

HEALTHWATCH RICHMOND LTD COMPANY LIMITED  
BY GUARANTEE NO. 8382351 AND REGISTERED  
CHARITY NO. 1152333

TRUSTEES REPORT AND FINANCIAL STATEMENTS  
1ST APRIL 2024 - 31ST MARCH 2025

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## REPORT OF THE TRUSTEES OF HEALTHWATCH RICHMOND LTD

The Trustees, who are also directors of the charity for the purposes of the Companies Act, submit their annual report and the financial statements for the accounting period ended 31st March 2025. The Trustees have adopted the provisions of the Financial Reporting Standard applicable in the UK and Republic of Ireland (FRS 102) (effective 1 January 2015) - Charities SORP (FRS102), the Financial Reporting Standard applicable in the UK and Republic of Ireland (FRS 102) and the Companies Act 2006 in preparing the annual report and financial statements of the charity.

## REFERENCE AND ADMINISTRATIVE DETAILS

### TRUSTEES/DIRECTORS OF THE CHARITY & COMPANY

Simon Boddis	(Chair)
Sian Rees	(Audit Committee Chair)
Anne Marimuthu	(Treasurer)
James Hunt	
Dugald Millar	
Lynda Crellin	
Alan McNab	
Joseph Hill	(Resigned March 2025)
Philip Bunnell	
Annette Arnold	(Appointed April 2024)
Anthony Carraro	(Appointed February 2025)
Paul Hainsworth	(Appointed February 2025)

### CHIEF OFFICER

Michael Derry

### ACCOUNTANT

Community Action Sutton, Granfers Centre, 73-79 Oakhill Road, Sutton, SM1 3AA

### INDEPENDENT EXAMINER

Mr Paul Ross, FCA

### BANKERS

**Current Account:** Unity Trust Bank plc: Four Brindleyplace, Birmingham, B1 2JB

**Deposit Accounts:** Scottish Widows, PO Box 883, LEEDS, LS1 9TY

United Trust Bank, One Ropemaker Street, London EC2Y 9AW

Cambridge & Counties, Charnwood Court, 5B New Walk, Leicester, LE1 6TE

### REGISTERED OFFICE

82 Hampton Road, Twickenham, TW2 5QS

**COMPANY NUMBER:** 8382351, **CHARITY NUMBER:** 1152333

Previously registered as Richmond Health Voices until November 2020

## STRUCTURE, GOVERNANCE AND MANAGEMENT

### GOVERNING DOCUMENT

Healthwatch Richmond LTD is a company limited by guarantee governed by Articles of Association that were signed on 30th January 2013. It was registered with the Charity Commission on 7th June 2013 and changed its name to Healthwatch Richmond LTD at its AGM on November 26<sup>th</sup> 2020. Its membership is open to persons aged over 18 and corporate bodies who support the organisation's aims and objects.

### LOCAL HEALTHWATCH

Healthwatch Richmond LTD's delivers the Local Healthwatch function for Richmond. Local Healthwatch organisations are set up by the Health and Social Care Act 2012 as a statutory service commissioned by local authorities. The aim of Local Healthwatch is to give citizens and communities a stronger voice to influence and challenge how health and social care services are provided within their area and to help people to find the information they need to access services via a signposting service.

### ORGANISATIONAL STRUCTURE

Trustees of Healthwatch Richmond LTD are also the Company Directors. The organisation is managed on a day to day basis by a Chief Officer who reports to the Board.

Trustees oversee the work of the organisation via the Board of Trustees which meets at least quarterly. The Board agreed the work plan, budget and the policies and procedures of the organisation. Trustees also support the organisation in a practical sense by participating in the organisation's work. This may include sitting on the decision-making bodies of key stakeholders, contributing to our reports, engaging with Board task groups and sub-committees and volunteering with the organisation.

