



**INSTITUTE OF HEALTH VISITING**

**TRUSTEES' REPORT AND ACCOUNTS**

**FOR THE YEAR ENDING 31<sup>ST</sup> MARCH 2023**

**Supporting excellence in health visiting practice to give  
every child the best start in life**

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**Institute of Health Visiting**  
**Company Information**  
**For the year ended 31 March 2023**

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**Reference and Administrative Details of the Charity, its Trustees and Advisers**

<b>Company name</b>	Institute of Health Visiting
<b>Company number</b>	08234405
<b>Charity number</b>	1149745
<b>Working name</b>	iHV
<b>Trustees</b>	<p>Pamela Goldberg*, OBE, FRSA, Chair (from 28 July 2016)</p> <p>Prof Dame Sarah Cowley DBE, BA, PhD, PGDE, RN, RHV, HVT (from 12 October 2022)</p> <p>Dave Roberts (from 28 October 2019)</p> <p>Sam Carlisle (from 5 May 2020)</p> <p>Dr Karen Whittaker BN, MSc, PGCE, PhD, FiHV (until 14 June 2022)</p> <p>Dr. Qingzhi Fan PhD (until 20 April 2022)</p> <p>Prof Helen Bedford PhD, MSc. RGN, RHV, FFPH, FRCPCH, FiHV (from 26 January 2021)</p> <p>Dr Sharin Baldwin PhD, MSc, PG Dip, BSc (Hons), HV, RM, RN, QN, FiHV (from 13 October 2021 to 19 April 2023)</p> <p>Alis Rasul (from 13 October 2021)</p> <p>Theresa Bishop (from 13 October 2021)</p> <p>Christina Liu* (Treasurer – from 20 April 2022)</p>
<b>CEO</b>	<p>Alison Morton*, MRes, BSc (Hons) RGN, RHV, DN cert. FiHV (from 26 April 2021; previously Acting Executive Director from 1 January 2021)</p> <p>* Members of the Finance &amp; General Purposes Committee</p>
<b>Principal address</b>	<p>John Snow House</p> <p>59 Mansell Street</p> <p>London E1 8AN</p>
<b>Auditor</b>	<p>Chiene + Tait LLP (Trading as CT)</p> <p>61 Dublin Street</p> <p>Edinburgh</p> <p>EH3 6NL</p>
<b>Bankers</b>	<p>The Co-operative Bank plc</p> <p>City Office</p> <p>80 Cornhill</p> <p>London</p> <p>EC3V 3NJ</p> <p>Lloyds Bank plc</p> <p>PO Box 1000</p> <p>BX1 1LT</p>
<b>Legal Advisors</b>	<p>Bates, Wells and Braithwaite</p> <p>2 - 6 Cannon Street</p> <p>London</p> <p>EC4M 6YH</p>

**Institute of Health Visiting**  
**Trustee's Report**  
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## **1. Report from the Chair and Chief Executive**

The Board presents its annual report together with the accounts of the Institute of Health Visiting (iHV) for the year ended 31 March 2023. The last year has been a historical milestone for the Institute as we celebrated our 10<sup>th</sup> anniversary as an organisation.

Since our launch as a centre of excellence for health visiting on 28 November 2012, there is so much to celebrate at this important time in our organisation's growth. Every week, thousands and thousands of families are supported by health visitors across the UK. The profession has a history that spans more than 150 years. During this time, health visitors have adapted their work to address the most pressing public health challenges of the day and the needs of the communities they serve. In many ways, the current landscape of change is no different - adapting to change is in our profession's DNA. As we look back over the last ten years, the commitment and innovation that health visitors have shown has been awe-inspiring during some of the most challenging times. Now, as we navigate the wake of the pandemic and a cost-of-living crisis, it is clear that health visitors are needed more than ever, in a world where inequalities are widening, and public health challenges pose the biggest threats to the nation's health.

In addition to this report, the iHV published its public-facing Annual Report in December 2022 which provides an overview of our work that has been delivered by the iHV team and in collaboration with so many partner organisations, practitioners and parents. The achievements are testament to the hard work, clear vision and dedication of so many who have played their part in building the Institute into the successful organisation that it is today.

The golden thread that unites us is our shared belief that health visitors really do make a difference alongside a dogged determination to improve the health of babies, children, families and communities; this is woven through each year of our organisation's history and will continue to guide us into the future. The Institute remains in a strong position, we have a seat at the table in multiple national stakeholder forums, and we have grown our partnerships this year, with numerous high-profile reports and endorsements for the profession.

Our work remains focused on supporting our growing membership through resources, events and training. We also lead a range of projects, and partner in research focused on key public health priorities. We continue to engage with our members and other stakeholders throughout the year to identify the current opportunities and challenges facing the profession. This frontline practitioner intelligence has provided valuable data on the state of child health and the health visiting profession across the UK that we have shared with policymakers in numerous national forums.

Whilst the profession faces significant challenges, particularly in England where there are now 40% fewer health visitors compared to 2015, practitioners have risen to the challenges to support as many families as possible. This year, Unicef UK recognised the vital work of health visitors in their "Early Moments Matter" campaign, describing the profession as *"The backbone of the early years... a safety-net around all families"*.

Influencing policies affecting health lies at the heart of health visiting and our work at the iHV. We know that we cannot do this alone. Throughout the year we have actively sought to build new alliances and strengthen well established ones. We are indebted to so many partner organisations, parents and practitioners who have supported our work to demonstrate the value of an effective health visiting service, with benefits accruing to the NHS, primary care, education and social care.

This annual report looks back at our performance and the progress that we have made in the last year. We are proud of the Institute and how the team has innovated and led on health visiting policy and practice, drawing on the best evidence to develop new and improved ways to support health visitors, promote inclusion and reduce health inequalities for babies, children and families.

Our organisation remains in a strong position to address the challenges we now face as we look to ensure that every child has the 'best life from the start', regardless of where they live, and to rebuild a health visiting service fit for the future. We are extremely grateful to our supporters, members, funders and friends. This coupled with the energy and expertise of our staff, expert advisers, consultants and trustees makes the iHV the effective organisation that it is. We thank them for their ongoing support.

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## 2. Trustees report

### Our Mission

The Institute of Health Visiting\* was founded in 2012 as a registered charity under the Charities Act. It is also registered as a company limited by guarantee under the Companies Act 2011.

[\*Working titles for the Institute of Health Visiting are 'The Institute' and 'iHV'].

The Institute is registered as a charity in England and Wales and operates throughout the United Kingdom as an independent charity, professional body and Centre of Excellence for health visiting – established to strengthen the quality and consistency of health visiting practice, so that health visitors can effectively respond to the health needs of all babies, children, families and communities enabling them to achieve their optimum level of health, thereby reducing health inequalities.

### Our Values

We believe that:

- Improving public health outcomes for babies, children, families and communities is at the heart of health visiting practice
- When appropriately resourced, health visiting provides a vital infrastructure of support that is central to improving public health outcomes and to reducing inequalities in health
- Ensuring the highest standards of education, research and practice means that health visitors can deliver a world-class service
- Health visiting leaders flourish in an environment of academic and professional excellence.

We are fully committed to the active promotion of equality, diversity and inclusion in everything that we do. We want to enable an organisational culture that values diversity and we are committed to eliminating unlawful discrimination.

### Our Vision and Objectives

Our Vision requires health visitors to play their fullest part within an integrated system to reduce health inequalities that arise in childhood and for the UK to achieve health outcomes on a par with the best in the world.

The iHV was established to:

- Work to improve quality and consistency in health visiting practice by:
  - acting as a Centre of Excellence for improving capacity, capability and professional development in health visiting, and
  - setting professional standards for continuing professional development
- Build leadership in health visiting
- Create a forum for developing excellence in health visiting practice, including co-production with parents and carers
- Influence policies affecting health, and promote the benefits and importance of health visiting
- Develop new effective ways to get key public health information to families, both directly, and through the health visiting infrastructure
- Strengthen research capability and capacity to develop the evidence base for health visiting.

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**2022-23 Business Plan: Objectives and activities**

The key objectives of the iHV Business Plan for 2022/23 were developed by the Senior Management Team, in partnership with the Board, to support the iHV's Core Mission. These focus on 8 key objectives:

**1. Policy Influence:**

- National: Raising the profile of health visiting
- Local: Influence local policies by extending iHV reach in local government in England
- UK-wide: Raise profile of iHV in Scotland, Wales and Northern Ireland.

**2. Provide targeted professional and leadership development to enhance capability:**

- Leadership development
- Support for workforce health and wellbeing
- Develop iHV training/ CPD offer
- Develop iHV research strategy.

**3. Membership:**

- Maintain / sustain membership in England through an extensive and varied range of member benefits – extend membership in devolved nations.

**4. Quality and delivery:**

- Embed iHV Quality assurance process
- Continually improve iHV website user experience
- Deliver high quality iHV events – including four conferences in 2022/23 (using a blended model of face-to-face and virtual delivery as appropriate).

**5. People development/ infrastructure and helping you to do your job:**

- Ensure good governance across teams: risk management, workflow mapping, GDPR, workforce sustainability/ business continuity plan, robust invoicing and financial forecasting
- Ensure IT capability is 'fit for purpose' reduce duplication where possible to release efficiencies
- Ensure staff health and wellbeing is central to delivery of business.

**6. Equality of Opportunity:**

- Commit to improve inclusion within the iHV
- Finalising and application of the iHV Quality Assurance tool and Equality Impact Assessment.

**7. Money:**

- Make the best use of resources and staff skills
- Income generation to deliver the details of the Business Plan.

**8. Environmental and sustainability:**

- Develop an iHV environmental and sustainability plan and commit to delivering ongoing improvements across all aspects of our work.

**Institute's activities against planned objectives in 2022/23**

The Institute has built on its success as the most rapidly growing professional body and voice for health visiting in the UK. Our day-to-day activity is organised under six work programmes aligned to the six teams within the organisation, with 28 members of staff.

