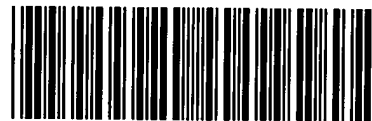


Registered company number: 05515628

Registered charity number: 1128154

**MIGHTY MEN OF VALOUR  
A COMPANY LIMITED BY GUARANTEE  
FINANCIAL STATEMENTS  
FOR THE YEAR ENDED 31 JULY 2024**

SATURDAY



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08/03/2025

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COMPANIES HOUSE

BizNav Chartered Accountants  
36 Scotts Road  
Bromley  
Kent  
BR1 3QD

**Mighty Men Of Valour**  
**Director's Report and Financial Statements**  
**For the Year ended 31 July 2024**

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Schedule of Resources Expended	8

**Mighty Men Of Valour  
Company Information  
For The Year Ended 31 July 2024**

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<b>Directors</b>	Mr Frederick Clarke Mr Lee Townsend Mr Maxine Benjamin Mr Anton Richards
<b>Company Number</b>	05515628
<b>Registered Office</b>	Square Root Business Centre Windmill Road Croydon CR0 2XQ
<b>Accountants</b>	BizNav, Chartered Accountants 36 Scotts Road Bromley BR1 3QD
<b>Bankers</b>	Barclays 1 Churchill Place London E14 5HP

**Mighty Men Of Valour  
Company No. 05515628  
Directors' Report For The Year Ended 31 July 2024**

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The directors present their report and the financial statements for the year ended 31 July 2024.

**Directors**

The directors who held office during the year were as follows:

Mr Frederick Clarke

Mr Lee Townsend

Mr Maxine Benjamin

Mr Anton Richards

Mr Michael Forrest    Resigned 02/06/2024

**Statement of Directors' Responsibilities**

The directors are responsible for preparing the Directors' Report and the financial statements in accordance with applicable law and regulations.

Company law requires the directors to prepare financial statements for each financial year. Under that law the directors have elected to prepare the financial statements in accordance with United Kingdom Generally Accepted Accounting Practice (United Kingdom Accounting Standards and applicable law). Under company law the directors must not approve the financial statements unless they are satisfied that they give a true and fair view of the state of affairs of the company and of the profit or loss of the company for that period. In preparing the financial statements the directors are required to:

- select suitable accounting policies and then apply them consistently;
- make judgments and accounting estimates that are reasonable and prudent;
- prepare the financial statements on the going concern basis unless it is inappropriate to presume that the company will continue in business.

The directors are responsible for keeping adequate accounting records that are sufficient to show and explain the company's transactions and disclose with reasonable accuracy at any time the financial position of the company and enable them to ensure that the financial statements comply with the Companies Act 2006. They are also responsible for safeguarding the assets of the company and hence for taking reasonable steps for the prevention and detection of fraud and other irregularities.

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

**Political and Charitable Donations**

Political and charitable donations were £2,152.00

**Small Company Rules**

This report has been prepared in accordance with the special provisions relating to companies subject to the small companies regime within Part 15 of the Companies Act 2006.

On behalf of the board

Frederick Clarke

Frederick Clarke (Mar 5, 2025 14:25 GMT)

Mr Frederick Clarke

Director

05/03/2025

**Mighty Men Of Valour  
Accountants' Report  
For The Year Ended 31 July 2024**

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I report on the accounts of the Charity for the year ended 31 July 2024, which are set out on pages 5 to 9.

**Respective responsibilities of directors and examiner**

1. The charity's directors are responsible for the preparation of the accounts. The charity's directors consider that an audit is not required for this year under section 144(2) of the Charities Act 2011 (the 2011 Act) and that an independent examination is needed.
2. Having satisfied myself that an audit is not required, it is my responsibility to:
  - examine the accounts under section 145 of the 2011 Act;
  - to follow the procedures laid down in the general Directions given by the Charity Commission under section 145(5)(b) of the 2011 Act; and
  - to state whether particular matters have come to my attention.

**Basis of independent examiner's report**

My examination was carried out in accordance with the general directions given by the Charity Commission. An examination includes a review of the accounting records kept by the charity 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 directors concerning any such matters. The procedures undertaken do not provide all the evidence that would be required in an audit and consequently no opinion is given as to whether the accounts present a 'true and fair view' and the report is limited to those matters set out in the statement below.

**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 130 of the 2011 Act; and
  - to prepare accounts which accord with accounting records and comply with the accounting requirements of the 2011 Act, and with the methods and principles of the Statement of Recommended Practice: Accounting and Reporting by Charities, have not been met; or
1. to which, in my opinion, attention should be drawn in order to enable a proper understanding of the accounts to be reached.

**Name** Shahzad Fayyaz

**Organisation** BizNav, Chartered Accountants

**Relevant professional qualification or body** Association of Chartered Certified Accountants

**Address** 36 Scotts Road, Bromley, Kent, England, BR1 3QD

**Date** 03 December 2024

Signed

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BizNav Chartered Accountants

05/03/2025

BizNav, Chartered Accountants  
36 Scotts Road  
Bromley  
BR1 3QD

**Mighty Men Of Valour  
Profit and Loss Account  
For The Year Ended 31 July 2024**

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	Notes	2024 £	2023 £
<b>TURNOVER</b>		560,494	496,187
Cost of sales		-	(300)
<b>GROSS PROFIT</b>		560,494	495,887
Administrative expenses		(572,643)	(442,808)
Other operating income		690	-
<b>OPERATING (LOSS)/PROFIT</b>	<b>3</b>	(11,459)	53,079
Other interest receivable and similar income		820	188
<b>(LOSS)/PROFIT FOR THE FINANCIAL YEAR</b>		(10,639)	53,267

The notes on pages 6 to 7 form part of these financial statements.

