reporting Standard applicable in the UK and Republic of Ireland published in October 2019.

This report was approved by the Board of Trustees on 23 July 2025 and was signed on its behalf by:



Stephen Appleton
Chair



Sanjay Shah
Treasurer

**INDEPENDENT EXAMINER'S REPORT TO THE TRUSTEES
OF VOLUNTARY SECTOR MENTAL HEALTH PROVIDERS FORUM
FOR THE YEAR ENDED 31 MARCH 2025**

I report to the charity Trustees on my examination of the financial statements of the company for the year ended 31 March 2025 which are set out on pages 15 to 28.

Responsibilities and basis of report

As the charity Trustees of the company (and also its Directors for the purposes of company law) you are responsible for the preparation of the financial statements in accordance with the requirements of the Companies Act 2006 ('the 2006 Act').

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

Independent examiner's statement

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

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

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



**George Shillam ACA
Beever and Struthers
Chartered Accountants**

**150 Minories,
London,
EC3N 1LS**

Date: 11 August 2025

VOLUNTARY SECTOR MENTAL HEALTH PROVIDERS FORUM

STATEMENT OF FINANCIAL ACTIVITIES (incorporating the Income and Expenditure Account)

FOR THE YEAR ENDED 31 MARCH 2025

	Note	Unrestricted Funds £	Restricted Funds £	Total Funds 2025 £	Total Funds 2024 £
Income and Endowments from:					
Investments:					
Investment income	3	11,711	-	11,711	13,233
Charitable activities:					
Grants receivable		-	108,230	108,230	330,538
Membership services, conferences and events		88,418	-	88,418	92,761
	2	88,418	108,230	196,648	423,299
Total incoming resources		100,129	108,230	208,359	436,532
Expenditure on:					
Charitable activities	4	88,051	297,329	385,380	431,023
Total resources expended		88,051	297,329	385,380	431,023
Net incoming / (expenditure)	7	12,078	(189,099)	(177,021)	5,509
Transfers between funds		-	-	-	-
Net movement in funds		12,078	(189,099)	(177,021)	5,509
Reconciliation of funds:					
Total funds brought forward		362,276	233,297	595,573	590,064
Total funds carried forward		374,354	44,198	418,552	595,573

All of the above results are derived from continuing activities. All gains and losses recognised in the year are included above.

The notes on pages 19 to 28 form an integral part of these financial statements.

VOLUNTARY SECTOR MENTAL HEALTH PROVIDERS FORUM**COMPANY NUMBER: 05536120****STATEMENT OF FINANCIAL POSITION
AS AT 31 MARCH 2025**

	Notes	£	2025 £	£	2024 £
FIXED ASSETS					
Tangible assets	9		1,657		2,484
Intangible assets	10		-		-
CURRENT ASSETS					
Debtors	11	12,026		7,564	
Cash at bank and in hand		411,185		588,933	
		423,211		596,497	
CREDITORS: amounts falling due within one year	12	(6,316)		(3,408)	
NET CURRENT ASSETS			416,895		593,089
TOTAL NET ASSETS	13		418,552		595,573
CHARITY FUNDS					
Unrestricted reserves	14		374,354		362,276
Restricted reserves	15		44,198		233,297
			418,552		595,573

For the year ending 31 March 2025, the company was entitled to exemption from audit under section 477 of the Companies Act 2006 relating to small companies.

Directors' responsibilities:

- The members have not required the company to obtain an audit of its financial statements for the year in question in accordance with section 476;
- The Directors acknowledge their responsibilities for complying with the requirements of the Act with respect to accounting records and the preparation of financial statements.

These financial statements have been prepared in accordance with the provisions applicable to companies subject to the small companies' regime and in accordance with FRS 102 and the Charities SORP (FRS 102).

The financial statements on pages 15 to 28 were approved and authorised for issue by the Trustees on 23 July 2025 and signed on their behalf, by:



Stephen Appleton
Chair



Sanjay Shah
Treasurer

VOLUNTARY SECTOR MENTAL HEALTH PROVIDERS FORUM

COMPANY NUMBER: 05536120

**STATEMENT OF FINANCIAL POSITION
AS AT 31 MARCH 2025**

The notes on pages 19 to 28 form an integral part of these financial statements.