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**I. Policy:**

This year, we have continued with our objective to raise the profile of health visiting and make the case for a high-quality health visiting service for all families, regardless of where they live in the UK. We have also focused on influencing local policies and supporting quality improvement by working more closely with local government and health visiting providers, as well as across all UK nations.

The Institute remains in a strong position, we have a seat at the table in multiple national forums and respond to numerous requests for written and oral evidence for national policy roundtables, inquiries and All-Party Parliamentary Groups. We have also proactively worked with others to raise the parliamentary profile of babies, young children and families. Our publications are often cited by policy makers and prestigious thinktanks who continue to approach us for evidence and opportunities for partnership working.

Over the last year, our policy work has included:

- **National policy influencing** through our representations at national forums including: National Children and Young People's Transformation Stakeholder Group; National Maternity Disparities Taskforce; CNO Professional Strategy Stakeholder forum, and Healthy Equity sub-group; Start For Life Roundtables; National Safeguarding Review Panel Roundtables; Department for Levelling up, Housing and Communities Advisory Group for Partnerships for People and Place; Department for Education Information Sharing Roundtable; Genomics England Newborn Programme Steering Group; Children's Commissioner Roundtable for the Family Review; Northern Ireland's Healthy Child Healthy Future Programme Board; OHID Professional Organisations Group; NHSE Maternity Transformation Post natal group, Breastfeeding Law Group; Breastfeeding Alliance; Health Policy Influencing Group; One Voice Maternity Partnership; Obesity Health Alliance; Maternal Mental Health Alliance; and the First 1001 Days Movement Steering Group.
- Keynote speaker presentations at national conferences, All Party Parliamentary Groups and high-profile forums including: UNICEF WHO Europe and Central Asia Health Systems for Early Child Development launch conference; Westminster Education Policy conference; the 1001 Days All Party Parliamentary Group; UNICEF-UK Parliamentary Roundtable on Early Years; and National Child Safeguarding health visiting 'deep dive'.
- **Launch of a series of iHV Films this year:**
  - ['Health visiting in your community'](#) captures a glimpse of health visiting from across all 4 nations of the UK.
  - ['Voices from practice'](#) to support health visitor recruitment. The films received endorsement from all UK Chief Nursing Officers and numerous partners including the LGA and UNICEF-UK.
  - ['Health Visitors for every family'](#) – developed as part of the EU funded PATH project.
- **Collating and presenting the evidence:**
  - Our [Casting Long Shadows](#) report, produced with the Parent Infant Foundation, highlights the ongoing impact of the COVID-19 pandemic on babies, families and services that support them.
  - Our [9th annual State of health visiting in the UK survey](#), January 2023 highlights a deteriorating picture of a workforce under immense pressure as practitioners struggle to meet the scale of rising need, with a widening postcode lottery of health visiting support across the UK. The report received excellent media coverage and widespread support.
- **Sharing best practice** through our conferences and the publication of regular case studies and blogs. We worked in partnership with the UK nations to extend our infographics promoting ["Who are health visitors and what do they do?"](#) for Scotland and Wales – with a Northern Ireland version in progress.
- **Supporting partnerships and campaigns:** This year, we worked with:
  - The First 1001 Days Movement on the ["Why Health Visitors Matter: perspectives on a widely valued service"](#) report and media coverage.
  - UNICEF UK [Early Moments Matter 2022 Policy Report](#) and campaign.

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- The Royal Foundation Centre for Early Childhood: Our CEO was asked to chair a meeting for HRH The Princess of Wales on health visiting and the early years in May 2022 in advance of a Government Roundtable, and joined the launch of the [Shaping Us](#) campaign in January 2023 – with plans for further work in collaboration with the Foundation in 2023/24.
- The [NSPCC's campaign](#) calling on the Government to implement an updated and improved Healthy Child Programme alongside a robust workforce plan.

**Evidence submissions/ briefings/ letters:**

This year, we submitted responses to numerous calls for evidence, including:

- Consultations, including: [SEND Review](#); [Written response to the Hewitt Review](#) on integrated care systems; [Evidence](#) for the Downs Syndrome Act 2022 call for guidance; Children's Commissioner's Family Review consultation; 10-year mental health plan for England; Mental health consultation for Scotland; [Consultation response: folic acid fortification](#); [Children's social care implementation strategy](#); [Prevention of ill health inquiry](#); and NICE guidance consultations on Postnatal Care, and obesity
- Joint [response](#) to the Autumn Budget and [letter to the Minister](#) in advance of the Spring budget with SAPHNA
- Signatories to numerous consensus statements on child health with partners
- Written evidence to support the Westminster Hall debate on Infant Mental Health, and the House of Lords debate for Lord Patel/Baroness Watkins
- Kings Fund manifesto for health.

**II. Training:**

2022/23 has been a successful year for our training team. Training team highlights include:

- **A growing training offer:** We have extended our training portfolio to include a number of new training topics, alongside our well-established and award-winning training programmes which are delivered as private training commissions, hosted training events, and bespoke training for individual organisations. Alongside our popular perinatal and infant mental health training, we have experienced growing interest in our Changing Conversations around Autism, Neonatal Families, and This Mum Moves Ambassador programmes, as well as Healthy Weight Healthy Nutrition, Domestic Abuse and Postnatal Contraception events. In the calendar year 2022, we delivered 132 training events.
- **Innovation - Development of the digital Learning Platform "iHV Learn":** This hosts a number of Toolkits to support continuous professional development (CPD) across a number of subjects.
- **Quality assurance, evaluation and dissemination:** Our robust quality assurance process underpins the development and regular updating of our training programmes, including co-production with service users. The programmes we offer are independently reviewed and CPD accredited by the CPD Standards Office.

**III. Projects and evaluations (including Research):**

We receive regular requests from organisations who are keen to partner with us and are increasingly seen as the 'go to' partner for projects and research related to health visiting and public health for babies, young children and families. Our proven track record of delivering high quality products within timescale and budget are key elements of our success, alongside our ability to work flexibly and with others.

This year, we have delivered a number of successful projects and grant-funded work in partnership with academic, professional and third sector organisations. In recognition of her nursing leadership of the iHV's 'Changing conversations around autism programme', we were delighted to hear that Vicky Gilroy, our Head of Projects and Evaluations was recognised as one of the Burdett Trust for Nursing's 'Heroes' at their 10th Anniversary awards at the end of June 2022.

The following summary provides examples of our projects and partners during 2022/2023:

- NHSE – Strep A and Flu campaign support (December 22- March 23)



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- Family Action- Evaluation of Stockton perinatal support service (December 21-January 23)
- The Tiny Lives Trust - Promoting best practice to meet the needs of neonatal families (March 22 -March 23).
- The AIMS Foundation - Healthy Weight Healthy Nutrition, Oral Health and Physical Activity (May 2020 – May 2023).
- Burdett Trust for Nursing – cardiovascular disease (CVD) prevention (September 2022 – December 23). Development of training using the Family Partnership Model to reduce CVD risk.
- NIHR – Baby Breathe (October 20 - December 24). A national multi-centred randomised control study offering a brief intervention to support smoking relapse prevention postnatally.
- NIHR – CRN Yorkshire and Humber research communities (April 2022- April 24).
- Genomics England Programme (March 21- January 24). To raise awareness and support health visitor practice in genomics.
- NHSE Learning Disabilities – Autism Factographic (March 22 – March 23).
- Maternal Health Alliance – Evidence review and best practice guide (August 22 -March 23).
- The Royal Foundation Centre for Parent and Child Support – Alarm Distress Baby Scale implementation feasibility study (March 23- Dec 23).
- Early Education Endowment Foundation – Collaboration with Newcastle University (August 22 -August 23). To improve speech-language and communication development in the early years.
- Health Education England, London -To explore the pan- London pathway for Specialist Community Public Health Nurse student recruitment and support workforce development (Dec 22– March 24).
- Research collaborations (April 22 – March 23). The iHV is also involved in a number of research partnerships and collaborations, participating in steering groups, providing consultancy and supporting recruitment to studies and dissemination of findings.

#### **IV. Education and workforce:**

Our work to support health visitor education and career progression focused on the following areas:

- **Skill mix in health visiting project:** We established an expert reference group, reviewed the evidence and produced a guide detailing the essential factors for skill mix within health visiting services. An infographic illustrating the ABC of factors for skill mix was developed and presented at national conferences and regional forums. This open access resource is available on the [iHV website](#). The next phase of this project will include the development of skill-mix case studies with examples of decision making and accountability.
- **Practice education networking events:** These regular events support practitioners, educators and service managers to network and identify priorities for action with respect to Specialist Community Public Health Nursing (SCPHN) education and NMC standards. Events are collaborative and co-chaired by service managers and practitioners and are well attended by participants from all UK nations. The group has engaged with the Nursing Midwifery Council (NMC) and has strengthened alliances with other professional bodies.
- **Work with the NMC and partners on SCPHN education, career pathways and regulation:** We have contributed to a number of national consultations including: the development of practice teacher standards by the Queens Nursing Institute; Health Education England's Advanced Practitioner credentials for public health; the Skills for Health SCPHN apprenticeship standard; and the NMC review of regulatory reform.
- **Supporting sector-led improvements:** We have provided specific expertise for commissioners in local authorities who have consulted us for support with the development of their health visiting service specifications, including a pan-London project to strengthen the learning infrastructure for SCPHNs.

#### **V. Mental Health:**

The last year has provided many opportunities for us to raise the importance of family mental health and wellbeing and the role of the health visitor as an essential part of an effective, integrated perinatal and infant mental health (PIMH) system.

