



INSTITUTE OF HEALTH VISITING

TRUSTEES' REPORT AND FINANCIAL STATEMENTS

FOR THE YEAR ENDING 31ST MARCH 2024

**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 2024

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

Company name	Institute of Health Visiting
Company number	08234405
Charity number	1149745
Working name	iHV
Trustees	<p>Pamela Goldberg*, OBE, FRSA, Chair (from 28 July 2016 to 18 July 2023)</p> <p>Sue Tokley*, Chair (from 18 July 2023)</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>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 Lui* (Treasurer – from 20 April 2022)</p> <p>Dr Michael Fanner PhD, BSc (hons), PGDip, RN (from 11 October 2023)</p> <p>Prof Mitch Blair MBBS, BSc, MSc, FRCPCH, FRCP, FPH, FRSPH, FiHV, (from 30 January 2024)</p>
CEO	<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 & General Purposes Committee</p>
Principal address	<p>John Snow House</p> <p>59 Mansell Street</p> <p>London E1 8AN</p>
Auditor	<p>CT</p> <p>61 Dublin Street</p> <p>Edinburgh</p> <p>EH3 6NL</p>
Bankers	<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 (account closed 28 November 2023)</p> <p>PO Box 1000</p> <p>BX1 1LT</p>
Legal Advisors	<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
For the year ended 31 March 2024

1. Report from the Chair and Chief Executive

The Board presents its annual report together with the financial statements of the Institute of Health Visiting (iHV) for the year ended 31 March 2024. This report looks back at our organisation's performance and the progress that we have made in the last year. In addition to this report, the iHV published its public-facing Annual Report in December 2023 with more detail of our activities across our broad portfolio of work. Together, they showcase the breadth of iHV activities achieved by the talented people that make up the iHV team and in collaboration with so many partner organisations, practitioners and parents.

Every year, health visitors and their teams support millions of families across the UK, making an incredible difference to so many. When sufficiently resourced, health visitors play a crucial role in ensuring that families get good, joined up support - preventing, identifying and treating problems before they reach crisis point. This is not just good news for families! The benefits of an effective health visiting service accrue to numerous government departments, contributing to a multitude of policy priorities for babies, children and families across health, education and social care – taking pressure off other parts of the system and avoiding costly late intervention. However, the sector also faces significant challenges that cannot be ignored, with funding and workforce shortages in many areas impacting on the quality of support that health visitors are able to provide.

We are indebted to all our supporters and partners who have worked with us to raise the profile of health visiting this year. In particular, it has been our privilege and pleasure to continue our work with The Royal Foundation Centre for Early Childhood and HRH The Princess of Wales who shone a spotlight on our wonderful profession. The Princess spent time shadowing health visitors and the Centre launched a short film on health visiting which provided a boost to the profession and attracted global media interest. We have also been delighted with the growing support for health visiting from across the sector.

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 thanks to our members' and supporters, we continue to extend our reach and have been delighted to welcome more individual and corporate members to our growing community over the last year. We have also been able to increase our policy influence and deliver more education, training, research, sector-led improvement and projects than ever before! The achievements are testament to the hard work, clear vision and contributions of so many who have played their part in our organisation's success.

Our work remains focused on meeting the needs of our growing membership, with numerous opportunities for engagement with our members and other stakeholders throughout the year. Their frontline practitioner intelligence informs our work as we provide a much-needed "voice" for our profession. This has helped to shape national policies and contributed to numerous major pieces of work this year – these include our witness evidence submitted to the Module 3 of the COVID-19 Inquiry and our evidence submission for the Working Together to Safeguard Children 2023 consultation. There is clear evidence that our work is contributing to an increased recognition of the importance of prevention, public health and investment in the earliest years of life across governments, political parties and wider society – we are optimistic for the future and there is much to celebrate.

We are extremely grateful to our supporters, members, funders and friends. This coupled with the energy and expertise of the iHV team and Board of trustees have all helped to shape the iHV into the effective organisation that it is today. 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 2006.

[*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 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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2023-24 Business Plan: Objectives and activities

The iHV Business Plan and objectives were 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:

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 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.

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 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.

Institute's activities against planned objectives in 2023/24

The Institute has built on its success as the most rapidly growing professional body and voice for health visiting. Our day-to-day activity is organised under four main work programmes, with matrix working across teams and delivered by 28 members of staff.