**Mighty Men Of Valour  
Balance Sheet  
As At 31 July 2024**

		2024		2023	
	Notes	£	£	£	£
<b>FIXED ASSETS</b>					
Tangible Assets	5		400		231
			400		231
<b>CURRENT ASSETS</b>					
Debtors	6	59,855		75,464	
Cash at bank and in hand		78,713		72,617	
		138,568		148,081	
<b>Creditors: Amounts Falling Due Within One Year</b>	7	(3,089)		(1,794)	
<b>NET CURRENT ASSETS (LIABILITIES)</b>			135,479		146,287
<b>TOTAL ASSETS LESS CURRENT LIABILITIES</b>			135,879		146,518
<b>NET ASSETS</b>			135,879		146,518
Profit and Loss Account			135,879		146,518
<b>SHAREHOLDERS' FUNDS</b>			135,879		146,518

For the year ending 31 July 2024 the company was entitled to exemption from audit under section 477 of the Companies Act 2006 relating to small companies.

The members have not required the company to obtain an audit in accordance with section 476 of the Companies Act 2006.

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

These accounts have been prepared in accordance with the provisions applicable to companies subject to the small companies' regime.

On behalf of the board

Frederick Clarke

Frederick Clarke (Mar 5, 2025 14:25 GMT)

Mr Frederick Clarke

Director

05/03/2025

The notes on pages 6 to 7 form part of these financial statements.

# Mighty Men Of Valour

## Notes to the Financial Statements

### For The Year Ended 31 July 2024

#### 1. General Information

Mighty Men Of Valour is a private company, limited by guarantee, incorporated in England & Wales, registered number 05515628 and registered charity number 1128154. The registered office is Square Root Business Centre, Windmill Road, Croydon, CR0 2XQ.

#### 2. Accounting Policies

##### 2.1. Basis of Preparation of Financial Statements

The financial statements have been prepared under the historical cost convention and in accordance with Financial Reporting Standard 102 section 1A Small Entities "The Financial Reporting Standard applicable in the UK and Republic of Ireland" and the Companies Act 2006.

##### 2.2. Turnover

Turnover shown in the surplus and deficit account represents amounts received which are wholly attributable to the company's main activities during the year.

##### 2.3. Tangible Fixed Assets and Depreciation

Tangible fixed assets are measured at cost less accumulated depreciation and any accumulated impairment losses. Depreciation is provided at rates calculated to write off the cost of the fixed assets, less their estimated residual value, over their expected useful lives on the following bases:

Fixtures & Fittings	20% Straight Line
Computer Equipment	33% Straight Line

##### 2.4. Taxation

The company is a registered Charity and is not liable to taxation on non-trade income.

#### 3. Operating (Loss)/profit

The operating (loss)/profit is stated after charging:

	2024	2023
	£	£
Bad debts	5,149	1,665
Depreciation of tangible fixed assets	332	416

#### 4. Average Number of Employees

Average number of employees, including directors, during the year were 68 (2023: 87)

#### 5. Tangible Assets

	Fixtures & Fittings	Computer Equipment	Total
	£	£	£
<b>Cost</b>			
As at 1 August 2023	-	6,062	6,062
Additions	501	-	501
As at 31 July 2024	501	6,062	6,563
<b>Depreciation</b>			
As at 1 August 2023	-	5,831	5,831
Provided during the period	100	232	332
As at 31 July 2024	100	6,063	6,163
<b>Net Book Value</b>			
As at 31 July 2024	401	(1)	400
As at 1 August 2023	-	231	231



**Mighty Men Of Valour**  
**Notes to the Financial Statements (continued)**  
**For The Year Ended 31 July 2024**

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**6. Debtors**

	<b>2024</b>	<b>2023</b>
	<b>£</b>	<b>£</b>
<b>Due within one year</b>		
Trade debtors	38,271	57,344
Other debtors	18,037	17,385
Wages Payable	3,547	-
Other taxes and social security	-	735
	<u>59,855</u>	<u>75,464</u>

**7. Creditors: Amounts Falling Due Within One Year**

	<b>2024</b>	<b>2023</b>
	<b>£</b>	<b>£</b>
Trade creditors	288	109
Other taxes and social security	402	-
Accruals & deferred income	1,583	1,685
Pension payable	816	-
	<u>3,089</u>	<u>1,794</u>