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- **Influencing policy and research:** We have contributed across all four nations to support their respective mental health strategies and in response to national consultations, guidance and research, including:
  - Maternal Mental Health Alliance (MMHA): We worked collaboratively with the MMHA on their #Makeallcarecount campaign and produced an evidence-review and best practice guide "Supporting High Quality Perinatal Mental Health Care". The resources will support services to confidently shape their vision, planning and delivery for perinatal mental health (PMH).
  - Responding to calls for evidence including: The Department of Health and Social Care 'Mental health and wellbeing plan; NICE clinical guideline for depression in adults; and the Strategic Mental Health Workforce Plan for Health and Social Care – Wales.
  - A research partnership between NSPCC, iHV and the Royal College of Midwives to influence change in Northern Ireland in the early years, infant mental health and maternity.
  - Supporting the development of Health Education England's PMH Competency Framework.
  - Membership of the Steering Committee for the follow up 'Healthy Start, Happy Start' study by Professor Paul Ramchandani, University of Cambridge.
- **Training:**
  - Our iHV PIMH Champions programmes provide an infrastructure to support this work and we are delighted that we have now trained 4,013 PIMH Champions across the UK from a range of professions working alongside mothers and their families in the perinatal period.
  - Our PIMH training remains our most sought-after training and this year we have focused on further updating the training programmes to ensure that they contain the latest evidence and align with the ever-changing policy context.
  - In collaboration with Lucy Warwick-Guasp, we developed a new training programme for 'People who identify as LGBTQI+ and PMH Champion Training'.
  - Our regular PIMH Forums continue to attract good interest, hosted by each UK nation and culminating in our "All Areas Champion Celebration" in December where we were able to celebrate many of our amazing Champions. The iHV Specialist Health Visitor in PIMH Group has also grown significantly in the last year.
  - Our 4th Annual iHV PIMH Conference was held online on 15 June and attracted over 230 delegates who explored the subject of 'Early Trauma and the Art of Repair'.

## **VI. Corporate team:**

**Membership:** The iHV relies on its unrestricted income from member donations to support the delivery of its charitable objectives - collectively, this accounts for around 25% of our annual income. Despite the enormous challenges facing the health visiting profession, our membership has increased by 32% since March 2022. We have enjoyed a significant growth in our corporate membership – with a smaller but still significant growth in individual memberships.

Meeting the needs of our members remains a priority. We engage regularly with our members through iHV Networking events, iHV Insights events, monthly iHV Times newsletter, our Health Visitor Advisory Forum and annual survey. In December 2022, we launched our iHV Podcasts to provoke discussion on key topics. Our growing suite of resources for members, including our Good Practice Points, Parent Tips, web-based resources and publications, remain popular. We also regularly promote the work of our members through Voices blogs and news stories.

We charge a modest fee for iHV membership to support our ambition that all health visitors will become members. We have not increased our individual membership fees for many years and we deferred an increase last year due to the rising cost of living, inflationary pressures and significant workforce challenges.

### **Conferences:**

Our conferences attract growing numbers of delegates and we have delivered three successful conferences as well as our celebratory 10<sup>th</sup> Anniversary Event this year. We were delighted to be able to move some of these events back to 'in-person' or hybrid events, following COVID restrictions since 2020:

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- Our **Mental Health conference** in June coincided with Infant Mental Health Awareness week and International Fathers' Day.
- Our **Evidence Based Practice Conference in Manchester** in September was our first face-to-face conference since 2019.
- On 7 December we held our annual **Leadership conference in London**. This was a blended conference – we sold out of in-person tickets early (venue capacity 180) with the remainder of delegates joining online. The event was attended by almost 400 people.
- On 8 December, we welcomed trustees, colleagues, partners, supporters, funders, members and Fellows to our [10<sup>th</sup> Anniversary Celebration evening reception](#) in London. It was very special to welcome the four founding health visiting academics who provided the vision and were the driving force behind the Institute: Dr Cheryll Adams CBE, Prof Dame Sarah Cowley DBE, Prof Sally Kendall MBE and Prof Ros Bryar. We were also joined by our first Chair, Sally Russell OBE. We are indebted to all of them for their clear vision and tenacity to turn a seedling idea into the fully functioning and successful organisation that the iHV is today. We conferred an Honorary iHV Fellow award to Sally Hogg in recognition of her support of the iHV over many years.

**Sector-led Improvement work:**

This year we have worked with a number of local authorities to support their work to drive improvements in health visiting practice. Our Sector-Led Improvement work predominantly comprises of short, time-limited projects that support quality assurance and quality improvement in practice, as well as bespoke work on specific issues including workforce.

**International**

**PATH:** This 4-year European Interreg 2 Seas PATH project facilitates cross-border collaboration between England, France, the Netherlands and Belgium and we are proud to have worked alongside our partners since 2019 to successfully deliver a suite of outputs to promote positive family perinatal mental health. Our final year activities that included:

- Producing a short film on the role of the health visitor in relation to family mental health.
- Contributing to the PATH project's final Conference in November in Antwerp.
- Presenting at Bournemouth University Inter-Faculty Simulation Research Day.
- Delivering our Fathers' and Partners Awareness programme.
- Producing further training videos for practitioners available on the PATH hub and iHV website.
- Creating content for the Families' section of the PATH hub and reviewing the PATH UK website.

**Communications and media:** Our communications and design team are central to the success of the iHV, managing our external communications and providing bespoke imagery, quality assurance and proof reading of all our publications and communications. Our work continues to attract good media interest including: ITV News, Channel 5 News, BBC Radio, Radio Islam, New York Times, Daily Telegraph, Evening Standard, Daily Mail, Sunday Mirror, the Independent, MSN, Yahoo news, Scottish Sun, Nursing in Practice, Nursery World, News Medical Life Sciences, CYP Now, HSJ, BMJ, the Mirror, Nursing Times and Dame Andrea Leadsom 1001 Critical Days podcast.

**Governance, management and trustees**

**Governing Document:** The Institute of Health Visiting is governed by its Articles of Association and the Board has ultimate authority and responsibility for directing and governing the charity. The Board is comprised of Trustees selected from a range of backgrounds to support the organisation's objectives. The constitution of the Board is reviewed annually, and the Trustees hold an annual away day for organisational and strategic planning in October each year.

The Trustees meet formally as a Board on a quarterly basis. In between Board meetings, some Trustees are actively engaged with the larger funded projects, providing governance oversight and expert advice in their

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role as the Chair of Project Steering Groups, and/ or membership of 'Task and Finish' groups focused on specific iHV workstreams. The Chair, CEO, Honorary Treasurer and independent accountants meet outside the Board meetings, as a Finance and General Purposes committee focused on the organisation's finance and business planning. The input of the Trustees supplements the direct management role of the CEO.

**Change to Trustees:** Trustees can serve up to two terms, each of three years, in office before being required to step down. In December 2022, the charity announced that Pamela Goldberg, our current Chair, would step down in July 2023 when her second term expires. Following an external recruitment and interview process, we are delighted to have appointed Sue Tokley as the new iHV Chair. Sue brings a wealth of experience and skills from her background as a Chief Nurse and in charity work. Sue's appointment was unanimously approved by the Board in April 2023.

In January 2022, our Treasurer Sue Gallone stepped down at short notice due to a change in her personal circumstances; following an open recruitment process Christina Lui was welcomed as our new Honorary Treasurer following the Board's approval on 20 April 2022. We also welcomed the return of Prof Dame Sarah Cowley as a Trustee in October 2022 following a break of one year after she reached the maximum term in her role as one of the iHV's first trustees.

Following her appointment on the iHV staff team, Sharin Baldwin stepped down from her position as Trustee at the April Board meeting prior to taking up her post as Senior Research Fellow at the iHV in July.

**Governance:** The CEO is supported by the Senior Management Team (SMT) who generally meet monthly to review organisational performance, governance and risks in the Governance meeting, with escalation of urgent matters to the Trustees between Board meetings. In March, the SMT consolidated their February and March meetings into an 'awayday' to support business planning which is built on the key priorities identified by the Board of Trustees at their awayday in October. The Business Plan is presented to the Board in April for final approval, alongside the updated risk log and mitigations.

**Policies and procedures:** To support governance, the iHV has a range of policies that are reviewed on a regular basis, and/ or updated in response to changes to national policy. This year we have reviewed and updated the following policies and alerted staff to the changes:

- Finance policies: Ethical collaboration, Spending, Remuneration, Expenses, Expenses for external contractors, and Procurement.
- HR policies: Annual leave, Guidance note on zero hours contracts, Maternity, and Sickness.
- Safeguarding: Adult safeguarding, and Child safeguarding.
- Safety and ethical policies: Sustainability, Health and Safety, H&S Home worker risk assessment, Information governance, Provision of Education and Training (review in progress).

**Financial systems and IT upgrade:** During August our Corporate administrative team reviewed and cleansed our entire salesforce database to ensure that we remain compliant with GDPR. This is scheduled annually with smaller 3 monthly reviews during the year. We have continued with our programme to rationalise our IT systems and software packages to reduce duplication and improve interoperability, including the effective synchronisation between Salesforce, Wordpress and Moodle for iHV Learn. Our use of Xero online accounting software, introduced last year, has brought numerous benefits, improving governance and supporting better invoicing and debt management. Our accountancy support is provided by the independent accountants, JS2.

**Sustainability:** We are committed to play our part in improving environmental sustainability. This year, we reviewed and updated our Sustainability Policy and set out four key business objectives that are included in our Business Plan for 2023/24.