VOLUNTARY SECTOR MENTAL HEALTH PROVIDERS FORUM

STATEMENT OF CASH FLOWS

FOR THE YEAR ENDED 31 MARCH 2025

		2025	2024
		£	£
	Notes		
Cash flow from operating activities			
Net cash flow from operating activities	i	(189,460)	(51,104)
Cash flow from investing activities			
Investment income		11,711	13,233
Purchase of tangible fixed assets		-	(1,096)
Net cash provided by/(used in) investing activities		11,711	12,137
Cash flow from financing activities		-	-
Net Cash provided by/(used in) financing activities		-	-
Change in cash and cash equivalents in the year		(177,748)	(38,907)
Cash and cash equivalents brought forward		588,933	627,840
Cash and cash equivalents carried forward		411,185	588,933
Cash and cash equivalents consist of:			
Cash at bank and in hand		411,185	588,933
Note i			
Net movement in funds		(177,022)	5,509
Depreciation		827	1,240
Investment income		(11,711)	(13,233)
Decrease/(increase) in debtors		(4,462)	4,038
Increase/(decrease) in creditors		2,908	(48,658)
Net cash inflow from operating activities		(189,460)	(51,104)

The notes on pages 19 to 28 form an integral part of these financial statements.

1. ACCOUNTING POLICIES

Legal Status

Voluntary Sector Mental Health Providers Forum is a charitable company limited by guarantee (Charity number 1120222, Company number: 05536120) with the Charity Commission incorporated in England under the Companies Act 2006. In the event of the charity being wound up, the liability in respect of the guarantee is limited to £1 per member of the charity. The address of the registered office is 3rd Floor Watson House, 54 Baker Street, London, W1U 7BU. The nature of the charity's operations and principal activities are supporting voluntary sector mental health organisations in influencing mental health practice and policy.

Basis of Accounting

The financial statements have been prepared in accordance with the Statement of Recommended Practice applicable to charities preparing their financial statements in accordance with the Financial Reporting Standard applicable in the UK and Republic of Ireland (FRS 102) issued in October 2019, the Financial Reporting Standard applicable in the United Kingdom and Republic of Ireland (FRS 102), the Charities Act 2011, the Companies Act 2006 and UK Generally Accepted Practice.

The financial statements are prepared on a going concern basis under the historical cost basis of accounting and are presented in sterling £.

As a public benefit entity, Voluntary Sector Mental Health Providers Forum, has applied the public benefit entity 'PBE' prefixed paragraphs of FRS 102.

Tangible fixed assets

Tangible fixed assets are stated at cost and represent amounts expended on capital items exceeding £500.

Depreciation is calculated so as to the write off cost of fixed assets over the estimated useful lives of the assets concerned as follows:

Computer equipment	Over 3 years
--------------------	--------------

Intangible fixed assets

Intangible fixed assets are stated at cost and represent amounts expended on capital items exceeding £500.

Amortisation is calculated so as to the write off cost of fixed assets over the estimated useful lives and their useful lifespans of the assets concerned as follows:

Software	Over 3 years
----------	--------------

Income

Membership income is recognised over the year to which it relates, net of VAT.

Revenue grants are credited to the financial statements when received or receivable, whichever is earlier, unless they relate to a specific future year, in which case they are deferred.

Expenditure

Resources expended are recognised in the year in which they are incurred. Resources expended include attributable VAT which cannot be recovered. Costs are allocated to activities where directly attributable. Support costs are apportioned based on an estimate of staff time spent on each activity.

Governance costs include costs incurred in meeting constitutional and statutory requirements.

1. ACCOUNTING POLICIES (continued)

Fund accounting

The general fund comprises those monies that may be used towards meeting the charitable objectives at the discretion of the Trustees.

The restricted funds are monies raised for, and their use restricted to, a specific purpose, or donations subject to donor-imposed conditions. Expenditure meeting the relevant criteria is charged to this fund.

Taxation

The company is a registered charity and therefore is not liable for income tax or corporation tax on income derived from its charitable activities, as it falls within the various exemptions available to registered charities.

Pension costs

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

Going Concern

The financial statements have been prepared on a going concern basis as the Trustees believe that no material uncertainties exist. The Trustees have considered the level of funds held and the expected level of income and expenditure for 12 months from authorising these financial statements. The budgeted income and expenditure is sufficient with the level of reserves for the charity to be able to continue as a going concern.