**Mighty Men Of Valour**  
**Trading Profit and Loss Account**  
**For The Year Ended 31 July 2024**

	<b>2024</b>		<b>2023</b>	
	<b>£</b>	<b>£</b>	<b>£</b>	<b>£</b>
<b>TURNOVER</b>				
Sales		560,494		496,187
<b>COST OF SALES</b>				
Other direct costs	-		300	
		-		(300)
<b>GROSS PROFIT</b>		560,494		495,887
<b>Administrative Expenses</b>				
Wages and salaries	320,200		297,135	
Employers NI	9,986		4,411	
Employers pensions - defined contributions scheme	4,163		2,398	
Staff training	1,688		4,454	
Travel and subsistence expenses	1,034		847	
Rent	5,760		7,180	
Admin, Support Work & Mentoring Support	172,520		67,097	
General Expenses	2,011		1,887	
Computer and IT consumables	3,826		4,620	
Insurance	1,883		1,619	
Printing, postage and stationery	601		1,205	
Advertising and marketing costs	1,590		1,064	
Telecommunications and data costs	1,598		2,338	
Accountancy fees	1,560		788	
Consultancy fees	36,200		42,000	
Bank charges	390		154	
Charitable donations	2,152		1,530	
Bad debts written off	5,149		1,665	
Depreciation of fixtures and fittings	100		-	
Depreciation of computer equipment	232		416	
		(572,643)		(442,808)
<b>Other Operating Income</b>				
Other income - contributing to other operating income	690		-	
		690		-
<b>OPERATING (LOSS)/PROFIT</b>		(11,459)		53,079
<b>Other interest receivable and similar income</b>				
Bank interest receivable	820		188	
		820		188
<b>(LOSS)/PROFIT FOR THE FINANCIAL YEAR</b>		(10,639)		53,267

**MIGHTY MEN OF VALOUR (MMOV)**  
**ANNUAL REPORT AND FINANCIAL STATEMENTS FOR THE YEAR ENDED 31ST JULY 2024**  
Registered Address: 14 Willis Road, Croydon, CR0 2XX (as of this date)

**Mighty Men of Valour is a registered Charity**  
REGISTERED CHARITY NO: 1128154 REGISTERED COMPANY NO: 05515628  
Mighty Men of Valour (MMOV) was established in 2002 and became a registered Charity on  
19th February 2009 - Charity Number: 1128154

**Mighty Men of Valour Charitable Objectives:**

- To relieve the needs of men with a view to improving their conditions of life.
- To advance education and relieve need and unemployment of men, women, and young people by providing support, education and training.
- To preserve and protect public health.
- To advance the mental and moral development and improvement of boys, young men, ex-offenders, those affected by drugs or those experiencing economic or social disadvantage.
- To advance in life and relieve needs of young people, through providing support and activities which develop their skills, capacities and capabilities to enable them to participate in society as mature and responsible individuals.
- To promote equality and diversity and good relations between persons of different racial groups in society, so that the beneficiaries are able to realise their full potential, help meet their needs and to participate more fully in society.

**Mighty Men of Valour a Company Registered** in England No. **05515628**

**Company type:**

Private Limited Company by guarantee without share capital use of 'Limited' exemption.

**Awards & Nominations:**

- **Nominated:** Croydon Business Resilience Awards **2021**
- **Nominated:** BAME Apprenticeship Awards **2020**
- **Winner:** All ages Family Safety Challenge **2018**
- **Winner:** Croydon Mayor's Civic Awards - **Civil Life Award 2013**

**Annual report (include statement of purpose)**

Mighty Men of Valour (MMOV) has been established in Croydon for over 18 years. It became a registered company incorporated on 21st July 2005 and a registered Charity in July 2009.

Our service delivery has developed over the years. Initially we supported men, fathers and their families in the community through different support programmes. Our support has now expanded to providing mentoring school in schools to providing respite/outreach support to children with disabilities. We would like this support to extend to supporting adults with learning difficulties and providing personal care (domiciliary care) where required.

**Office Location and Description:**

- Our office is located at **Square Root Business Centre, 102-116 Windmill Road, Croydon, CR0 2XQ.**
- Our office is on the first floor.
- We have access to two Training Rooms and a Business Suite on the ground floor.
- We also have an adjacent Room for Supervision and Staff Appraisal meetings again located on the ground floor (if and when required).
- There is a staff canteen space for breaks and lunch.
- There is a short-stay car parking for visitors
- Reception and toilet facilities for the staff and visitors.

**Our vision of the organisation's role within the community:**

We have a clear vision and direction for our organisation.

Over the twenty years, MMOV has supported people in our community. We then supported families and those at risk of offending to prevent broken families and to improve the future outcomes of young people. This led to us supporting young people and their families in schools, and now those children with learning disabilities.

As our children with learning disabilities get older, they transition to adult care. As we have supported these young people for years, supporting them as they transition to adult care is a natural progression for us.

Once registered with the CQC, we can continue supporting these young people with learning difficulties in the community, providing Respite / Outreach support and helping them in their homes by providing personal care where necessary.

**How does our organisation serve the people we care for?**

We presently support our community by providing social care support to young people aged 5 to 17 in various boroughs in London. We also provide respite/outreach support to children with learning disabilities in Croydon, Hackney and Sutton.

**Our respite/outreach support:**

Since 2012, we have provided support for Children with Disabilities (CWD) aged 5 to 17 years old in Croydon. In the past four years, since 2020, to CWD in Hackney and the City of London. We now have started providing support to CWD in Sutton.

The (CWD) have a range of conditions, such as:

- Learning difficulties
- Autistic spectrum conditions
- Sensory impairments
- Physical Disability

### **Our directors:**

We have three directors:

- Frederick Clarke - 31 May 2011 (18 yrs in office)
- Maxine Benjamin –08 April 2014 (10yrs in office)
- Anton Richards - 01 June 2017 (8yrs in office)

All the directors are trustees except Frederick Clarke who is not a Trustee.