**Partnerships:** The Institute is independent of, but has benefited from, close working relations with the Royal Society for Public Health (RSPH) which continues to provide the Institute with back-office support. The Institute pays the RSPH a small honorarium for this support and use of their London meeting rooms when

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**For the year ended 31 March 2023**

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needed. Alongside its income from membership fees, the Institute receives income through grants and consultancy work with the following organisations:

**Secondments:**

- Essex County Council
- Ministry for Levelling Up, Housing & Communities

**Grant/ project funders:**

- NHS England
- Health Education England
- National Institute for Health and Care Research (NIHR)
- Genomics England
- Maternal Mental Health Alliance
- The Royal Foundation for Parent and Child Support
- Early Education Endowment Foundation
- European Interreg 2 Seas PATH
- Family Action
- The Tiny Lives Trust
- The AIM Foundation
- Kindred Squared
- Burdett Trust for Nursing
- University of Stirling
- The Sylvia Adams Charitable Trust
- Western Sydney University, Australia
- Barnardo's
- Sheffield University
- This Mum Moves/ Active Pregnancy Foundation
- Birmingham Community Healthcare Trust and Birmingham Council
- Warwickshire Council
- Ealing Council
- Novartis
- Scotland perinatal mental health programme board
- University College London

**Staffing of the Institute**

Our staff play a crucial part in delivering the iHV Mission. The Institute is a growing organisation with 28 members of staff employed on a range of permanent and temporary contracts to meet our core business, training and project work. This year we have seen some staff changes as two long-standing members of the team retired, one went on maternity leave and two members of our corporate team left the organisation. We have welcomed five new members of staff to our team and have been pleased by the calibre of applicants.

All staff have personal objectives aligned to the iHV annual Business Plan and these are reviewed regularly through an ongoing Personal Development Review process. In addition, the iHV employs individuals as independent consultants and trainers, as needed, to support programmes of work.

Supporting staff wellbeing remains a priority. Our senior management team is working well - the 'Head of' departments are actively involved in financial and workforce forecasting and planning for their teams, to provide better oversight and management of workflow, workload and risks. Staff are also supported through regular 1:1s, monthly team meetings, smaller team meetings and our annual team awayday in the summer. This year, we reviewed our employee benefits and non-pay rewards, and the Board has increased the annual leave entitlement for staff who have worked for the iHV for more than two years (5 days pro rata).



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**Quality assurance:** Quality underpins all that the iHV does. All projects have a project governance group chaired by either the CEO or a Trustee. This year we have further developed our Quality Assurance processes, Quality Assurance toolkit and Ethical Collaborations Policy to guide our work.

**Risks:** We have clear processes in place for risk management to ensure that risks are identified, managed and escalated to the iHV Board in a timely way to support business continuity and quality control. Each department undertakes ongoing risk assessments to identify and mitigate risks, escalating these through the iHV Governance group (the Heads of Department are responsible for managing their department risks and these are graded and recorded on their monthly departmental score cards). Risks are also recorded on the organisation's risk register. Risks are formally reviewed by the Senior Management Team in the monthly iHV Governance Group and quarterly by the Board (or more frequently by exception) to support organisational decision making and risk mitigation.

The three main areas of risk are:

**Financial risks** – there is an on-going risk that the iHV could fail to attract sufficient income to maintain its core functions and staff costs, especially with a recent expansion to the staff numbers. In addition, due to uncertainties around inflation, there is a risk that workstream/ programme requirements may extend beyond the costed deliverables, leading to rising costs in excess of the indicative budget.

**Mitigation:** The Chair and Treasurer meet regularly with the CEO, who has the responsibility to generate income and ensure sustainable funding. Our income streams are as diversified as possible to spread the risk and the iHV has healthy reserves. Accounts are monitored closely through monthly management accounts. All Heads of Department have sight of budgets. All teams use project management skills to manage costs, time and quality, with MoSCoW prioritisation. Business planning is managed through our bi-monthly Business Development Group, and we have an internal bid writing team to maximise success. Inflation poses an ongoing threat for pay and non-pay costs. Our inflationary pay award is based on affordability and is mapped against similar charities/ CPI figure and projected inflation. We use fixed term contracts for any additional staffing for specific projects, using consultancy by exception due to inflated costs. Our fees are reviewed regularly to ensure they cover our costs. We have clear processes in place for financial governance/ sign off – and use Xero finance management system to track invoices, income and expenditure.

**Quality/ Reputational risks** – there is the risk that staff, or those representing the iHV, inadvertently misrepresent the charity which could damage the reputation of the organisation. There is also a risk that iHV products/ website are not of the desired quality or contain out of date/ inaccurate information.

**Mitigations:** Careful staff recruitment, PDR, training and performance management processes are in place to ensure that all iHV staff have the necessary skills and capabilities to represent the organisations and ensure iHV outputs comply with our Quality Assurance processes, including agreed levels of senior management 'sign-off'. Any incidents are recorded, and an action plan developed, including sharing the learning with the wider team through the Governance and Professional meetings (fortunately, these are very rare).

**Staff wellbeing:** There is a risk that iHV workload may exceed staffing capacity, and staff wellbeing may be impacted by the wider impacts of the cost-of-living crisis – as a result, there is a risk that staff wellbeing will be affected which will impact on staff sickness, iHV delivery with reputational and financial risks.

**Mitigations:** Continuous workflow mapping and planning is undertaken by the Heads of Departments in all teams, with proactive recruitment to cover work and avoid excessive workloads, particularly when new contracts are achieved. Business continuity planning is in place and staff are trained to ensure that there is adequate cover for all roles to cover unexpected staff losses. We also use a pool of zero-hour contract staff for cover as required and utilise staff from other departments to fill temporary gaps. Staff wellbeing is reviewed at individual 1:1s with line managers and we support team wellbeing through our annual 2-day 'Awaydays', flexible working policy and signposting to additional support where needed.

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**Objectives for the year ahead 2023/2024:**

The iHV Business Plan and objectives are developed collaboratively by the Board, Senior Management Team and staff to support our organisation's mission and charitable objectives. Our key objectives for 2023/24 are:

**1) Influence policy to improve health, reduce inequalities and strengthen health visiting:**

- Increase decision-makers' understanding of the value of health visiting across the health and care system to influence UK national and local government policy, encouraging long-term thinking and working with stakeholders to maximise impact.
- As an independent professional body, we push for political change and aim to influence the election manifesto commitments of the main parties to improve child health and reduce inequalities by investing in health visiting.
- Continue to extend our work in all UK nations.

**2) Support quality improvement in health visiting:**

- Work in partnership with local areas to equip them with the evidence, insight and sector-led improvement tools to support them to spend their money well by investing in health visiting to improve health and reduce inequalities.
- Lead, and partner with others, on projects and research focused on achieving the aims and objectives of the iHV.
- Continue our skill-mix work to expand the availability of resources for workforce planning. The iHV position on advanced practice roles and career progression in in health visiting will be developed, alongside the professional regulation of health visitor education and practice.

**3) Build professional skills and knowledge to enhance health visiting workforce capability and leadership development**

- Offer a range of high quality and sustainable training programmes to enhance workforce capability, focused on recognised priority topics.
- Develop, promote and support leadership development in health visiting.
- Scope user needs and further develop the iHV Learning platform to support excellence in health visiting through accessible resources for continuous professional development.
- Build skills, knowledge and capability by supporting and collaborating with people and organisations through our networking, conferences, partnerships and events.

**4) Support our members and meet their needs**

- Ensure that our products and services offer value, meeting the needs of our current members and attracting new members.
- Embed a continuous cycle of learning and quality improvement, engaging regularly with our members to understand and respond to their needs.

**How we work in a changing world:**

**5) Make the iHV a great place to work and develop**

- Provide opportunities for employees to grow and develop.
- Effective leadership with mutual respect and trust of all staff to ensure everyone is supported to do their job, has a voice in the organisation, receives regular feedback and understands their vital contribution to the iHV's success.
- Continue to review, develop and embed our policies that address work/life balance to enable individuals to cope successfully with the demands and pressures of work.

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**6) Good governance, infrastructure, financial and quality management:**

- Ensure good governance and communication across teams.
- Scope and develop a new iHV website to meet our user needs.
- Ensure our IT capability is 'fit for purpose' reduce duplication where possible to release efficiencies.
- Ensuring that the "iHV brand", and stakeholders' perceptions of it as high quality, continues to grow.

**7) Equity, diversity and inclusion**

- All iHV staff understand their contribution and take steps to achieving our goals set out in our Equality and Diversity strategy.
- Ensure that we have accessible resources that support inclusion with a focus on improving health and reducing inequalities
- Seek to broaden the diversity of our team and the people we work with, becoming a more inclusive employer by ensuring that our organisational culture is fair, values diversity and harnesses the abilities of all our people.
- Developing how we engage and involve people through co-production, to realise the benefit of multiple and diverse perspectives and support our health advocacy work.

**8) Environmental and sustainability**

- Leading by example: To reduce the carbon footprint associated with the iHV, benchmarking our performance and developing an ambitious iHV plan for sustainability for the next two years in line with our recently updated Sustainability Policy.
- Advocacy: To influence policies affecting health, by advocating for 'health equity', children's rights, and the reduction of harms to health caused by environmental impacts faced by babies, children and young people now and in the future.
- Supporting and equipping iHV members: To support iHV members in their health advocacy role to improve sustainability in their workplaces and improve health equity linked to environmental sustainability through their work with babies, children, families and communities.
- Supporting and equipping iHV staff: To equip iHV staff with the knowledge they need to make a positive impact, and support the iHV's ambitions, on environmental sustainability.

## **Financial Review**

The Institute has finished the year in a better position than expected with a surplus of £164,195 (2022: £186,009). Our total income has decreased from £1,575,756 in 2021/22 to £1,563,939 in 2022/23. This increase on prior year is due to an increased uptake in corporate memberships and larger number of training sessions/increased interest in online training sessions.

Expenditure in the year also increased to £1,399,744 (2022: £1,389,747) due to increased consultancy spend on restricted projects along with increased staffing costs.

## **Reserves policy and going concern**

In assessing the overall level of reserves, the Board aims at all times to maintain sufficient unrestricted funds to ensure it remains solvent going forward, this includes at least 6-month's running costs.

The Institute currently holds total reserves of £1,146,697 (2022: £982,472) of which £971,476 (2022: £760,674) are free reserves (unrestricted funds). This equates to approximately 7 months standard running costs. The Institute has designated £150,000 to use to replace its website and improve interoperability between its numerous IT systems commencing in 2023/24. This will support us to achieve sustainability for future years.