Financial instruments

Financial instruments such as loans, accounts payables, accounts receivables and cash are classified either as basic or complex. All financial instruments are initially measured at their fair values at the time the transactions occur. Subsequently all basic instruments are measured at amortised cost and all complex financial instruments are measured at a fair value through the comprehensive income.

Financial instruments held by the charity are classified as follows:

- Financial assets such as cash are held at cost,
- Financial assets such as cash, current asset investments and receivables are classified as loans and receivables and held at amortised cost using the effective interest method,
- Financial liabilities such as bonds and loans are held at amortised cost using the effective interest method.

Judgements and key sources of estimation uncertainty

The following judgements (apart from those involving estimates) have been made in the process of applying the above accounting policies that have had the most significant effect on amounts recognised in the financial statements:

- Depreciation rates for tangible fixed assets,
- Amortisation rates for intangible fixed assets.

VOLUNTARY SECTOR MENTAL HEALTH PROVIDERS FORUM

NOTES TO THE FINANCIAL STATEMENTS

FOR THE YEAR ENDED 31 MARCH 2025

2. INCOMING RESOURCES FROM CHARITABLE ACTIVITIES

	Unrestricted funds 2025 £	Restricted funds 2025 £	Total funds 2025 £	Total funds 2024 £
Grants receivable				
Health and Wellbeing Alliance	-	90,000	90,000	90,000
Health and Wellbeing Alliance Social Care Subgroup Project Access	-	-	-	4,000
Choice Support	-	-	-	141,838
CAF Community Mental Health Transformation	-	-	-	50,000
CPA Additional Work Funding	-	13,230	13,230	40,000
Registered Nursing Home Association	-	5,000	5,000	2,200
Social Investment Business	-	-	-	5,000
Donations and miscellaneous income	1,011	-	1,011	1,500
	1,011	108,230	109,241	330,538
Membership services, conferences and events				
Membership subscriptions	87,407	-	87,407	92,761
	87,407	-	87,407	92,761
Total	88,418	108,230	196,648	423,299

In 2025, of the total income from charitable activities, £1,011 was unrestricted and £108,230 was restricted.

3. INVESTMENT INCOME

	Unrestricted funds 2025 £	Restricted funds 2025 £	Total funds 2025 £	Total funds 2024 £
Bank deposit interest	11,711	-	11,711	13,233

In 2025 all income from investments was unrestricted.

VOLUNTARY SECTOR MENTAL HEALTH PROVIDERS FORUM

NOTES TO THE FINANCIAL STATEMENTS

FOR THE YEAR ENDED 31 MARCH 2025

4. TOTAL RESOURCES EXPENDED

	Direct staff costs £	Direct costs £	Support costs £	2025 Total £	2024 Total £
<i>Charitable activities</i>					
Membership services, conferences and events	75,385	12,667	-	88,052	88,670
Health and Wellbeing Alliance	81,000	9,000	-	90,000	90,000
Access	116,178	4,318	10,413	130,909	115,205
NHS England	-	-	-	-	4,550
CAF Community Mental Health Transformation	-	-	-	-	41,255
CPA Additional Funding	32,852	3,246	3,545	39,643	33,702
Mental Health Sustainability Programme					31,420
Choice Support	29,254	1,025	-	30,279	19,721
Social Investment Business					1,500
Registered Nursing Home Association	5,000	-	-	5,000	5,000
Rethink Mental Illness	1,347	-	150	1,497	-
Total resources expended	341,016	30,256	14,108	385,380	431,023

Total support costs of £14,108 (2024: £25,556) are analysed in Note 5.

5. SUPPORT COSTS

	2025 £	2024 £
Wages and salaries	945	13,945
Governance	11,144	8,274
Premises costs	993	916
Office costs	224	300
IT	802	2,121
	14,108	25,556

Total governance costs of £11,144 (2024: £8,274) are analysed in Note 6.