I. Policy influencing (including Education policy):

Influencing policies affecting health remains at the heart of health visiting and the work of the iHV. We have achieved this using a variety of methods (see full details in our public facing Annual Report), including:

- **Engagement in numerous strategic national meetings with policymakers and key stakeholders** - including the Maternity Disparities Taskforce; National Children and Young People's Transformation Stakeholder Group; Start for Life Roundtables; National Safeguarding Steering Group; CNO England Professional Strategy Stakeholder forum and working groups; Genomics England Newborn Programme Steering Group; Northern Ireland's Healthy Child Healthy Future Programme Board; and Children's Commissioner Roundtables – amongst many others.
- **Manifesto influencing:** Alongside our work with the government, we also engaged with the UK Labour Party policy team through our non-partisan role to influence manifestoes in advance of the General Election. We provided evidence to its policy team, attended a series of roundtable events focused on maternity, neonatal and mental health policy, and the launch of the Labour Party Health manifesto.
- **iHV keynote speaker presentations** at All Party Parliamentary Groups, national and international conferences.

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- **iHV publications** – case studies, policy briefings, survey reports and infographics.
- **iHV film production**, growing our library of films on health visiting, this year:
 - We developed an iHV film in partnership with leading paediatricians to highlight increasing rates of A&E attendance in children aged 0-4 years, titled [“Can you see my baby? Health visitors prevent emergencies”](#) launched in December 2023.
 - We were also delighted to support The Royal Foundation Centre for Early Childhood and HRH The Princess of Wales in their “Shaping Us” campaign and organise a series of health visiting shadowing visits for the Princess – in June 2023, Kensington Palace released a fabulous new [film](#) to improve public understanding of the role of health visitors.
- **Partnerships:** Working with partner organisations, supporting their campaigns to maximise impact – the iHV is a Steering Group member of the First 1001 Days Movement and Maternal Mental Health Alliance, and a member of numerous coalition groups including the Health Policy Influencing Group, One Voice Movement for maternity care, Obesity Health Alliance, and Breastfeeding Alliance.
- **Collating and presenting the evidence:**
 - Evidence submissions for numerous government consultations, inquiries and parliamentary debates – high-profile requests for evidence included the health visiting witness statement for Module 3 of the COVID-19 Inquiry; and Working Together to Safeguard Children 2023 consultation.
 - Published our [annual State of health visiting in the UK survey report](#), January 2024: this provided important frontline practitioner intelligence on widening health inequalities and workforce challenges, attracting excellent media coverage and widespread support.
- **Education and workforce policy:** Our work has focused on influencing health visitor regulatory reform, workforce planning, career progression (including advanced practice) and support for the Office for Health Improvement and Disparities “Conditions for Success” for health visiting in England. We published the [iHV Career Pathway](#) and pan-London report [“Recruiting SCPHN Students in London: a roadmap to success”](#). Our work to develop a “Maturity Matrix” and audit of education tool is ongoing.

II. Learning and Development:

2023/24 has been an extremely successful year for our Learning and Development team, delivering more training events than ever before. This year's highlights include:

- **A growing training offer:** Alongside our well-established and award-winning training programmes which are delivered as private training commissions and hosted training events, we have continued to grow our portfolio with a number of new topics. Our perinatal and infant mental health training remains popular; and we have experienced growing interest in our Changing Conversations around Autism, Leadership, Neonatal Families, and This Mum Moves Ambassador programmes, as well as Healthy Weight Healthy Nutrition, and Postnatal Contraception training courses.
- **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.

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III. Innovation and Research (including mental health):

We continue to receive regular requests to partner with others on innovations, practice development 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.

Despite a much more challenging financial landscape for research and funded projects this year, we have delivered a number of successful projects and grant-funded work in partnership with academic, professional and third sector organisations.