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The Trustees have reviewed the charity's financial position, taking into account current performance, the ongoing economic challenges, the satisfactory levels of reserves and cash at year end and projections. They have considered future plans, along with internal processes and systems for managing financial and operational risks. As a result, the Trustees have a reasonable expectation that the charity has adequate resources and infrastructure to continue operating for the foreseeable future.

### **Statement of Trustees' Responsibilities**

The Trustees (who are also directors for the purposes of company law) are responsible for preparing the Trustees' Report and the financial statements in accordance with applicable law and United Kingdom Accounting Standards (United Kingdom Generally Accepted Accounting Practice). Company law requires the Trustees to prepare financial statements for each financial year which give a true and fair view of the state of affairs of the charitable company and of the incoming resources and application of resources, including the income and expenditure, of the charitable company for that period. In preparing these financial statements, the Trustees are required to:

- Select suitable accounting policies and then apply them consistently;
- Observe the methods and principles in the Charities SORP;
- Make judgements and estimates that are reasonable and prudent;
- State whether applicable accounting standards have been followed, subject to any material departures disclosed and explained in the financial statements;
- Prepare the financial statements on the going concern basis unless it is inappropriate to presume that the charity will continue in business.

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

In so far as the Trustees are aware:

- There is no relevant audit information of which the charitable company's auditor is unaware;
- and The Trustees have taken all steps that they ought to have taken to make sure they are aware of any relevant audit information and to establish that the auditor is aware of that information.

### **Public Benefit**

The Trustees have referred to the guidance contained in the Charity Commission's general guidance on public benefit when reviewing the aims and objectives and in planning the future activities. In particular, the Trustees consider how planned activities and grant making will contribute to the aims and objectives they have set. The Trustees consider the current policy for grant making and the current activities deliver public benefit. Details of the objects which form the basis of this are given in this report.

### **Auditors**

Our auditors CT have now completed their third audit on behalf of the charity.

This report of the Board of Trustees has been prepared taking advantage of the small companies exemption of section 415A of the Companies Act 2006.

**Pamela Goldberg**  
**Chair**  
**DATE**

*Pamela Goldberg*

02 August 2023

**Institute of Health Visiting**  
**Independent Auditor's Report**  
**For the year ended 31 March 2023**

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**Independent auditor's report to the members of Institute of Health Visiting**

**Opinion**

We have audited the financial statements of Institute of Health Visiting for the year ended 31 March 2023 which comprise the Statement of Financial Activities, the Balance Sheet, the Statement of Cash Flows and the notes to the financial statements, including a summary of significant accounting policies. The financial reporting framework that has been applied in their preparation is applicable law and United Kingdom Accounting Standards, including Financial Reporting Standard 102 'The Financial Reporting Standard applicable in the UK and Republic of Ireland' (United Kingdom Generally Accepted Accounting Practice).

In our opinion the financial statements:

- give a true and fair view of the state of the charitable company's affairs as at 31 March 2023, and of the charitable company's net movement in funds, including the income and expenditure, for the year then ended;
- have been properly prepared in accordance with United Kingdom Generally Accepted Accounting Practice; and
- have been prepared in accordance with the requirements of the Companies Act 2006.

**Basis for opinion**

We conducted our audit in accordance with International Standards on Auditing (UK) (ISAs (UK)) and applicable law. Our responsibilities under those standards are further described in the Auditor's responsibilities for the audit of the financial statements section of our report. We are independent of the charity in accordance with the ethical requirements that are relevant to our audit of the financial statements in the UK, including the FRC's Ethical Standard, and we have fulfilled our other ethical responsibilities in accordance with these requirements. We believe that the audit evidence we have obtained is sufficient and appropriate to provide a basis for our opinion.

**Conclusions relating to going concern**

In auditing the financial statements, we have concluded that the trustees' use of the going concern basis of accounting in the preparation of the financial statements is appropriate.

Based on the work we have performed, we have not identified any material uncertainties relating to events or conditions that, individually or collectively, may cast significant doubt on the charity's ability to continue as a going concern for a period of at least twelve months from when the financial statements are authorised for issue.

Our responsibilities and the responsibilities of the trustees with respect to going concern are described in the relevant sections of this report.

**Other information**

The trustees are responsible for the other information. The other information comprises the information included in the trustees' annual report, other than the financial statements and our auditor's report thereon. Our opinion on the financial statements does not cover the other information and, except to the extent otherwise explicitly stated in our report, we do not express any form of assurance conclusion thereon.

In connection with our audit of the financial statements, our responsibility is to read the other information and, in doing so, consider whether the other information is materially inconsistent with the financial statements or our knowledge obtained in the audit or otherwise appears to be materially misstated. If we identify such material inconsistencies or apparent material misstatements, we are required to determine whether there is a material misstatement in the financial statements or a material misstatement of the other information. If, based on the work we have performed, we conclude that there is a material misstatement of this other information, we are required to report that fact.

We have nothing to report in this regard.

**Institute of Health Visiting**  
**Independent Auditor's Report**  
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**Opinions on other matters prescribed by the Companies Act 2006**

In our opinion, based on the work undertaken in the course of the audit:

- the information given in the trustees' report (which includes the directors' report prepared for the purposes of company law) for the financial year for which the financial statements are prepared is consistent with the financial statements; and
- the directors' report has been prepared in accordance with applicable legal requirements.

**Matters on which we are required to report by exception**

In the light of the knowledge and understanding of the charitable company and its environment obtained in the course of the audit, we have not identified material misstatements in the Trustees' Annual Report (which incorporates the directors' report).

We have nothing to report in respect of the following matters in relation to which the Companies Act 2006 requires us to report to you if, in our opinion:

- adequate accounting records have not been kept, or returns adequate for our audit have not been received from branches not visited by us; or
- the financial statements are not in agreement with the accounting records and returns; or
- certain disclosures of trustees' remuneration specified by law are not made; or
- we have not received all the information and explanations we require for our audit; or
- the trustees were not entitled to prepare the financial statements in accordance with the small companies regime and take advantage of the small companies' exemptions in preparing the trustees' report and from the requirement to prepare a strategic report.

**Responsibilities of trustees**

As explained more fully in the trustees' responsibilities statement set out on page 17, the trustees (who are also the directors of the charitable company for the purposes of company law) are responsible for the preparation of financial statements which give a true and fair view, and for such internal control as the trustees determine is necessary to enable the preparation of financial statements that are free from material misstatement, whether due to fraud or error.

In preparing the financial statements, the trustees are responsible for assessing the charitable company's ability to continue as a going concern, disclosing, as applicable, matters related to going concern and using the going concern basis of accounting unless the trustees either intend to liquidate the charitable company or to cease operations, or have no realistic alternative but to do so.

**Auditor's responsibilities for the audit of the financial statements**

Our objectives are to obtain reasonable assurance about whether the financial statements as a whole are free from material misstatement, whether due to fraud or error, and to issue an auditor's report that includes our opinion. Reasonable assurance is a high level of assurance but is not a guarantee that an audit conducted in accordance with ISAs (UK) will always detect a material misstatement when it exists. Misstatements can arise from fraud or error and are considered material if, individually or in the aggregate, they could reasonably be expected to influence the economic decisions of users taken on the basis of these financial statements.

Irregularities, including fraud, are instances of non-compliance with laws and regulations. We design procedures in line with our responsibilities, outlined above, to detect material misstatements in respect of irregularities, including fraud. The extent to which our procedures are capable of detecting irregularities, including fraud is detailed below:

We gained an understanding of the legal and regulatory framework applicable to the charitable company and the sector in which it operates and considered the risk of acts by the charitable company which were contrary to applicable laws and regulations, including fraud. This included but was not limited to the Companies Act 2006 and the Charities Act 2011.

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Our audit procedures were designed to respond to risks of material misstatement in the financial statements, recognising that the risk of not detecting a material misstatement due to fraud is higher than the risk of not detecting one resulting from error, as fraud may involve deliberate concealment by, for example, forgery, misrepresentations or through collusion.

We focused on laws and regulations that could give rise to a material misstatement in the charitable company's financial statements. Our tests included, but were not limited to:

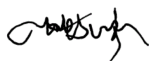
- agreement of the financial statement disclosures to underlying supporting documentation;
- enquiries of the trustees;
- review of minutes of board meetings throughout the period; and
- obtaining an understanding of the control environment in monitoring compliance with laws and regulations.

There are inherent limitations in an audit of financial statements and the further removed non-compliance with laws and regulations is from the events and transactions reflected in the financial statements, the less likely we would become aware of it. We also addressed the risk of management override of internal controls, including testing journals and evaluating whether there was evidence of bias by the trustees that represented a risk of material misstatement due to fraud.

A further description of our responsibilities for the audit of the financial statements is located on the Financial Reporting Council's website at: [www.frc.org.uk/auditorsresponsibilities](http://www.frc.org.uk/auditorsresponsibilities). This description forms part of our auditor's report.

**Use of our report**

This report is made solely to the charitable company's members, as a body, in accordance with Chapter 3 of Part 16 of the Companies Act 2006. Our audit work has been undertaken so that we might state to the charitable company's members those matters we are required to state to them in an auditor's report and for no other purpose. To the fullest extent permitted by law, we do not accept or assume responsibility to anyone other than the charitable company and the charitable company's members as a body, for our audit work, for this report, or for the opinions we have formed.