We are presently looking to recruit new Trustees/Directors for MMOV. All the trustees/directors (except Frederick Clarke) are unpaid volunteers. They have supported our organisation to support young people and their families in the community over 10 years.

We are now looking to extend our delivery service to Health and Social Care arena. Only Maxine Benjamin is qualified in this area because she is a qualified Social Worker.

### **Registered Manager – (Regulation 7)**

#### **Remi Adeyemi**

- Diploma in Leadership and Management Level 5
- Bachelor of Art with Honours in Healthcare Management
- Safeguarding Children Level 1
- Risk Assessment Level 1
- Care Certificate (Standards 1-15)
- Oliver Mc Gowan Mandatory Training on Learning Disability and Autism part 1, and,
- Designated Safeguarding Lead Training.

Remi has worked with our organisation for over a year and started as a Deputy Manager to obtain the experience in our area of expertise. Remi progressed to Manager and plans become our Registered Manager.

Remi is responsible services users, person-centred care, and the recruitment of qualified, competent, skilled and experienced with the support of Marcus (see below), and for care plans, audits, risk assessment and Inspections with the support of Maria (see below).

Remi is responsible for ensuring all the audits, risk assessment, mock inspections, stakeholder's surveys, CQC inspections are conducted and recorded using the QCS Compliance management, Bright HR and/or on the Nourish care management software.

Remi is also responsible for Staff Training Matrix, staff recruitment, qualifications, competence, skills experience to deliver person-cared care and to ensure DBS, references, Staff Induction, Supervisions, Appraisals and CPD are completed and saved securely.

### **Nominated Individual – (Regulation 6)**

#### **Frederick Clarke – Director & Founder of MMOV**

- LLB Business Law Degree
- Finishing his Level 5 Diploma in Leadership and Management in Health and Social Care.

Frederick Clarke is the founder of the organisation. A director and has a Law Degree. He is presently completing his Level 5 Diploma in Leadership and Management in Health and Social Care.

#### **Deputy Care Manager:**

##### **Maria Ikongwu**

- Basic Psychiatric Nursing,
- Care certificate (Standards 1-15)
- Maria has two years domiciliary care experience in the UK
- Three years nursing experience in Nigeria and is preparing to convert her Nigeria Nursing qualification to UK status.
- Maria will be working towards converting her Nigeria nursing qualification to a UK nursing qualification and is required to complete OET, CBT and OSCE exams within the next two to three years.

Maria is responsible with Remi s responsible for services users, person-centred care, and the management of qualified, competent, skilled and experienced and for care plans, audits, risk assessment and inspections.

Maria is also responsible for Staff Training Matrix, and ensuring that staff are competence, skills experience to deliver person-centred care and to ensure Staff Induction, Supervisions, Appraisals and CPD are completed.

Maria will be responsible for stakeholders' surveys, using the QCS Compliance management, the Nourish care management software. RotaCloud for staff rotas management, elements of Bright HR.

#### **Deputy Nominated Individual Manager:**

##### **Marcus Francis**

- Bachelor of Art with Honour in Business Management.
- Recruitment Management Level 4,
- Safe Recruitment in Education, Level 3 Award in
- Emergency First Aid at Work (RQF), Safeguarding Children Level 1
- Risk Assessment Level 1
- Access to Higher Education Diploma (Computing) - Recruitment and Payroll,
- He has started his Level 5 Diploma in Leadership and Management in Health and Social Care apprenticeship.

Marcus has worked with our organisation since 2022 and is qualified, competent, skilled and experienced in Business Management and recruitment and is presently undertaking a Level 5 Diploma in Leadership and Management in Health and Social Care apprenticeship. Marcus will be responsible for using our Bright HR software to record, timesheets, agency staff hours, Staff Training Matrix, Staff recruitment, Qualifications, qualifications, competence, skills and experience, DBS, references, right to work and Staff Induction.

**Accounts Manager:**

**John Sarfo**

- Certificate in Accounting (QCF), AAT Level 2, AAT Level 3 Diploma in Accounting (QCF)

John has been worked with our organisation since 2014 and is qualified, competent, skilled and experienced in Accounts, Tax and Payroll. He uses our Xero software for all our accounting needs.

**Service User Liaison Officer:**

**Renee Robinson**

- HR Support Level 3

Renee responsibility is to conduct service users feedback and collects this for our use. Her role is to contact the service users every three weeks for an external check-in with how the support and care is processing. Renee collects, records and informs Frederick or Remi of any complaints and compliments which we then action.

Renee will also feedback to service user of an actions have completed and to record how the company was resolved or what further action needs to be taken. This is done viable a spreadsheet, but this process may later be included within the Nourish or QCS software systems and JotForm also user to obtain stakeholder's feedback.

**Staff Workforce Composition: (Regulation 18: Staffing)**

We have approximately 50 part-time staff working with Children with Disabilities (CWD) throughout the London Borough, who either require 1:1 support or 2:1 support.

We pay our staff weekly, above the London Living Wage, with the additional holiday. All staff have a Contract of Employment, and we pay pension contributions for all staff. We have various staff who are all ages and nationalities.