The Board was supported by the Audit Committee:

**THE AUDIT COMMITTEE** comprises of Trustees with appropriate expertise in finance, data management and policy. It meets at least 4 times a year to recommend a budget, advise on the production of Annual Accounts, oversee financial resources and review the management of risks.

For good governance, the Audit Committee meet with the Accountant without the Chief Officer present at least once during the year.

The Chief Officer attends all Board meetings and sub-committees at the discretion of the Board or invitation of the sub-committee's Chair and is a member of Board task groups. The Chief Officer is not present during meetings between Trustees and the Accountant and at Board meetings where decisions about his remuneration or performance are discussed.

### TRUSTEE RECRUITMENT

The organisation selects Trustees through open recruitment of up to 12 Trustees with vacancies publicised through our communications and marketing materials as well as our attendance at community events. Consideration is given to ensuring an equal and fair process with the aim of creating a Board that is reflective of the community we serve. New Trustees and committee members are interviewed by a selection panel who make recommendations about appointments to the Board. Appointments are made by vote of the Board.

From time to time, we may co-opt non-trustee members as members of the Board to fill vacancies where we feel this is appropriate and expedient or where we require specific skills or expertise.

As part of our continuing development a demographics and skills audit of Trustees is conducted regularly. This ensures that we have the skills we need on the board and enables us to demonstrate that we reflect the community that we serve. We also undertake a stakeholder and public satisfaction survey to inform our continuing development.

### TRUSTEE INDUCTION AND TRAINING

New Trustees are provided with a copy of the Articles of Association, introduced to staff and given information outlining their roles, responsibilities and obligations under company and charity law. To support them in their role, Trustees are invited to participate in training. Most new Trustees will have a 1-1 meeting with the Chief Officer shortly after they take up the role to answer any questions they have about the organisation and how it works, the Trustee role, and provide access to further information and training, including the comprehensive, free programme offered by Richmond CVS.

Trustees are supported in their roles by the officers of the Board and the Chief Officer and are encouraged to attend our wider volunteer training and support. As part of our continuing development, all policies are reviewed regularly, and a hypothetical training exercise on risk management was conducted.

### CONFLICTS OF INTEREST

All Trustees must make a Declaration of Interests before joining the Board. All meetings begin with declarations of new interests or interests competing or conflicting with items on the agenda to ensure that interests are actively managed. One Trustee stood down due to conflicts of interest.

### RISK MANAGEMENT

As a minimum our risk management is reviewed once a year by the Chief Officer who reports to the Audit Committee on identified risks at least annually. The Audit Committee report on risks at least annually to the Board. In practice however risks were continuously reviewed due to significant changes in year.

Where risks were identified, measures were put in place to ensure that they were effectively managed, mitigated or controlled. Contracting and political risks were significant risks during the year with the announcement to wind up local and national Healthwatch being announced shortly after the year ended. The timeline for this is uncertain but will not occur until after the end of financial year 2025/26. Despite this dynamic and challenging risk environment, the Board of Healthwatch Richmond LTD is satisfied that risks are effectively identified and managed with appropriate, sufficient and effective measures in place.

A Critical Incident Policy and Business Continuity Plan exists, has been tested and is under regular review.

### CLOSURE OF HEALTHWATCH

The publication of the NHS 10 Year Plan and the accompanying Dash Review have confirmed that the legislation that set up Local Healthwatch (our main contract, not Healthwatch Richmond LTD) will come to an end during this parliament. No timelines are given for this but we understand that the legislative changes required for this, which have not yet been tabled, will require some time to pass and to come into effect. We understand that the Healthwatch role will be transferred to the ICB and to the Local Authority who may wish to commission these functions from us in the future if they are permitted to do so.

This political decision presents existential risks to the future of independent patient and public involvement. The uncertainty that it creates presents considerable organisational risk to ourselves. Whilst this risk crystallised following the reporting period, it was a known risk that we were tracking in year and took steps to secure the retention of our workforce and to reduce the risks arising from this swiftly in the new financial year. As a result, we feel confident that we can continue for at least the next 12 months.