The following summary provides examples of our projects, research and partners during 2023/2024 – with further details in our Annual Report and on our website:

- The Royal Foundation Centre for Parent and Child Support – [Alarm Distress Baby Scale \(ADBB\) implementation feasibility study](#) (March 23- March 2024).
- AIMS Foundation funded iHV Healthy Weight Healthy Nutrition, Oral Health and Physical Activity programme (Ongoing since May 2020 - and with a further 3 years funding secured).
- Burdett Trust for Nursing – cardiovascular disease (CVD) prevention (September 2022 – March 2024). 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 – 0-19 Clinical Research Network (April 2022- April 24).
- Genomics England Programme (March 21 - ongoing). To raise awareness and support health visitor practice in genomics.
- NHS England (London) – A programme of interventions and research on Specialist Community Public Health Nurse student recruitment and workforce development (Dec 22– June 24).
- Supported by Kindred Squared - [Urgent Care Project for children 0-4 years](#); a rapid review of the changing trend of Emergency Department presentations for children aged 0-4 years and the role of health visiting services in the management of minor illnesses.
- Other research collaborations and partnerships: 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. Thanks to generous partner funding from Western Sydney University, we were able to recruit a Senior iHV Research Lead, with a split post leading iHV research, alongside a programme of research for the Maternal Early Childhood Sustained Home-visiting (MECSH) team in England.

Mental Health:

Our work in mental health remains a key priority for us at the iHV. We have raised the importance of mental health and supported practice in the following ways:

- **Influencing policy and engaging in research:** Contributing across all four nations to support their respective mental health strategies and in response to national consultations, guidance and research. The mental health team worked with our Senior Research Lead to successfully deliver the ADBB study (listed above) to support health visitors' work in infant mental health.
- **Publication** of iHV Report ["Specialist Health Visitors in Perinatal and Infant Mental Health: where they are and what they're doing"](#) in May 2023.
- **Training:**
 - Our PIMH training remains our most sought-after training and we have a growing portfolio of training options on a variety of mental health topics. This includes our popular iHV PIMH Champions training, as well as specialist training in Fathers' mental health and working with LGBTIQ+ families. The national and international iHV PIMH Champions 'family' now stands at 4,500 individuals and our regular PIMH Forums continue to attract good interest.
 - Our 5th Annual iHV PIMH Conference was held in June, with 180 people joining us in person in Manchester and a further 150 delegates joining online.

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IV. Corporate team:

Membership: The iHV relies on its unrestricted income from member donations to support the delivery of its charitable objectives. Despite the enormous challenges facing the health visiting profession and falling workforce numbers, our membership remains steady this year, maintaining a 24% increase since March 2022.

Meeting the needs of our members remains a priority. We engage regularly with them through iHV Networking events, iHV Insights events, monthly iHV Times newsletter, our Health Visitor Advisory Forum and annual survey. They value the 'national voice' that we provide for the profession through our policy influencing work, as well as our growing suite of resources for members. These include our Good Practice Points, Parent Tips, web-based resources, podcasts and publications, which remain popular. We also regularly promote the work of our members through Voices blogs, news stories and conference presentations.

We charge a modest fee for iHV membership to support our ambition that all health visitors will become members. To support our members during the pandemic and subsequent cost of living crisis, we have not increased our membership rates for the last four years. However, due to inflationary pressures across all areas of our work, the Board has approved a small increase in membership fees from August 2024 to enable us to continue to deliver high quality support for our members.

Conferences and events:

We delivered four successful conferences this year, with a mix of in-person and online options for our delegates to provide flexibility and choice:

- **5th Annual PIMH conference** held in Manchester on Monday 19 June.
- **Evidence-based Practice conference** in Manchester, 21 September 2023.
- **Leadership conference and Annual Event** in London, 6 December 2023: Following the conference, we were joined by over 100 dignitaries and guests for our annual event – Dr Sarah Mc Mullen, Director of Policy at the Royal Foundation provided the keynote address. Honorary Fellow awards were conferred to Professor Jane Barlow, our previous Chair Pamela Goldberg, and ex-trustee Jane Williams.
- **National SEND conference, 14 March, Hertfordshire:** Our first national SEND conference was a success with very positive feedback – held in partnership with Hertfordshire Community NHS Trust.

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 and the development of local key performance indicators.

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 and high levels of visibility – in 2023/24 we had regular coverage, including television, radio, high-profile print media and social media.

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 members of project Steering Groups, and/ or membership of 'Task and Finish' groups focused on specific iHV workstreams. The Chair, CEO, Honorary Treasurer, Head of Operations 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 July 2023, Pamela Goldberg, our existing Chair stepped down when her second term expired. Following an external recruitment and interview process, we were delighted to appoint Sue Tokley as the new iHV Chair. Sue transitioned to iHV Chair on 18 July 2023 and brings a wealth of experience and skills from her background as a Chief Nurse and through her charity work. Sue's appointment was unanimously approved by the Board in April 2023 following an open recruitment process.