**Jeremy Chittleburgh CA (Senior Statutory Auditor)**

For and on behalf of  
CT  
Chartered Accountants and Statutory Auditor  
61 Dublin Street  
Edinburgh EH3 6NL

Date: 09 August 2023

**Institute of Health Visiting****Statement of financial activities** (incorporating an income and expenditure account)**For the year ended 31 March 2023**

				<b>2023</b>			<b>2022</b>
	<b>Note</b>	Unrestricted £	Restricted £	<b>Total £</b>	Unrestricted £	Restricted £	<b>Total £</b>
<b>Income from:</b>							
Donations	<b>2</b>	34,883	-	<b>34,883</b>	34,111	-	34,111
Charitable activities:	<b>3</b>						
Grant		125,170	325,967	<b>451,137</b>	139,136	490,532	629,668
Education & Training		688,792	-	<b>688,792</b>	556,017	50,000	606,017
Membership		383,639	-	<b>383,639</b>	303,956	-	303,956
Other		2,750	-	<b>2,750</b>	1,871	-	1,871
Interest		2,738	-	<b>2,738</b>	133	-	133
<b>Total income</b>		<b>1,237,972</b>	<b>325,967</b>	<b>1,563,939</b>	<b>1,035,224</b>	<b>540,532</b>	<b>1,575,756</b>
<b>Expenditure on:</b>							
Charitable activities	<b>4</b>	1,024,820	374,925	<b>1,399,744</b>	863,494	526,253	1,389,747
<b>Total expenditure</b>		<b>1,024,820</b>	<b>374,925</b>	<b>1,399,744</b>	<b>863,494</b>	<b>526,253</b>	<b>1,389,747</b>
<b>Transfer between funds</b>		(2,351)	2,351	-	59,640	(59,640)	-
<b>Net movement in funds</b>		<b>210,802</b>	<b>(46,607)</b>	<b>164,195</b>	<b>231,370</b>	<b>(45,361)</b>	<b>186,009</b>
<b>Reconciliation of funds:</b>							
Total funds brought forward		760,674	221,798	<b>982,472</b>	529,304	267,159	796,463
<b>Total funds carried forward</b>		<b>971,476</b>	<b>175,191</b>	<b>1,146,667</b>	<b>760,674</b>	<b>221,798</b>	<b>982,472</b>

All of the above results are derived from continuing activities. There were no other recognised gains or losses other than those stated above. Movements in funds are disclosed in Note 15 to the financial statements.

**Institute of Health Visiting****Balance sheet**

Company no. 08234405

**As at 31 March 2023**

	Note	£	2023 £	2022 £
<b>Fixed assets:</b>				
Tangible assets	10		10,409	13,647
			<b>10,409</b>	13,647
<b>Current assets:</b>				
Debtors	11	336,060		390,339
Cash at bank and in hand		1,315,222		1,032,009
		<b>1,651,282</b>		1,422,348
<b>Liabilities:</b>				
Creditors: amounts falling due within one year	12	(515,024)		(453,523)
<b>Net current assets</b>			<b>1,136,258</b>	968,825
<b>Total net assets</b>			<b>1,146,667</b>	982,472
<b>The funds of the charity:</b>	15			
Restricted income funds			175,191	221,798
Unrestricted income funds:				
Designated funds			150,000	-
General funds			821,476	760,674
<b>Total charity funds</b>			<b>1,146,667</b>	982,472

02 August 2023

Approved by the trustees on .....and signed on their behalf by:

*Pamela Goldberg*  
 .....  
 Pamela Goldberg  
 Chair

*Christina Liu*  
 .....  
 Christina Liu  
 Treasurer

**Institute of Health Visiting****Statement of cash flows****For the year ended 31 March 2023**

	<b>Note</b>	<b>2023 £</b>	<b>2022 £</b>
<b>Cash flows from operating activities</b>			
<b>Net cash provided by / (used in) operating activities</b>	<b>a</b>	<b>285,575</b>	<b>51,545</b>
<b>Cash flows from investing activities:</b>			
Interest from investments		2,738	133
Purchase of fixed assets		(5,100)	(12,218)
<b>Change in cash and cash equivalents in the year</b>		<b>283,213</b>	<b>39,460</b>
Cash and cash equivalents at the beginning of the year		1,032,009	992,549
<b>Cash and cash equivalents at the end of the year</b>	<b>b</b>	<b>1,315,222</b>	<b>1,032,009</b>

**a) Reconciliation of net income / (expenditure) to net cash flow from operating activities**

	<b>2023 £</b>	<b>2022 £</b>
<b>Net income / (expenditure) for the reporting period (as per the statement of financial activities)</b>	<b>164,195</b>	<b>186,009</b>
Depreciation charges	<b>8,338</b>	8,343
Dividends, interest and rent from investments	<b>(2,738)</b>	(133)
(Increase) in debtors	<b>54,279</b>	(221,402)
Increase/(decrease) in creditors	<b>61,501</b>	78,728
<b>Net cash provided by / (used in) operating activities</b>	<b>285,575</b>	<b>51,545</b>

**b) Analysis of changes in net debt**

	<b>At 1 April 2022 £</b>	<b>Cash flows £</b>	<b>At 31 March 2023 £</b>
Cash in hand and at bank	1,032,009	283,213	<b>1,315,222</b>
<b>Total cash and cash equivalents</b>	<b>1,032,009</b>	<b>283,213</b>	<b>1,315,222</b>

**Institute of Health Visiting****Notes to the financial statements****For the year ended 31 March 2023**

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**1 Accounting policies****a) Basis of preparation**

The financial statements have been prepared in accordance with Accounting and Reporting by Charities: Statement of Recommended Practice applicable to charities preparing their accounts in accordance with the Financial Reporting Standard applicable in the UK and Republic of Ireland (FRS 102) (effective 1 January 2015) - (Charities SORP FRS 102), the Financial Reporting Standard applicable in the UK and Republic of Ireland (FRS 102) and the Companies Act 2006.

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

The trustees consider that there are no significant areas of estimation or judgement.

**b) Public benefit entity**

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

**c) Going concern**

The trustees consider that there are no material uncertainties about the charitable company's ability to continue as a going concern.

The trustees do not consider that there are any sources of estimation uncertainty at the reporting date that have a significant risk of causing a material adjustment to the carrying amounts of assets and liabilities within the next reporting period.

The Trustees have reviewed the charity's financial position, taking into account current performance, the satisfactory levels of reserves and cash at year end and projections. They have considered future plans, along with internal processes and systems for managing financial and operational risks. As a result, the Trustees have a reasonable expectation that the charity has adequate resources and infrastructure to continue operating for the foreseeable future.

**d) Income**

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

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

Income received in advance of the provision of a specified service is deferred until the criteria for income recognition are met.

**e) Interest receivable**

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

**f) Fund accounting**

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

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

**g) Expenditure and irrecoverable VAT**

Expenditure is recognised once there is a legal or constructive obligation to make a payment to a third party, it is probable that settlement will be required and the amount of the obligation can be measured reliably. Expenditure on charitable activities includes the costs of undertaken to further the purposes of the charity and their associated support costs.

Irrecoverable VAT is charged as a cost against the activity for which the expenditure was incurred.



**Institute of Health Visiting****Notes to the financial statements****For the year ended 31 March 2023**

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**h) Allocation of support costs**

Expenditure is allocated to the particular activity where the cost relates directly to that activity. However, the cost of overall direction and administration of each activity, comprising the salary and overhead costs of the central function, is apportioned on the following basis which are an estimate, based on staff time, of the amount attributable to each activity.

**i) Tangible fixed assets**

Fixed assets are stated at original historical cost less aggregate depreciation and are only capitalised at a threshold exceeding £1,000. Depreciation is provided at rates calculated to write off the cost less estimated residual value of each asset on a reducing balance basis over its estimated useful life as follows.

Computer equipment                      3 years straight line

**j) Debtors**

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

**k) Cash at bank and in hand**

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

**l) Creditors and provisions**

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

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

**2 Income from donations and legacies**

	<b>2023</b>	<b>2022</b>
	<b>Total</b>	<b>Total</b>
	<b>£</b>	<b>£</b>
Donations	<b>4,977</b>	2,654
Gift Aid	<b>29,906</b>	31,457
	<b>34,883</b>	34,111

All donations and gift aid are unrestricted in both the current and prior year.

**Institute of Health Visiting****Notes to the financial statements****For the year ended 31 March 2023****3 Income from charitable activities**

<i>Current year</i>			<b>2023</b>
	Unrestricted	Restricted	<b>Total</b>
	£	£	£
Grants:			
Core	77,882	-	<b>77,882</b>
Mental Health Team	406	-	<b>406</b>
Consultancy, Innovation & Enterprise	5,768	-	<b>5,768</b>
AIM Foundation ®	-	45,000	<b>45,000</b>
AIM Healthy Weight Healthy Nutrition	-	34,660	<b>34,660</b>
PATH	-	61,130	<b>61,130</b>
Baby Breathe	-	40,128	<b>40,128</b>
NSPCC LSSP	-	22,378	<b>22,378</b>
Genomics	4,151	-	<b>4,151</b>
Family Action Stockton PSS	12,461	-	<b>12,461</b>
Demontfort University	-	8,500	<b>8,500</b>
0-19 Research Network	24,502	-	<b>24,502</b>
Burdett CVD Project	-	68,146	<b>68,146</b>
Strep A	-	46,025	<b>46,025</b>
	<b>125,170</b>	<b>325,967</b>	<b>451,137</b>
Education & Training	688,792	-	<b>688,792</b>
Membership	383,639	-	<b>383,639</b>
Other	2,750	-	<b>2,750</b>
	<b>1,075,181</b>	<b>-</b>	<b>1,075,181</b>
<b>Total income from charitable activities 2023</b>	<b>1,200,351</b>	<b>325,967</b>	<b>1,526,318</b>
<i>Prior year</i>			<b>2022</b>
	Unrestricted	Restricted	<b>Total</b>
	£	£	£
Grants:			
Core	8,143	94,108	<b>102,251</b>
AIM Foundation ®	-	40,000	<b>40,000</b>
AIM Healthy Weight Healthy Nutrition	-	34,917	<b>34,917</b>
UK Active This Mum Can	26,388	-	<b>26,388</b>
PATH	-	95,596	<b>95,596</b>
Delivery Of Different News 2	58,651	-	<b>58,651</b>
Baby Breathe	-	39,232	<b>39,232</b>
AIMS Southern Health NHS Foundation Trust (SHFT)	18,067	-	<b>18,067</b>
NSPCC LSSP	-	60,963	<b>60,963</b>
Genomics	15,387	-	<b>15,387</b>
NHS VCSE	-	77,066	<b>77,066</b>
Family Action Stockton PSS	12,500	-	<b>12,500</b>
Public Health England Sexual Reproductive Health	-	45,250	<b>45,250</b>
Demontfort University	-	3,400	<b>3,400</b>
	<b>139,136</b>	<b>490,532</b>	<b>629,668</b>
Education & Training	556,017	50,000	<b>606,017</b>
Membership	303,956	-	<b>303,956</b>
Other	1,871	-	<b>1,871</b>
	<b>861,844</b>	<b>50,000</b>	<b>911,844</b>
<b>Total income from charitable activities 2023</b>	<b>1,000,980</b>	<b>540,532</b>	<b>1,541,512</b>