## OBJECTIVES OF THE CHARITY

Healthwatch Richmond LTD is a registered charity with objects for the advancement of health and the relief of those in need by reason of youth, age, ill-health, disability or financial hardship by:

- Providing information and advice about health and social care
- Making the views and experiences of the public known to health and social care providers
- Enabling local people to have a say in the development and delivery of health and social care services by providing information, training and support
- Providing training and development of skills for volunteers and the wider community in scrutinizing, reviewing and monitoring local health care services.

These objects are aligned with the statutory basis of Local Healthwatch but allow Healthwatch Richmond LTD to undertake closely related activity outside of the statutory role. The Board reviews proposed activities both in pursuit of the statutory role and closely related work outside of our main Healthwatch contract, and decides which to pursue based on consideration of how well they help us to further our charitable objects and their fit with our strategy, risk and available resources.

## PUBLIC BENEFIT

Our activities are open to anyone with an interest in health and social care in Richmond and we actively engaged with the community to promote our work over the year. Over 4,100 people engaged with us directly through our projects, outreach, events or signposting work during the year.

Our research work highlighted the plight of residents in Hampton after the closure of pharmacy services. We secured improvements to the remaining pharmacies and successfully fought to restore services for the community. We've also successfully fought for further investment into NHS dentistry in Richmond, identifying and addressing for the first time the inequalities in funding. Whilst this is just a start, it is a first step in addressing long term chronic underfunding for our residents

Our signposting work provides vital support to people struggling to access NHS and social care by helping them to find support, care, or the information they need to make decisions about their care.

Our other public benefits are listed in our achievements

## ACHIEVEMENTS FROM 2024-2025

We've supported more than 4,100 people to have their say and get information about their care.

### SECURING A NEW PHARMACY FOR HAMPTON

In late 2023, two pharmacies closed in Hampton. We undertook an urgent review that identified huge challenges for Hampton residents. We continued working on this problem and a new pharmacy opened in 2025, restoring vital services for residents. Based on the evidence in our report, local stakeholders made administrative changes to allow a new pharmacy to open in the area. An application to open a new pharmacy was made in late 2023/24. However, despite the overwhelming evidence of local support and urgent need, the London-wide team that decides pharmacy applications (Market Entry Team) declined the application.

We put considerable pressure on the Market Entry Team, using our powers to request information and make recommendations and were supported by Munira Wilson MP who raised concerns in Parliament.

Ultimately, 12 months after the original pharmacy closures, permission was granted for a new pharmacy to open. We were delighted to attend the grand opening of the new Hampton Pharmacy on April 12<sup>th</sup> 2025.

*"Thank you for your help in getting the application approved and your continued support. We are really looking forward to serving the community in any way we can."* – **The Hampton Pharmacy**

### NHS DENTISTRY

We have been campaigning for improvements in NHS Dentistry since late 2020 when it first became clear that the pandemic had led to a crisis in an already overstretched service. Our research and signposting work provided us with copious evidence of unmet need however this fell on deaf ears and no changes were made to improve access.

As a result of our campaigning, a South West London Dentistry Day was held. At that event, we presented evidence that Richmond had the lowest level of per capita funding in London by a substantial margin, and that this caused the huge levels of concern that we encountered during data collection. Whilst this held decision makers to account publically, it did not yield any changes to funding levels.

We presented the same information to the London General Assembly Health Committee and gave an interview on national news.

The ICB has finally confirmed that it will invest underspend from across South West London in previous years into Richmond to address this stark funding and access inequality.