**Our volunteers:**

Our volunteers do not provide any care support but may occasionally provide admin/office support.

**Apprenticeship Programme:**

MMOV is both proud and pleased to have been able support young apprentices within our organisation since February 2019. We have had over six apprentices, over six years, who have successfully completed their apprenticeships within our organisation. Our present apprentice is training as a Level 3, Business Administrator.

**Other Stakeholders: (Regulation 19: Fit and proper persons employed)**

- Ladbroke Insurance: Charity Insurance & Public Liability
- BizNav: - Chartered Accountants & Registered Auditors - [www.biznavca.co.uk](http://www.biznavca.co.uk)

**Other Stakeholders & Services:**

- QCS: - QCS – CQC Compliance Management Tool
- Nourish: - Nourish Care
- Bright HR (Peninsula): - HR System for SMEs | Bright HR
- Xero Accounting Software: - Xero Accounting Software
- Caredemy: - Health & Social Care Courses- Caredemy
- JotForm: –Jotform is a powerful online form builder that makes it easy to create robust forms and collect important data. Jotform
- RotaCloud: - RotaCloud – Staff Rota Software

**Nourish software:**

- allows us to assess, monitor and review our care plans, change care plans, add personal preferences, and meets our service user's needs. **9(1)**
- Nourish can be used to record, take photos or video and to communicate this information to other staff (through handovers) to monitor the care and support to service users.
- allows us to record incidences, create a PBS plan to record any behaviour challenges, as well as create an incident report. We can also see how, when and how resolved the incident report and what action had been taken to resolve it.
- can be used to assess, record and monitor how we listen and engage our service users, and those people close to them who can make decisions about their care, so their care plan is person centred. Each Service User is encouraged to apply themselves to their full potential and make personal choices related to care, support and lifestyles they choose to lead which can also be added to their care plan.
- allows us to record our service users consent and ensure that our service user has consented to all the care we provide. We can record at "the point of care" if medication, or an activity, or an interaction has been consented to or refused. We can also record why consent was refused and record the reason given. We can create an alert if we feel that the refusal will compromise our duty of care, so that we notify any relevant family or professional, whilst at the same time allowing our service user to have autonomy over the decision that they have made.
- enables us to design, carry out, collaboratively those relevant people to assess the needs and preferences to achieve the desired outcomes for our service user. **9(3)(a)** and **9(3)(b)**



- enables us to record the discussions with family, friends or healthcare professionals, the care or treatment choices available to their service user and evidence this on their care plan.
- can also through their 'Circle of Care' and their 'Family Portal' assist relevant person, to make decisions, have to have the opportunities to manage their service user's care, to whatever extent they need, once they have been given consent to do so.  
**9(3)(d), 9(3)(e) and 9(3)(f)**
- enable us to record and evidence all discussions that are held with a competent health care professional or other person, including the risks and benefits involved in this course of care or treatment. **9(3)(c).** and enabling family, friends to be informed. **9(3)(g)**
- enables us to record and monitor the nutritional and hydration needs, to meeting the wellbeing of our service users, and there are specific care plans in which are included within the software to record, assess, and monitor the fluid and food intake of our service users. **9(3)(i)**
- enables us to act in accordance with **the Mental Capacity Act 2005** and/or **the Mental Health Act 1983**, the Court will appoint an Independent mental capacity advocate (IMCA), to make best interest's decision on the service user's behalf.
- enables us to develop effective behavioural support plans for our service users.

**Our service is: safe, effective, caring, responsive and well-led**

**Safe Service: We do this by:**

- Employing Service Managers who have completed NVQ qualifications up to NVQ Level 5 in Leadership and Management or in the process of completing this course.
- Making sure our staff are clear about our Vision, Mission Statement, Values and Code of Conduct of our organisation.
- Using Safer recruitment processes to ensure appropriate background checks, e.g., DBS, references, and employment history have been completed, period to staff delivering care.
- Recruiting ample and diverse group of carers, so that we increase the opportunity to match individuals well and who are fully aware of the needs of the individual's they support and ensuring staffing levels are always adequate.
- Employing a team of qualified, skilled, competent and experienced staff who are committed to always providing the best possible care and service, at all times through an assessment-based processes where we match appropriate skilled staff to the needs of our service users.
- Ensuring all staff receive a comprehensive induction in line with the Skills for Care Tool Kit.
- Ensuring our induction, training and monitoring is reinforced throughout our practice and our service users' needs are respected regardless of their age, disability, gender, gender identity, race, religion or belief and sexual orientation.
- Ensuring our Registered Manager undertakes regular Supervision, Appraisal, Observations and reviews of care delivered by our support workers/care to ensure that our staff are providing the best quality support in a person-centred way.