**Institute of Health Visiting****Notes to the financial statements****For the year ended 31 March 2023****4 Analysis of expenditure**

<b>Current year</b>	Charitable activities £	Governance costs £	Support costs £	<b>2023 Total £</b>
Staff costs (Note 6)	989,817	8,928	56,953	<b>1,055,698</b>
Direct Costs	113,398	-	-	<b>113,398</b>
Publicity	-	-	86	<b>86</b>
Travel & Subsistence	-	-	19,870	<b>19,870</b>
Premises costs	-	-	16,030	<b>16,030</b>
Office costs	-	-	114,790	<b>114,790</b>
Legal & Consultancy	-	-	1,057	<b>1,057</b>
Accountancy & Bookkeeping Fees	-	-	26,550	<b>26,550</b>
Audit fees	-	6,329	2,160	<b>8,489</b>
Sundry Expenses	-	-	22,223	<b>22,223</b>
Depreciation	-	-	8,338	<b>8,338</b>
Irrecoverable VAT	-	-	13,215	<b>13,215</b>
	<b>1,103,215</b>	<b>15,257</b>	<b>281,272</b>	<b>1,399,744</b>
Support costs	281,272	-	(281,272)	-
Governance costs	15,257	(15,257)	-	-
<b>Total expenditure 2023</b>	<b>1,399,744</b>	<b>-</b>	<b>-</b>	<b>1,399,744</b>

<b>Prior year</b>	Charitable activities £	Governance costs £	Support costs £	<b>2022 Total £</b>
Staff costs (Note 6)	993,026	8,553	39,053	<b>1,040,632</b>
Direct Costs	205,536	-	-	<b>205,536</b>
Travel & Subsistence	-	-	3,903	<b>3,903</b>
Premises costs	-	-	14,521	<b>14,521</b>
Office costs	-	-	72,882	<b>72,882</b>
Legal & Consultancy	-	-	960	<b>960</b>
Accountancy & Bookkeeping Fees	-	-	21,260	<b>21,260</b>
Audit fees	-	5,050	-	<b>5,050</b>
Sundry Expenses	-	-	4,161	<b>4,161</b>
Depreciation	-	-	8,343	<b>8,343</b>
Irrecoverable VAT	-	-	12,499	<b>12,499</b>
	<b>1,198,562</b>	<b>13,603</b>	<b>177,582</b>	<b>1,389,747</b>
Support costs	177,582	-	(177,582)	-
Governance costs	13,603	(13,603)	-	-
<b>Total expenditure 2022</b>	<b>1,389,747</b>	<b>-</b>	<b>-</b>	<b>1,389,747</b>

**Institute of Health Visiting****Notes to the financial statements****For the year ended 31 March 2023****5 Net income for the year**

This is stated after charging / crediting:

	<b>2023</b>	2022
	£	£
Depreciation	<b>8,338</b>	8,343
Audit fee	<b>6,350</b>	5,050
	<b>14,688</b>	13,393

**6 Analysis of staff costs, trustee remuneration and expenses, and the cost of key management personnel**

Staff costs were as follows:

	<b>2023</b>	2022
	£	£
Salaries and wages	<b>715,521</b>	704,036
Social security costs	<b>66,530</b>	77,293
Employer's contribution to defined contribution pension schemes	<b>146,216</b>	137,544
Seconded staff	<b>127,431</b>	121,759
	<b>1,055,698</b>	1,040,632

No employees earned (excluding employer pension) between £60,000 and £70,000 during the year (2022: 0).

Two employees earned (excluding employer pension) between £70,000 and £80,000 during the year (2022: 2).

The total employee benefits including employers pension contributions of the key management personnel was £94,997 (2022: £91,230). The key management personnel were made up of the Executive Director and Head of Operations.

The charity trustees were not paid or received any other benefits from employment with the charity in the year (2022: £nil).

During the year, no trustee was reimbursed for travel and subsistence costs (2021: 0 trustees £Nil) relating to attendance at meetings of the trustees.

**7 Staff numbers**

The average number of employees (head count based on number of staff employed) during the year was as follows:

	<b>2023</b>	2022
	No.	No.
Charitable activity	<b>26.0</b>	27.0
Support	<b>3.0</b>	2.0
	<b>29.0</b>	29.0

**Institute of Health Visiting****Notes to the financial statements****For the year ended 31 March 2023****8 Related party transactions**

There were no related party transactions including donations from related parties which are outside the normal course of business in the current or preceding year.

**9 Taxation**

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

**10 Tangible fixed assets**

	Computer equipment £
<b>Cost</b>	
At the start of the year	34,644
Additions in year	5,100
	<hr/>
At the end of the year	39,744
	<hr/>
<b>Depreciation</b>	
At the start of the year	20,997
Charge for the year	8,338
	<hr/>
At the end of the year	29,335
	<hr/>
<b>Net book value</b>	
<b>At the end of the year</b>	10,409
	<hr/> <hr/>
At the start of the year	13,647
	<hr/> <hr/>

All of the above assets are used for charitable purposes.

**11 Debtors**

	2023 £	2022 £
Trade debtors	224,180	217,506
Other debtors	111,880	172,833
	<hr/>	<hr/>
	336,060	390,339
	<hr/> <hr/>	<hr/> <hr/>

**12 Creditors: amounts falling due within one year**

	2023 £	2022 £
Trade creditors	21,987	28,854
Taxation and social security	83,545	47,598
Other creditors and accruals	20,271	80,448
Deferred income	389,221	296,623
	<hr/>	<hr/>
	515,024	453,523
	<hr/> <hr/>	<hr/> <hr/>

**Institute of Health Visiting****Notes to the financial statements****For the year ended 31 March 2023****13 Deferred income**

Deferred income comprises membership fees paid in advance.

	<b>2023</b>	2022
	<b>£</b>	£
Balance at the beginning of the year	<b>296,623</b>	256,561
Amount released to income in the year	<b>(296,623)</b>	(256,561)
Amount deferred in the year	<b>389,221</b>	296,623
	<b>389,221</b>	296,623

**14 Analysis of net assets between funds**

<u>As at 31 March 2023</u>	General unrestricted £	Restricted £	<b>Total funds £</b>
Tangible fixed assets	10,409	-	<b>10,409</b>
Net current assets	961,068	175,191	<b>1,136,258</b>
<b>Net assets at the end of the year</b>	<b>971,477</b>	<b>175,191</b>	<b>1,146,667</b>

<u>As at 31 March 2022</u>	General unrestricted £	Restricted £	<b>Total funds £</b>
Tangible fixed assets	13,647	-	<b>13,647</b>
Net current assets	747,027	221,798	<b>968,825</b>
<b>Net assets at the end of the year</b>	<b>760,674</b>	<b>221,798</b>	<b>982,472</b>

## Institute of Health Visiting

## Notes to the financial statements

## For the year ended 31 March 2023

## 15 Movements in funds

<i>Current year</i>	At the start of the year £	Income £	Expenditure £	Transfers	At the end of the year £
<b>Restricted funds:</b>					
AIM HWHN Apr 20 to Apr 23	34,927	34,660	(34,927)		34,660
Anonymous Family Foundation	40,000	45,000	(40,000)		45,000
PATH	-	61,130	(61,130)		-
Baby Breathe	14,685	40,128	(23,617)		31,196
Domestic Abuse	31,056	-	(8,405)		22,651
NSPCC LSSP	-	22,378	(22,378)		-
CHSA	3,022	-	(3,022)		-
NHS VCSE	2,000	-	(2,000)		-
Public Health England Sexual	2,000	-	(2,000)		-
Demontfort University	-	8,500	(8,500)		-
Burdett CVD Project	-	68,146	(64,498)		3,648
Strep A	-	46,025	(27,989)		18,036
Royal Foundation ADBB	-	-	(1,701)	1,701	-
Pan London	-	-	(650)	650	-
Sylvia Adams Trust	94,108	-	(74,108)		20,000
<b>Total restricted funds</b>	<b>221,798</b>	<b>325,967</b>	<b>(374,925)</b>	<b>2,351</b>	<b>175,191</b>
<b>Unrestricted funds:</b>					
<b>Designated funds</b>	-	-	-	<b>150,000</b>	<b>150,000</b>
<b>General funds</b>	<b>760,674</b>	<b>1,237,972</b>	<b>(1,024,819)</b>	<b>(152,351)</b>	<b>821,476</b>
<b>Total funds</b>	<b>982,472</b>	<b>1,563,939</b>	<b>(1,399,744)</b>	<b>-</b>	<b>1,146,667</b>

**Institute of Health Visiting****Notes to the financial statements****For the year ended 31 March 2023**

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**15 Movements in funds (continued)***Purposes of funds***iHV Research Fund**

This consists of income raised through fundraising activities and is available to support research purposes including doctoral studies in the form of bursaries.

**Burdett Trust (Healthy Weight Healthy Nutrition)**

This two year project seeks to up skill all health visitors in nutrition information and best practice in encouraging healthy diets. The training is in the form of a cascade with the trained champions cascading the training to their workplace colleagues.

**Anonymous Family Foundation**

This funding will support the sustainability of the iHV perinatal mental health champions project. It provides regional and a national forum for the champions to stay connected with the iHV and their colleagues.