Following her appointment on the iHV staff team, Sharin Baldwin stepped down from her position as Trustee at the April Board meeting in 2023, prior to taking up her post as Senior Research Lead at the iHV in July 2023. We were delighted to welcome two new trustees, Professor Mitch Blair and Dr Michael Fanner to the Board this year. They both bring a wealth of experience in research and current clinical practice to strengthen our Board in these areas.

Governance: The CEO is supported by the Senior Management Team (SMT) who meet monthly to review organisational performance, governance and risks in the Governance meeting, with escalation of urgent matters to the Trustees between Board meetings. The SMT also meet in London for an "awayday" in quarter 4 each year to support business planning – this builds 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:

- Finance policies: Remuneration policy and Capitalisation policy.
- HR policies: Disciplinary policy and procedure, Annual leave policy, and Personal development and planning policy.
- Safeguarding: Child safeguarding policy.

Financial systems and IT upgrade: Every year, each team reviews its databases and processes to ensure that we remain compliant with GDPR. This is overseen by our Head of HR, who also leads our Information Governance, 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. We continue to use Xero online accounting software, which 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. In 2023/24, we set out our commitments for sustainability in our updated Sustainability Policy. This sets out our four key business objectives that are included each year, with team and individual objectives in our annual Business Plan for:

- **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,

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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.

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

Secondments:

- Ministry for Levelling Up, Housing & Communities
- Western Sydney University

Grant/ project funders:

- NHS England
- NHS England (London)
- National Institute for Health and Care Research (NIHR)
- Genomics England
- The Royal Foundation Centre for Early Childhood
- Early Education Endowment Foundation
- The Tiny Lives Trust
- The AIM Foundation
- Kindred Squared
- Burdett Trust for Nursing
- The Sylvia Adams Charitable Trust
- Barnardo's
- This Mum Moves/ Active Pregnancy Foundation
- Birmingham Community Healthcare Trust and Birmingham 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 and one of our key objectives is to ensure that the iHV is a 'great place to work'. 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 left the organisation; one retired and one left to pursue a different career direction. This has enabled us to review our team structures, providing opportunities for other members of the team and reducing costs in areas where grant funding has ended. We have also welcomed three new members of staff to the team and have been pleased by the calibre of applicants and individuals recruited to these posts.

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.

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Supporting staff wellbeing remains a priority. Our senior management team is working well - the 'Head of' departments support staff through regular 1:1s, monthly team meetings, smaller team meetings and our annual team awayday each year.

Quality assurance: Quality underpins all that the iHV does. All projects have a project governance group chaired by either the CEO or a Trustee. We have robust Quality Assurance processes; our Quality Assurance toolkit and the principles set out in our Ethical Collaborations Policy 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. The trustees continue to review the assessment of the major risks to which the charity is exposed and consider that 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. In addition, due to uncertainties around inflation and reduced grant funded and research income opportunities, there is a risk that our expenditure might exceed our income.

Mitigation: The Chair and Treasurer meet regularly with the CEO and our independent accountants to monitor income and expenditure regularly. Our income streams are as diversified as possible to spread the risk and the iHV has healthy reserves. All Heads of Department have sight of budgets and use project management skills to manage costs, time and quality. Business planning is managed through our monthly governance group. 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 (or linked to us through our partnership work), 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.

Mitigation: 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'. We have a robust Ethical Collaboration policy and apply due diligence when entering into partnerships with external organisations.

Human resource management – workforce capacity: There is a risk that iHV workload may exceed staffing capacity, and staff wellbeing may be impacted – which, in turn, may impact on staff sickness, iHV delivery with reputational and financial risks.

Mitigation: Continuous workflow mapping and planning is undertaken by the Heads of Departments, 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. The CEO report to the trustees covers staffing requirements. Staff wellbeing is reviewed at individual 1:1s with line managers and we support team wellbeing through our annual 2-day 'Awayday', flexible working policy and signposting to additional support where needed.

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Objectives for the year ahead 2024/2025:

Our work spans the breadth of health visiting policy, practice, education, training and research, giving us a unique understanding of the strategic context for health visiting now and in the future. Within this, we focus our resources where we think we can make the biggest impact. Our business plan for 2024/25 identified four key priorities for our work (what we do):

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 national and local government policy, encouraging long-term thinking and working with stakeholders to maximise impact.
- We will continue in our efforts to influence policies affecting health as all parties set out their manifesto and subsequent delivery plans for child health ahead of the general election.
- Build the case for advanced practice in health visiting, working with stakeholders.