- Ensuring our staff through our staff meetings, supervision, appraisals, shadowing, coaching and mentoring are supported to evaluate our service users support to identify any risk factors that may require additional support or intervention and to notify the service users and their carers where necessary and to ensure only those staff remain in our service.
- Ensure staff are trained in safeguarding procedures, policies and procedures and update their skills through CPD, Training, and personal development which are regularly discussed and reviewed during Staff Supervision and Staff Appraisals.
- Developing person-centred care plans that are unique to our service users.
- Undertaking a comprehensive risk assessment of our service user's needs, and this is recorded via our Nourish and QCS software.
- Performing a risk assessment for every activity our service user undertakes and recorded this information on our Nourish and QCS software.
- Encouraging safe risk taking by our service users, so they retain their independence.
- Using our Nourish software to
- Ensuring information is available to all staff for safe handover which retains confidentiality of the service users through our Nourish software and to ensure that all information regarding the safety and treatment to our service users is always available.
- Ensuring that where there are shift changes there is sufficient suitably qualified, competent, skilled and experience staff are available to support our service users and that our service users are always safe.
- Offering Person-Centred care by conducting a full assessment of our service users' needs, developing an individualised care plan according to identified needs, and allowing service users to be fully informed and participate in the decisions concerning their care.
- Ensuring medicines are appropriately prescribed, administered, supplied with enough and reconciled in line with current national with the use of E-MAR charts and recorded using our care system software.
- Ensuring where personal care is delivered that our staff at all times prevent and control the spread of infection and show that all reasonable steps have been taken to ensure the health and safety of our service user and to manage any risks that may arise during support or care.
- Have a zero-tolerance approach to abuse, unlawful discrimination, neglect
- degrading treatment, unnecessary or disproportionate restraint or the deprivation of liberty.
- Ensuring our staff are support and activity encouraged to record and review comments about the service and listen to ideas on how safe working practices can be improved. As well as records and all incidents and near misses are recorded and this information is used to prevent further incidents and to improve the quality of our service.
- Being quickly identify if care or support workers performance drops below the standard required and being proactive and decisive in taking any corrective action necessary.
- Ensuring our support workers in maintaining service user confidentiality and safety in line with our Data Protection, GDPR, Safeguarding and Whistleblowing Policy.
- Ensuring that the care and support provided is flexible to respond to the changing needs or requirements of the service user, providing openness, transparency, listening and responding to feedback which protects them from any form of discrimination.

- Ensuring where we are supporting a service user in their own home or in the community, we make every effort to make sure that the equipment they use, whether it is provided by us or not, is clean, safe and suitable for use.

**Effective: We do this by:**

- Conducting Personal Needs Assessments to ascertain our Service Users physical, mental health and social needs holistically, and to ensure their care, treatment and support is delivered in line with legislation, standards and evidence-based guidance to achieve effective outcomes for them.
- Conducting Person-Centred Care Plans, where we ensure there is no discrimination or bias when making care and treatment decisions. This includes nutrition and hydration needs (including those related to culture and religion).
- Carefully monitor information about the outcomes of Service User's care treatment and activities to improve their outcomes and to ensure we allocated the right staff with the right skills, knowledge and experience to our service users to achieve those desired outcomes.
- Supporting Service Users to maintain independence and to maximising the individual's capacity to be mobile and provide self-care to manage their own health, care and wellbeing needs.
- Ensuring our staff have completed the Care Certificate as required by CQC and other Mandatory training such as Safeguarding, Risk Assessment, and First Aid.
- Ensuring where required staff are trained in Moving and Handling, Food Hygiene, Infection Prevention and Control, Recording and Reporting Complaints, Compliments, and GDPR.
- Ensuring our Service Users will receive consistent, coordinated, person-centred care and support when they use our service, or are moved between different services through the use of our care system software and partnership working.
- Using care system software being able to plan, track and monitor a consistent coordinate delivery of our service, seven days a week, and this is monitored and recorded using our Nourish Care system to help us constantly improving our service user's outcomes.
- Ensuring our service users consent is always obtained before any support or treatment is undertaken.
- Ensuring we embraced the 6 Cs recommended by NHS England by providing exceptional care with compassion, highly competent, excellent communication, courage and commitment to excellence.

**Caring service: We do this by:**

- Providing a service that is safe, caring, effective and responsive to the needs of the Service Users, to safeguard and support their health and well-being to a high standard.
- Employing staff who are skilled and experienced delivering support with kindness, dignity, respect and compassion and when needed, to provide emotional support, respecting the choices and decisions of our service user(s).

- Monitoring, observing and supervising our staff to ensure that they deliver care with kindness, dignity, respect and compassion.
- Ensuring we involve listening and engaging our Service Users, and the people close to them, in the decisions about their care, through their Person-Centred Care Plan; and each Service User is encouraged to apply themselves to their full potential and make personal choices related to care, support and lifestyles they choose to lead.
- Ensuring that Service Users are healthy, happy and able to achieve their health goals by enjoying their day-to-day activities, promoting their social and emotional well-being, regardless of any health limitations, changing needs or disability, strive for independence, and an opportunity to successfully contribute within their community/society.
- Working in partnership with Service Users, and providing opportunities for families to express their views, and influencing how the service is run and developed through informed choice, to enhanced quality, and maximising our Service Users satisfaction.
- Safeguarding vulnerable adults and young people we ensure that our Service User's safety is of paramount importance and that Service Users are always protected from abuse and avoidable harm.
- Listening and engaging with our service users, respecting their choices and responding to changing their needs,
- Providing continuity for families through flexible, regular, planned care and emergency support.
- Ensuring that staff are highly skilled and trained so that service users and their families have confidence in their skills and quality of care
- Ensuring our staff continually monitor and audit the quality of the service.
- Service users have the right to be listened to and encouraged to be fully involved in all aspects of their care and support to ensure their support is tailored to them.
- Ensuring our support and carers workers maintaining service user confidentiality and safety in line with our Data Protection, GDPR, Safeguarding and Whistleblowing Policy and any sharing of information in line with GDPR and protected/encrypted software, so we can protect the privacy of our service user's information and data.