6. GOVERNANCE COSTS

	2025 £	2024 £
Travel, welfare, and sustenance	3,241	3,426
Governance and Board Meetings	4,088	347
Consultancy and Legal Fees	1,638	2,361
Independent Examination	1,258	1,237
Accounts preparation	919	903
	11,144	8,274

VOLUNTARY SECTOR MENTAL HEALTH PROVIDERS FORUM

NOTES TO THE FINANCIAL STATEMENTS

FOR THE YEAR ENDED 31 MARCH 2025

7. NET OUTGOING RESOURCES BEFORE TRANSFERS

	2025	2024
	£	£
This has been arrived at after charging (excluding VAT):		
Independent Examiner's remuneration	1,258	1,237
Accounts preparation	919	903
	2,177	2,140

In common with many other organisations of our size and nature we use our Independent Examiner to assist with the preparation of the financial statements.

8. STAFF COSTS AND KEY MANAGEMENT PERSONNEL REMUNERATION

	2025	2024
	No.	No.
The average number of persons employed during the year expressed in full time equivalents (35 hours per week) was:		
Number		8
Full time equivalents		8
	2025	2024
	£	£
Staff costs during the year were as follows:		
Wages and salaries	273,933	285,103
Social security costs	25,480	25,624
Pension costs	21,914	22,984
	321,327	333,711

The number of employees who received total employee benefits (excluding employer pension costs) of more than £60,000 is as follows:

	2025	2024
	Number	Number
£60,000-£70,000	2	2
£70,000-£80,000	-	-
£80,000-£90,000	1	1

No other employees earned over this amount (2024: 0). The highest paid staff member received pension contributions in the year of £7,171 (2024: £6,829).

The Charity considers its key management personnel comprise the Trustees and the Chief Executive Officer.

No Trustee received any remuneration in respect of their services (2024: £0). Trustees received expenses reimbursed during the year to the value of £312 in relation to travel costs (2024: £0).

The total amount of employee benefits received by other key management personnel is £54,423 (2024: £102,723).

VOLUNTARY SECTOR MENTAL HEALTH PROVIDERS FORUM

NOTES TO THE FINANCIAL STATEMENTS

FOR THE YEAR ENDED 31 MARCH 2025

9. TANGIBLE FIXED ASSETS

	Computer Equipment £	Total £
Cost:		
At 1 April 2024	8,895	8,895
Additions	-	-
Disposals	-	-
At 31 March 2025	8,895	8,895
Depreciation:		
At 1 April 2024	6,641	6,411
Charge for year	827	827
At 31 March 2025	7,238	7,238
Net Book Value:		
At 31 March 2025	1,657	1,657
At 31 March 2024	2,484	2,484

10. INTANGIBLE FIXED ASSETS

	Software £	Total £
Cost:		
At 1 April 2024	-	-
Additions	-	-
Disposals	-	-
At 31 March 2025	-	-
Amortisation:		
At 1 April 2024	-	-
Charge for year	-	-
At 31 March 2025	-	-
Net Book Value:		
At 31 March 2025	-	-
At 31 March 2024	-	-

VOLUNTARY SECTOR MENTAL HEALTH PROVIDERS FORUM

NOTES TO THE FINANCIAL STATEMENTS

FOR THE YEAR ENDED 31 MARCH 2025

11. DEBTORS

	2025 £	2024 £
Trade Debtors	10,931	6,500
Prepayments	1,095	1,064
	12,026	7,564

All debtors are due within one year.

12. CREDITORS: Amounts falling due within one year

	2025 £	2024 £
Trade Creditors	6,000	3,325
Taxation and social security	-	-
Accruals and Deferred Income	316	83
Other creditors	-	-
	6,316	3,408

13. ANALYSIS OF NET ASSETS BETWEEN FUNDS

	Unrestricted Funds £	Restricted Funds £	Total Funds 2025 £	Total Funds 2024 £
Fixed assets	1,657	-	1,657	2,484
Current assets	379,013	44,198	423,211	596,497
Creditors: amounts falling due within one year	(6,316)	-	(6,316)	(3,408)
	374,354	44,198	418,552	595,573

14. UNRESTRICTED FUNDS

	Balance at 1 April 2024 £	Incoming Resources £	Expenditure £	Transfers £	Balance at 31 March 2025 £
General Funds	362,276	100,129	(88,051)	-	374,354
	362,276	100,129	(88,051)	-	374,354

15. RESTRICTED FUNDS

The income funds of the charity include restricted funds comprising the following unexpended balances of grants to be applied for specific purposes.