2) Support innovation and research in health visiting:

- Work in partnership with others to support service innovation and quality improvement.
- Lead and collaborate with others on project development, implementation and evaluation.
- Promote and support research development in health visiting.
- Contribute to the evidence base for health visiting.

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

- Offer a range of high-quality and sustainable development opportunities to enhance health visitor workforce capability (and those they work alongside), via training, resources, conferences & events.
- Promote and support leadership development in health visiting.
- Increase access to CPD opportunities and products via iHV platforms.

4) Grow, sustain and support our membership and meet their needs

- Promote and provide a membership offer that meets our members' needs; offering value, supporting evidence-based practice and building pride and confidence within the workforce.
- Build a personalised membership approach to support our members' continuous professional development requirements.
- Engage with our members to understand their needs and provide opportunities for professional networking, engagement in iHV workstreams and policy influencing.

We have a further four priorities to ensure robust governance within our organisation (how we do it):

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

- Provide opportunities for employees to grow and develop.
- Promote 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.

6) Ensure governance, infrastructure, financial and quality management:

- Ensure robust governance and communication across teams.
- Scope and develop a new iHV website and Customer Relationship Management system (CRM) to meet our organisational and user needs.
- Ensure that the "iHV brand", and stakeholders' perceptions of it as high quality, continues to grow.

Institute of Health Visiting
Trustee's Report
For the year ended 31 March 2024

7) Promote 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 strengthen our work.

8) Enhance environmental and sustainability approach

- Leading by example: Bench our performance and develop an ambitious iHV plan for sustainability for the next two years.
- Advocacy: To influence policies affecting health, by advocating for 'health equity', baby and children's rights, and the reduction of harms to health caused by environmental impacts now and in the future.
- Supporting and equipping iHV members: In their health advocacy role to improve sustainability in their workplaces and through their work with babies, children, families and communities.
- Supporting and equipping iHV staff: with the knowledge they need to make a positive impact, and support the iHV's ambitions, on environmental sustainability.

Financial Review

In line with many other charities, this has been a challenging year financially for the iHV as we faced increased inflationary pressures and a much more competitive environment for attracting grant and research income as public sector budgets experienced significant cuts. Fortunately, the iHV is in a strong financial position with sufficient reserves to weather the storms. The Board takes a long-term view on iHV finances having ended the previous three financial years with a healthy surplus to draw from and invest in the organisation's growth in the future.

Having set a deficit budget of -£56,779 at the start of the year, alongside some deferred income of £60k for 2023/24 being allocated in the 2022/23 financial statements, our end of year position is slightly better than expected. The Institute has finished the year with a deficit of £52,897 (2023: surplus of £164,195). Our total income has increased from £1,563,939 in 2022/23 to £1,601,973 in 2023/24. This variation on prior year is due to an increase in Education income offset by a decrease in Grants.

Expenditure in the year has increased to £1,654,870 (2023: £1,399,744) due to an increase in staff expenditure.

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 £1,093,770 (2023: £1,146,667) of which £1,039,181 (2023: £971,476) are free reserves (unrestricted funds). This equates to approximately 7 months standard running costs. The Institute will use some of these designated reserves as capital expenditure on a programme of work to replace its website and improve interoperability between its numerous IT systems commencing in 2024/25. This will support us to achieve sustainability for future years.

Institute of Health Visiting
Trustee's Report
For the year ended 31 March 2024

The Trustees have reviewed the charity's financial position, taking into account current performance, the ongoing inflationary pressures, 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.

Susan Tokley

Susan Tokley
Chair

Date 22 August 2024

Institute of Health Visiting
Independent Auditor's Report
For the year ended 31 March 2024

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 2024 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 2024, 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
For the year ended 31 March 2024**

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 16, 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.