**Responsive: We do this by:**

- Having a Key Worker for each Service User who will be responsible for make sure the information about our service user is recorded accurately and that their wishes are followed and who are responsive to their needs.
- Providing integrated care service that meets the needs of the community within a community setting or a Service User's home.
- Always listen to the concerns and needs of our Service Users, and with their consent, consult other professionals such as GP, social workers, or family or friends.
- Delivering services either in the comfort of the Service Users' home or providing activities in the community which are appropriate to the needs of our Service Users.
- Ensuring staff can meet the information and communication needs our Service Users by the use of Makaton, PECs, Sign Language, or through Story books or handheld devices; and this information is recorded using our care system software.

The level of support we provide is determined following an assessment and is usually for 1:1 or 2:1 support, depending on the young person's needs. All CWD's are allocated a Key Worker who conducts regular reviews with the family. Our service gives us the opportunity to support service users outside of the community. They will receive regular visits from trained care workers who can support them in the care that they need.

#### **Statement of Purpose:**

**This is the service we will provide for adult service users which requires CQC registration because it is a regulated activity is:**

- Outreach / Respite support to adults with learning difficulties, and
- Personal Care (Domiciliary Care).

#### **Outreach / Respite support to adults with learning difficulties.**

The Outreach/Respite service provides support for service users with a learning disability, autism, behavioural, mental health, or complex care needs. This may require 1:1 or 2:1 support package of care, for specific hours, and days during the week. This bespoke support is similar to a befriending service which provide respite support outside in the community but will also allow us to provide care and support within their home.

It is because our service user may want the support to take place on occasions within their home is one of the reasons we are seeking to be registered with the CQC. Any care or support within our service users' home may constitutes personal care and therefore come under the umbrella of a regulated activity which needs to be registered with the CQC.

Even though our service users can still access the community, to prevent social exclusion, promote independence, and provide families with some respite care, any care conducted in our service users home, will be considered to be personal care which is a regulated activity and needs to be registered with the CQC.

We have also noticed that more local authorities are requesting that service providers are registered with the CQC to prevent any confusion or contravention of this regulation.

#### **Personal (domiciliary) care service**

As we intend to support our service users in the home, we will have to register as a provider of personal care.

As we must register as a provider of personal care, to support our service users, we decided that this should include domiciliary if and when required.

This would enable us to provide bespoke care to service users within their own homes and if they required any additional personal care support, we would have qualified, competent, skills and experiences staff to support their care needs and preferences.

Our Registered Manager will review all referrals and consider whether we can meet their required level of support needs and whether we have suitable staff to support their needs

Once we have undertaken all the initial, personal care needs assessments we will decide with the service user and their family if our service is the right service for them. If the service user, their family or person who is responsible to make legal decision on their behalf is happy to use our service, then preparation is made to create their person-centred care plan and to make preparation our staff to meet our service user and become familiar the care they require.

**Our mission statement:**

“To transform people's lives for a better future”.

**Vision:**

To provide outstanding care and support services in a safe, healthy, warm and friendly environment and to improve the quality of life for everyone involved.

**Values:**

To make a difference through passionate care, support, education and training.

**Principles:**

Our principles are to empower our service users to take an active part in the development and evaluation of our services.

**Culture:**

**We believe that by embodying a culture in which everyone is valued, equality and diversity** are embraced, and where everyone is encouraged to achieve their full potential.

**Our three priorities, when supporting those who use our service:**

- Communication
- Safeguarding
- Quality of our Service

**Company type:** Private Limited Company by guarantee without share capital use of 'Limited' exemption

**Companies House:** Mighty Men of Valour (MMOV) - 05515628 - Incorporated on 21 July 2005

- Our staff having up to day information, about our Service User, through the use of handheld devices which also monitors staff timekeeping, the support needs of our Service User, which includes Medication Administration, Epilepsy Support, Peg Feeding and records Service User's consent or refusal of support.
- Ensuring appointments, care and treatment is delivered and coordinated through our RotaCloud and Nourish software, which assists us to be accessible and responsive to our Service Users, especially those with complex needs.
- Valuing our Service User's privacy, confidentiality, informed choice, autonomy, dignity, and respect for their values and beliefs despite age, race, nationality, language, religion, age, sex or sexual orientation, without any discrimination.
- Giving our service users, family, friends and access to make complaints in several ways, via our staff member, our office, by Nourish App, through our feedback forms, through our three-week quality monitoring calls, and through our website Complaints Policy.
- Identifying, receiving, handling and responding to complaints from service Users, Staff, people acting on their behalf of our Service User or other stakeholders, and all complaints must be investigated thoroughly and any necessary action taken where failures have been identified.
- Welcoming any feedback of any kind and treating all complaints and compliments received by us a positive way to enhance and improved the quality of our service, and when requested to do so, we must provide CQC with a summary of complaints, responses and other related correspondence or information.
- Ensuring confidentiality will be maintained and safeguarded and any information kept about Service Users, their families and carers will be made available to those individuals on request, in compliance with data protection legislation and will only be given to other agencies as required by law, in exceptional circumstances to prevent harm to our Service User or, with the permission of the Service User or (where appropriate) their representative.
- Ensuring all information relating to the service user we support, and our carers is treated with the strictest of confidence and access to this information is limited to people on a need-to-know basis
- Ensuring that if we become aware of incident relating to our Service User, we will notify the relevant person that the incident has occurred and provide reasonable support to the Service User in relation to the incident.
- Ensuring our Registered Manager reviews actions taken in relation to all complaints and disputes on a regular basis in order to identify any trends and address any systemic issues.
- Ensuring that high standards of care are maintained through regular audits, risk management, monitoring, and evaluation of care provision through our Quality Assurance system.