	Balance at 1 April 2024 £	Incoming Resources £	Expenditure £	Transfers £	Balance at 31 March 2025 £
Health and Wellbeing Alliance	-	90,000	(90,000)	-	-
Access	160,207	-	(130,910)	-	29,297
Choice Support	30,279	-	(30,279)	-	-
CPA	41,314	13,230	(39,643)	-	14,901
Rethink Mental Illness	1,497	-	(1,497)	-	-
Registered Nursing Home Association	-	5,000	(5,000)	-	-
	233,297	108,230	(297,329)	-	44,198

The VCSE Health and Wellbeing Alliance is a key element of the VCSE Health and Wellbeing Programme; a partnership between voluntary sectors and the care system to provide a voice and improve the health and wellbeing for all communities.

Access funded a three-year Enterprise Development Programme (which ended on 30th September 2022) to support the small and medium sized enterprise sector in its diversification of income streams. The Association has been selected to deliver this programme as the main mental health sector partner. Access provided further funding to continue this programme from October 2022 to March 2024, and we have received agreement to carry over our work on enterprise development and our support for smaller organisations with the funding.

Choice Support funded the Association with £50,000 in 2023/24 for the Refuge Mental Health Research Project.

National Care Forum, on behalf of the Care Provider Alliance, are sub-contracting The Association alongside 9 other CPA partner organisations, with funding provided by the Department of Health and Social Care, to support policy priorities through the collective representation of the health and social care sector.

Care Provider Alliance (CPA) Additional Funding covers grants from the Department of Health and Social Care and others to the CPA programme lead, which is the National Care Forum, and they work with the 9 other CPA partners including us.

The funding from the Registered Nursing Home Association is funding for a Digital Social Care membership grant and for a digital social care project along with four other organisations.

VOLUNTARY SECTOR MENTAL HEALTH PROVIDERS FORUM

NOTES TO THE FINANCIAL STATEMENTS

FOR THE YEAR ENDED 31 MARCH 2025

16. LIABILITY OF MEMBERS

The charity is constituted as a company limited by guarantee. In the event of the company being wound up members are required to contribute an amount not exceeding £1.

17. RELATED PARTY TRANSACTIONS

All the Directors hold senior positions at organisations that are either members of The Association or related non-provider organisations. Membership fees are paid to the Forum under the same terms as for all members.

The Association holds the co-ordination role for the VCSE Health and Wellbeing Alliance funded by the Department of Health and Social Care. The Association receives all funding and makes payments to the partners, these are:

Mental Health Foundation
Mind (National)
National Survivor User Network (NSUN)
Rethink Mental Illness
Central for Mental Health (CMH)

The Finance Officer, Jyoti Shah, is the wife of the Treasurer, Sanjay Shah. The Finance Officer received gross salary of £12,778 in the year and employer pension contributions of £1,022 (2024: gross salary £12,168 and employer pension contributions of £974). The Trustees are satisfied that the salary is at or below market rate for similar roles in the area.

18. TAXATION

By virtue of s.478 Corporation Tax Act 2010, the charitable company is exempt from Corporation Tax.

19. FINANCIAL INSTRUMENTS

	2025 £	2024 £
The Charity's financial instruments may be analysed as follows		
Financial Assets		
Financial Assets Measured at Cost		
Cash and Cash Equivalents	411,185	588,933
Financial Assets Measured at Amortised Cost		
Trade Debtors	10,931	6,500
Accrued income	-	-
Total Financial Assets	422,116	595,433
Financial Liabilities		
Financial Liabilities Measured at Amortised Cost		
Trade Creditors	6,000	3,325
Other Creditors	319	83
Total Financial Liabilities	6,319	3,408

VOLUNTARY SECTOR MENTAL HEALTH PROVIDERS FORUM

NOTES TO THE FINANCIAL STATEMENTS

FOR THE YEAR ENDED 31 MARCH 2025

20. OPERATING LEASES

The Charity had no operating lease commitments as at 31 March 2025 (2024: Nil).

21. CAPITAL COMMITMENTS

The Charity had no capital commitments as at 31 March 2025 (2024: Nil).

22. ANALYSIS OF CHANGES IN NET DEBT

	2024	Cash flows	2025
	£	£	£
Short and long term loan liabilities	-	-	-
Total loan liabilities	-	-	-
Cash and cash equivalents	588,933	(177,748)	411,185
Change in debt resulting from cashflows	588,933	(177,748)	411,185