**Institute of Health Visiting
Independent Auditor's Report
For the year ended 31 March 2024**

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. 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: 30 August 2024

Institute of Health Visiting**Statement of financial activities** (incorporating an income and expenditure account)**For the year ended 31 March 2024**

		Unrestricted £	Restricted £	2024 Total £	Unrestricted £	Restricted £	2023 Total £
	Note						
Income from:							
Donations	2	34,656	-	34,656	34,883	-	34,883
Charitable activities:	3						
Grant		78,818	257,200	336,018	125,170	325,967	451,137
Education & Training		821,338	-	821,338	688,792	-	688,792
Membership		402,861	-	402,861	383,639	-	383,639
Other		2,575	-	2,575	2,750	-	2,750
Interest		4,525	-	4,525	2,738	-	2,738
Total income		1,344,773	257,200	1,601,973	1,237,972	325,967	1,563,939
Expenditure on:							
Charitable activities	4	1,277,068	377,802	1,654,870	1,024,819	374,925	1,399,744
Total expenditure		1,277,068	377,802	1,654,870	1,024,819	374,925	1,399,744
Transfer between funds		-	-	-	(2,351)	2,351	-
Net movement in funds		67,705	(120,602)	(52,897)	210,802	(46,607)	164,195
Reconciliation of funds:							
Total funds brought forward		971,476	175,191	1,146,667	760,674	221,798	982,472
Total funds carried forward		1,039,181	54,589	1,093,770	971,476	175,191	1,146,667

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 16 to the financial statements.

Institute of Health Visiting

Balance sheet

Company no. 08234405

As at 31 March 2024

	Note	£	2024 £	2023 £
Fixed assets:				
Tangible assets	10		6,102	10,409
			<u>6,102</u>	<u>10,409</u>
Current assets:				
Debtors	11	308,317		336,060
Cash at bank and in hand		1,336,662		1,315,222
		<u>1,644,979</u>		<u>1,651,282</u>
Liabilities:				
Creditors: amounts falling due within one year	12	(557,311)		(515,024)
				<u>(515,024)</u>
Net current assets			<u>1,087,668</u>	<u>1,136,258</u>
Total net assets			<u>1,093,770</u>	<u>1,146,667</u>
The funds of the charity:	15			
Restricted income funds			54,589	175,191
Unrestricted income funds:				
Designated funds			150,000	150,000
General funds			889,181	821,476
			<u>1,093,770</u>	<u>1,146,667</u>
Total charity funds			<u>1,093,770</u>	<u>1,146,667</u>

Approved by the trustees on 2024年8月30日.....and signed on their behalf by:

Susan Tokley
.....
Sue Tokley
Chair

Christina Lui
.....
Christina Lui
Treasurer

Institute of Health Visiting**Statement of cash flows****For the year ended 31 March 2024**

	Note	2024 £	2023 £
Cash flows from operating activities			
Net cash provided by / (used in) operating activities	a	20,314	285,575
Cash flows from investing activities:			
Interest from investments		4,525	2,738
Purchase of fixed assets		(3,399)	(5,100)
Change in cash and cash equivalents in the year		21,440	283,213
Cash and cash equivalents at the beginning of the year		1,315,222	1,032,009
Cash and cash equivalents at the end of the year	b	1,336,662	1,315,222

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

	2024 £	2023 £
Net income / (expenditure) for the reporting period (as per the statement of financial activities)	(52,897)	164,195
Depreciation charges	7,706	8,338
Dividends, interest and rent from investments	(4,525)	(2,738)
(Increase) in debtors	27,743	54,279
Increase/(decrease) in creditors	42,287	61,501
Net cash provided by / (used in) operating activities	20,314	285,575

b) Analysis of changes in net debt

	At 1 April 2023 £	Cash flows £	At 31 March 2024 £
Cash in hand and at bank	1,315,222	21,440	1,336,662
Total cash and cash equivalents	1,315,222	21,440	1,336,662

Institute of Health Visiting**Notes to the financial statements****For the year ended 31 March 2024**

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 2024

- 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

	2024 Total £	2023 Total £
Donations	2,478	4,977
Gift Aid	32,178	29,906
	<u>34,656</u>	<u>34,883</u>

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 2024****3 Income from charitable activities**