**Well-led: We do this by:**

- Having several systems and processes in place to continually evaluate and seek to improve our governance and auditing practice. Having a clear vision and realistic strategy to deliver high-quality sustainable care to our service users with a sustainable deliver plan.

- Having a culture of high-quality, and sustainable care with a track record with our Service Users.
- Having an organisational chart which outline the responsibilities, roles and systems of accountability within our organisation.
- Having a highly qualified, skilled, experienced leadership with years of experience of working with people with various needs and delivery high-quality, sustainable care.
- Having clear processes through the use of robust management systems such as Nourish Care and QCS software systems which helps us to maintain accurate records which are effectively and efficiently our services process, and these are continually monitored, audited, reviewed, evaluate and improved.
- Unitising BrightHR software training and support services this assist us in providing CPD, learning, continuous improvement and innovation support to our staff whilst at the same time providing our staff with up-to-date policies through our QCS and quality care through our Nourish software.
- Continuously seek and act on feedback from everyone using our service, from Service User's and those acting on Service User's behalf, including staff and other stakeholders, so that we can continually evaluate the service and drive forwards improvement.
- Giving our service users, public, staff and external partners the opportunity to be involved and participated to help us to deliver a high-quality sustainable service.
- Conducting risk assessments with service users when we take them out in the community, and within their homes to ensure safety and quality of service for our service users, support workers, the general, the public, and our stakeholders.
- Securely maintain accurate, complete and detailed records in respect overall management of all regulated activities.
- Providing, where requested, written report to CQC setting out how we assess, monitor, and seek to improve the quality and safety of those individual using our services.
- Being fully insured to meet the requirements of Employers and Public Liability.

We want the best for our Service User and our Staff. Our role is simply to support our staff to bring out the best in them and for them to bring out the best in our Service Users.

If you have complaints about our service or dissatisfied with their response, you have received from us, you can complain to your local authority.

If you are still dissatisfied at the response of the local authority, then you can contact the Local Government Ombudsman at [www.lgo.org.uk](http://www.lgo.org.uk).

At any time, you can tell CQC about your experiences. CQC may not respond to individual complaints, however if you are experiencing poor care, or if you are experiencing good care, then you can provide your feedback via their website: [www.cqc.org.uk/public/sharing-your-experience](http://www.cqc.org.uk/public/sharing-your-experience).

#### **Annual report of incidents, safeguarding:**

There were no serious incidents or serious safeguarding issues.



**Annual report of complaints and compliments:**

We have asked all of our stakeholders to rate our service on a continuous basis over the year. This includes our service users, parents, carers, social services, staff and other agencies. We have asked them to rate our service from 0 to 5. Over 95% have given us 4/5 and 5/5, with only one service users giving us 3/5. Overall, of service from our service users is rated good.

**Mentoring Support:**

We have continued to pilot our Peer Mentoring Courses in a few schools, and we hope to extend these courses to more schools in London.

**Mentoring and Care Support:**

We have extended our Mentoring and Care Support to include young women, Children with Disabilities (CWD) and Adults providing Respite to families. We plan that **Valour Youth and Adult Services CIC** will start to take on some of these areas of work in schools and with children and MMOV will take on direct work with young men and males.

**Valour Awards Ceremony 2024:** Tuesday 23rd April 2024.

**Presentation of Awards by The Worshipful the Mayor of Hackney, Caroline Woodley**

**Purpose of our awards:**

1. To recognise our staff for the work they have done, especially through Covid and Lockdown
2. To recognise our service users, parents and carers
3. To recognise schools, social worker and other support agencies

The awards were well attended, by schools, social workers, parents, service users and our staff. It was a very successful event, and we would like to thank the support of the Worshipful the Mayor of Hackney, Caroline Woodley, Pastor Buttler and the Members of LLFGF for their support.

**Hackney and City of London Council & Croydon Council**

We continue to work closely with Hackney and City of London Council & Croydon Council and other local authorities, continue to deliver vital support to vulnerable children in these boroughs. We would like to thank Hackney and the City of London Council & Croydon Council for giving us the opportunity to support these children, families and professionals in this borough, and we hope to be able to deliver more support throughout 2023/2024.

**Registration with the Care Quantity Commission CQC**

We hope to register with the Care Quantity Commission CQC by the end of 2024/25 and continue to provide support not only for children, young people with disabilities and care respite support, but we hope to expand our support to adults.

We would like to thank God, our Trustees/Directors, Staff, service users, schools, social workers, local authorities, the community, church, sponsors, contributors, and friends of MMOV for their continued support this year.

Thank you.

Frederick Clarke – CEO MMOV