**Anonymous Family Foundation Nutrition**

This funding will support the updating of Healthy Weight Healthy Nutrition training and the provision of four regional training events for Health Visitors.

**Burdett Autism**

This important one year project will create a toolkit and training for health visitors to support their knowledge and confidence to have meaningful conversations with families of children with autism.

**PATH**

This European partner project involves 13 partners from the UK, France, the Netherlands and Belgium. It is focused on raising the profile of perinatal mental health in mothers and fathers and will produce a host of new resources for partner countries to use over its 3.5 year life span.

**Tiny Lives**

The IHV are leading the development of an e-learning module and training event to support health visitors work with parents/ carers of premature babies who have been through NICU in the North East of England. This is a one year project.

**PHE Sexual Reproductive Health**

Project funder to design and develop resources aimed at advice to expectant and new parents on sexual and reproductive health. All resources now complete e- learning and parent leaflet due for launch. The final report has been submitted for this project.



**Institute of Health Visiting****Notes to the financial statements****For the year ended 31 March 2023**

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**15 Movements in funds (continued)****Baby Breathe**

Funding successful for this RCT of a postpartum smoking intervention to support new mums stay smoke free. Ethics agreed and recruitment due to commence July 2021

**Domestic Abuse**

The For Baby's Sake Trust funded the iHV to develop an online Domestic Abuse digital training toolkit for health visitors.

**NSPCC LSSP**

Look, Say, Sing, Play is an NSPCC national and local campaign which aims to educate parents about the importance of interacting with and understanding their babies, and provides them with gives them tips and resources to demonstrate show them how to do this, and. The NSPCC developed Look, Say, Sing, Play based on a campaign in the USA, which encouraged parents to be more sensitive and responsive to their child's thinking, feeling and behaviour. aims to The NSPCC developed a similar campaign for the UK to encourages responsive parenting with the aim of and reducing the risk of abuse and neglect. The NSPPC carried out an evaluation of Look, Say, Sing, Play research to inform future implementation and delivery how the campaign should be delivered.

**Genomics**

Design, develop and evaluate a series of webinars to raise awareness of genomics, to promote and embed the newly developed Good Practice Points, and to support health visitors' learning about genomics.

**CHSA**

This is a time-limited grant funded programme to support the development of Emotional Wellbeing at Work Champions across the UK.

**VCSE**

Providing support to respond to a potential surge in respiratory infections in children

**Stockton/Family Action**

The Perinatal Support Services was Established in April 2021 to deliver the a Perinatal Support Service offering early intervention, and support to mothers with diagnosed mental health issues or at risk of developing perinatal mental illness from 16 weeks pregnancy to the child's second birthday.

**HIV SRH**

This project will explore HVs current practice, alongside the barriers and enablers to extending the HVs universal role in PC to include advice on contraceptive options and potential for prescribing. These insights will inform the co-production of a bespoke PC training programme for HVs, in partnership with Teesside University

**De Montfort**

4 year funded project from Sept 2021 – Sept 2025: Cluster Randomised Controlled Trial of a Service to Support the Mental Health & Coping of Parents with Excessively Crying Infants.

**Designated Funds**

Following two years of surpluses, the Trustees have decide to invest the funds into a new website and membership platform for the benefit of members.

**Transfers**

Transfers were made in the year against funds which had an allocation against overheads spend and against a few funds which were fully spent at the prior year end and costs weren't fully allocated in the prior year so had shown in unrestricted costs instead.

**Institute of Health Visiting****Notes to the financial statements****For the year ended 31 March 2023****15 Movements in funds (continued)**

<i>Prior year</i>	At the start of the year £	Income £	Expenditure £	Transfers £	At the end of the year £
<b>Restricted funds:</b>					
iHV	10,019	-	(10,019)	-	-
AIM HWHN Apr 20 to Apr 23	29,250	34,917	(29,240)	-	34,927
Anonymous Family Foundation	40,000	40,000	(40,000)	-	40,000
Anonymous Family Foundation Nutrition	3,404	-	-	(3,404)	-
Burdett Autism	14,455	-	(389)	(14,066)	-
Burdett restraint	11,537	-	(5,725)	(5,812)	-
PATH	77,308	95,596	(172,904)	-	-
Tiny Lives	7,758	-	750	(8,508)	-
PHE Sexual Reproductive Health	17,644	-	2,360	(20,004)	-
Baby Breathe	14,686	39,232	(31,387)	(7,846)	14,685
Domestic Abuse	41,099	-	(10,043)	-	31,056
NSPCC LSSP	-	60,963	(60,963)	-	-
CHSA	-	50,000	(46,978)	-	3,022
NHS VCSE	-	77,066	(75,066)	-	2,000
Public Health England Sexual	-	45,250	(43,250)	-	2,000
Demontfort University	-	3,400	(3,400)	-	-
Sylvia Adams Trust	-	94,108	-	-	94,108
<b>Total restricted funds</b>	<b>267,160</b>	<b>540,532</b>	<b>(526,253)</b>	<b>(59,640)</b>	<b>221,798</b>
<b>Unrestricted funds:</b>					
<b>General funds</b>	<b>529,303</b>	<b>1,035,224</b>	<b>(863,494)</b>	<b>59,640</b>	<b>760,674</b>
<b>Total funds</b>	<b>796,463</b>	<b>1,575,756</b>	<b>(1,389,747)</b>	<b>-</b>	<b>982,472</b>

**16 Legal status of the charity**

The charity is a company limited by guarantee and has no share capital. The liability of each member in the event of winding up is limited to £1.



Institute of Health Visiting  
Royal Society for Public Health  
John Snow House  
59 Mansell St  
London  
E1 8AN

Chiene + Tait LLP  
Chartered Accountants and Statutory Auditor  
61 Dublin Street  
EDINBURGH  
EH3 6NL

Dear Sirs

**Institute of Health Visiting**

The following representations are made on the basis of enquiries of management and staff with relevant knowledge and experience such as we consider necessary in connection with your audit of the charitable company's financial statements for the year ended 31 March 2023. These enquiries have included inspection of supporting documentation where appropriate and are sufficient to satisfy ourselves that we can make each of the following representations. All representations are made to the best of our knowledge and belief.

**General**

- 1 We have fulfilled our responsibilities as trustees as set out in the terms of your engagement letter dated 12 February 2021, under the Companies Act 2006 for preparing financial statements in accordance with applicable law and United Kingdom Accounting Standards (United Kingdom Generally Accepted Accounting Practice), for being satisfied that they give a true and fair view and for making accurate representations to you.
- 2 All the transactions undertaken by the charitable company have been properly reflected and recorded in the accounting records.
- 3 All the accounting records have been made available to you for the purpose of your audit. We have provided you with unrestricted access to all appropriate persons within the charitable company, and with all other records and related information requested, including minutes of all management and trustee meetings and correspondence with The Charity Commission.
- 4 The financial statements are free of material misstatements, including omissions.

**Internal control and fraud**

- 5 We acknowledge our responsibility for the design, implementation and maintenance of internal control systems to prevent and detect fraud and error. We have disclosed to you the results of our risk assessment that the financial statements may be misstated as a result of fraud.
- 6 We have disclosed to you all instances of known or suspected fraud affecting the entity involving management, employees who have a significant role in internal control or others that could have a material effect on the financial statements.
- 7 We have also disclosed to you all information in relation to allegations of fraud or suspected fraud affecting the entity's financial statements communicated by current or former employees, analysts, regulators or others.

Email: [info@ihv.org.uk](mailto:info@ihv.org.uk)  
Telephone: 44(0)2072 657352

**Assets and liabilities**

- 8 The charitable company has satisfactory title to all assets and there are no liens or encumbrances on the charitable company's assets, except for those that are disclosed in the notes to the financial statements.
- 9 All actual liabilities, contingent liabilities and guarantees given to third parties have been recorded or disclosed as appropriate.
- 10 We have no plans or intentions that may materially alter the carrying value and where relevant the fair value measurements or classification of assets and liabilities reflected in the financial statements.

**Accounting estimates**

- 11 Significant assumptions used by us in making accounting estimates, including those measured at fair value, are reasonable.

**Legal claims**

- 12 We have disclosed to you all claims in connection with litigation that have been, or are expected to be, received and such matters, as appropriate, have been properly accounted for, and disclosed in, the financial statements.

**Laws and regulations**

- 13 We have disclosed to you all known instances of non-compliance or suspected non-compliance with laws and regulations whose effects should be considered when preparing the financial statements.

**Related parties**

- 14 Related party relationships and transactions have been appropriately accounted for and disclosed in the financial statements. We have disclosed to you all relevant information concerning such relationships and transactions and are not aware of any other matters which require disclosure in order to comply with legislative and accounting standards requirements.

**Subsequent events**

- 15 All events subsequent to the date of the financial statements which require adjustment or disclosure have been properly accounted for and disclosed.

**Going concern**

- 16 We believe that the charitable company's financial statements should be prepared on a going concern basis on the grounds that current and future sources of funding or support will be more than adequate for the charitable company's needs. We have considered a period of twelve months from the date of approval of the financial statements. We believe that no further disclosures relating to the charitable company's ability to continue as a going concern need to be made in the financial statements.

**Grants and donations**

- 17 All grants, donations and other income, the receipt of which is subject to specific terms or conditions, have been notified to you. There have been no breaches of terms or conditions in the application of such income.

We acknowledge our legal responsibilities regarding disclosure of information to you as auditors and confirm that so far as we are aware, there is no relevant audit information needed by you in connection with preparing your audit report of which you are unaware.

Each director has taken all the steps that he ought to have taken as a director in order to make themselves aware of any relevant audit information and to establish that you are aware of that information.

Yours faithfully

*Pamela Goldberg*

.....  
Signed on behalf of the board of trustees

02 August 2023

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Christina Liu

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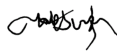
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Jeremy Chittleburgh

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