<i>Current year</i>			2024
	Unrestricted	Restricted	Total
	£	£	£
Grants:			
Core	18,772	-	18,772
Consultancy, Innovation & Enterprise	9,382	-	9,382
AIM Healthy Weight Healthy Nutrition	-	40,000	40,000
Baby Breathe	-	43,373	43,373
Genomics	24,907	-	24,907
Surviving Crying	-	6,800	6,800
0-19 Research Network	25,757	-	25,757
Burdett - CVD Project	-	69,511	69,511
Royal Foundation/ADBB	-	46,511	46,511
Pan London	-	42,955	42,955
NHS England Public Health Campaign	-	8,050	8,050
	78,818	257,200	336,018
Education & Training	821,338	-	821,338
Membership	402,861	-	402,861
Other	2,575	-	2,575
	1,226,774	-	1,226,774
Total income from charitable activities 2024	1,305,592	257,200	1,562,792
<i>Prior year</i>			2023
	Unrestricted	Restricted	Total
	£	£	£
Grants:			
Core	77,882	-	77,882
AIM Foundation ®	406	-	406
AIM Healthy Weight Healthy Nutrition	5,768	-	5,768
UK Active This Mum Can	-	45,000	45,000
PATH	-	34,660	34,660
Delivery Of Different News 2	-	61,130	61,130
Baby Breathe	-	40,128	40,128
AIMS Southern Health NHS Foundation Trust (SHFT)	-	22,378	22,378
NSPCC LSSP	4,151	-	4,151
Genomics	12,461	-	12,461
NHS VCSE	-	8,500	8,500
Family Action Stockton PSS	24,502	-	24,502
Public Health England Sexual Reproductive Health	-	68,146	68,146
Demontfort University	-	46,025	46,025
	125,170	325,967	451,137
Education & Training	688,792	-	688,792
Membership	383,639	-	383,639
Other	2,750	-	2,750
	1,075,181	-	1,075,181
Total income from charitable activities 2024	1,200,351	325,967	1,526,318

Institute of Health Visiting**Notes to the financial statements****For the year ended 31 March 2024****4 Analysis of expenditure**

Current year	Charitable activities £	Governance costs £	Support costs £	2024 Total £
Staff costs (Note 6)	1,161,446	9,564	75,577	1,246,587
Direct Costs	154,903	-	-	154,903
Publicity	-	-	2,782	2,782
Travel & Subsistence	-	-	29,967	29,967
Premises costs	-	-	17,124	17,124
Office costs	-	-	131,127	131,127
Legal & Consultancy	-	-	1,325	1,325
Accountancy & Bookkeeping Fees	-	-	28,580	28,580
Audit fees	-	7,127	-	7,127
Sundry Expenses	-	-	10,610	10,610
Depreciation	-	-	7,706	7,706
Irrecoverable VAT	-	-	17,032	17,032
	1,316,349	16,691	321,830	1,654,870
Support costs	321,830	-	(321,830)	-
Governance costs	16,691	(16,691)	-	-
Total expenditure 2024	1,654,870	-	-	1,654,870

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

Institute of Health Visiting**Notes to the financial statements****For the year ended 31 March 2024****5 Net income for the year**

This is stated after charging / crediting:

	2024 £	2023 £
Depreciation	7,706	8,338
Audit fee	7,000	6,350
	7,000	6,350

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

Staff costs were as follows:

	2024 £	2023 £
Salaries and wages	903,221	715,521
Social security costs	87,609	66,530
Employer's contribution to defined contribution pension schemes	174,042	146,216
Seconded staff	81,715	127,431
	1,246,587	1,055,698

Two employees earned (excluding employer pension) between £60,000 and £70,000 during the year (2023: 0).

One employees earned (excluding employer pension) between £70,000 and £80,000 during the year (2023: 2).

The total employee benefits including employers pension contributions of the key management personnel was £102,579 (2023: £94,997). 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 (2023: £nil).

During the year, no trustee was reimbursed for travel and subsistence costs (2023: 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:

	2024 No.	2023 No.
Charitable activity	26.0	26.0
Support	3.0	3.0
	29.0	29.0

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 £
Cost	
At the start of the year	39,744
Additions in year	3,399
	43,143
At the end of the year	43,143
Depreciation	
At the start of the year	29,335
Charge for the year	7,706
	37,041
At the end of the year	37,041
Net book value	
At the end of the year	6,102
At the start of the year	10,409

All of the above assets are used for charitable purposes.

Institute of Health Visiting

Notes to the financial statements

For the year ended 31 March 2024**11 Debtors**

	2024 £	2023 £
Trade debtors	190,435	224,180
Other debtors	117,882	111,880
	308,317	336,060

12 Creditors: amounts falling due within one year

	2024 £	2023 £
Trade creditors	37,634	21,987
Taxation and social security	42,517	83,545
Other creditors and accruals	35,839	20,271
Deferred income	441,321	389,221
	557,311	515,024

13 Deferred income

Deferred income comprises membership fees paid in advance.

	2024 £	2023 £
Balance at the beginning of the year	389,221	296,623
Amount released to income in the year	(389,221)	(296,623)
Amount deferred in the year	441,321	389,221
Balance at the end of the year	441,321	389,221

14 Analysis of net assets between fundsAs at 31 March 2024

	General unrestricted £	Restricted £	Total funds £
Tangible fixed assets	6,102	-	6,102
Net current assets	1,033,079	54,589	1,087,668
Net assets at the end of the year	1,039,181	54,589	1,093,770

As at 31 March 2023

	General unrestricted £	Restricted £	Total funds £
Tangible fixed assets	10,409	-	10,409
Net current assets	961,067	175,191	1,136,258
Net assets at the end of the year	971,476	175,191	1,146,667

Institute of Health Visiting

Notes to the financial statements

For the year ended 31 March 2024

15 Movements in funds

<i>Current year</i>	At the start of the year £	Income £	Expenditure £	Transfers £	At the end of the year £
Restricted funds:					
AIM HWHN Apr 20 to Apr 23	34,660	-	(34,660)	-	-
AIM HWHN 3 years from June 23	-	40,000	(30,000)	-	10,000
AIM Mental Health	45,000	-	(45,000)	-	-
Baby Breathe	31,196	43,373	(74,569)	-	-
Domestic Abuse	22,651	-	(22,651)	-	-
Surviving Crying	-	6,800	(6,800)	-	-
Burdett CVD Project	3,648	69,511	(32,918)	-	40,241
Strep A	18,036	-	(18,036)	-	-
Royal Foundation ADBB	-	46,511	(46,511)	-	-
Pan London	-	42,955	(38,607)	-	4,348
NHS England Public Health Campaign	-	8,050	(8,050)	-	-
Sylvia Adams Trust	20,000	-	(20,000)	-	-
Total restricted funds	175,191	257,200	(377,802)	-	54,589
Unrestricted funds:					
Designated funds	150,000	-	-	-	150,000
General funds	821,476	1,344,773	(1,277,068)	-	889,181
Total funds	1,146,667	1,601,973	(1,654,870)	-	1,093,770
<i>Prior year</i>	At the start of the year £	Income £	Expenditure £	Transfers £	At the end of the year £
Restricted funds:					
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
Total restricted funds	221,798	325,967	(374,925)	2,351	175,191
Unrestricted funds:					
Designated funds	-	-	-	150,000	150,000
General funds	760,674	1,237,972	(1,024,819)	(152,351)	821,476
Total funds	982,472	1,563,939	(1,399,744)	-	1,146,667

Institute of Health Visiting

Notes to the financial statements

For the year ended 31 March 2024

15. Movements in funds (continued)

Purposes of funds

AIM (Healthy Weight Healthy Nutrition) (3yr from June23)

This funding will support the updating of Healthy Weight Healthy Nutrition training and the provision of four regional training events for Health Visitors. This is a 3 year grant programme commencing in April 2023

AIM (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.

AIM (Mental Health)

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.

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.

De Montfort (Surviving Crying)

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.

Burdett CVD Project

Strengthening health visitor's role in prevention and early intervention for cardiovascular disease, through application of the family partnership framework to help families adopt healthier behaviours.

Strep A

This funding is for the iHV to support the unforeseen pressures on paediatric services.

Royal Foundation ADBB

This funding is to fund a Alarm Distress BaBy Scale (ADBB) training programme and field trial from March 23 to March 24.

Pan London

HEE (London) funded Specialist Community Public Health Nurses (SCPHN) improving Education Infrastructure Project to upskill Health Visitors and School Nurses to deliver the Nursing and Midwifery Council (NMC) Standard for Student Supervision and Assessment (SSSA) (2019) role supporting high quality post registered Student placements across an ICB Footprint x 5 in London.

Burdett CVD Project

Strengthening health visitor's role in prevention and early intervention for cardiovascular disease, through application of the family partnership framework to help families adopt healthier behaviours.

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.

Strep A

This funding is for the iHV to support the unforeseen pressures on paediatric services.

Sylvia Adams Trust

Open funding grant to the iHV to help them achieve their mission of strengthening of health initiatives for babies and infants in England

Institute of Health Visiting

Notes to the financial statements

For the year ended 31 March 2024

15. Movements in funds (continued)

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.

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.

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.

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

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.

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.