### GP PRACTICE REVIEW

We worked with GP practices in Richmond to collect patient experience of contacting practices, appointment booking, remote consultations and additional roles. We collected 2,700 usable responses to our survey from March - June 2024. We received many positive accounts of how GP practices are going above and beyond to serve their patients

As well as informing improvements at local practices, our work was of national importance in informing the policy around Physicians Associates. It was directly quoted by Healthwatch England's response to a General Medical Council consultation on the regulation of these roles, informed the Royal College of General

Practitioners' new scope of practice for Physician Associates and was quoted in the DHSC commissioned Independent Review of Physician Associates

## OTHER IMPACT

Space in this report does not allow for a full impact report. Other examples of our work in brief include:

- Helping around people to find support or help by:
  - Distributing 60,000 copies of our printed guide that led to people accessing support, information or services around 7,000 times
  - Visiting 38 community sessions for disadvantaged people and speaking to almost 1,000 people
  - Helping 155 people who contacted us by phone or email
- Our communications are both extensive and effective. People saw our digital communications around 233,200 times and engaged with our content 18,500 times.
- An assessment of the Emergency Department and Urgent Treatment Centre at West Middlesex University Hospital which led to a detailed improvement action plan.
- Our work informed the new contract for Kingston Hospital meal service.
- At the end of the financial year the Southwest Integrated Care Board commissioned us to look at community nursing to inform the recommissioning of community nursing in Richmond.



## PLANS, CHALLENGES AND OPPORTUNITIES FOR 2025/26

### LOSING INDEPENDENT PATIENT VOICE HARMS US ALL

Since our last report, the new Government has published the NHS 10-Year Plan which includes their decision to merge Healthwatch functions into ICBs and Local Authorities. Despite recognising the value of patient feedback, the plan overlooks the crucial value that independence and leads to the surprising decision to end not just Healthwatch but all support for independent patient voice.

Whilst this was a risk that we had considered, it was not one that we could influence. The role is set in legislation that requires Local Authorities to contract a Healthwatch provider. Whilst there is no indication of when these changes will occur or of what will happen when they do, this will take some time. Whilst the timeline for changing primary legislation is unclear, it is unlikely that any change could come into effect before the end of March 2027.

For over 50 years, there has been an independent, local patient voice body, curbing the worst impacts of cuts, ensuring that decisions considered patient needs and championing quality. The body delivering this work has changed from time to time, but its independence has been seen as a core and valued part of patient voice by the NHS, and more recently social care, system. It is this independence that led to the opening of a much needed new pharmacy, additional investment into Dentistry and a great many other vital improvements in care. As well as managing the risk to our organisation, we have an opportunity to fight for our community to have a strong voice and influence into the future both through working with local stakeholders and nationally with the Healthwatch network.

### WORKING WITH OTHER ORGANISATIONS

We spoke last year about the importance of our relationships as the keys to our future success. To understand and improve on our relationships we ran a Stakeholder satisfaction survey. We will use the findings to inform both our work and to influence the planning for what follows us.

#### WITHIN RICHMOND

We recently collaborated with Richmond Council for Voluntary Service (RCVS) to deliver improved strategic coordination of patient and public involvement across the NHS and social care. This was achieved by mobilising a subcontract that sits outside of the Healthwatch Contract over the past year. The end of Healthwatch presents risks to this subcontract and so we are seeking to novate it to the Council so that this work can continue without any disruption from the changes that we face.

#### WITHIN SOUTH WEST LONDON

Our collaboration with the five other Healthwatch to influence decisions made about services at South West London ICS level will continue for 2025/26 as the contractual support for this was agreed before the decision to abolish Healthwatch was published.

The 58% staffing cuts that SWL ICB are undergoing over the coming year present some real challenges to engaging with them as well as some opportunities to demonstrate our effectiveness by assisting them.

#### NATIONALLY

Despite demonstrating that we can give our residents a strong voice on the national stage, the political direction suggests that influencing national policy will become more challenging. Indeed, we are informed that our national body is in the process of winding down. To counteract that, we are involved in an informal network of peers that is working to advocate for the future of patient voice.

## OUR WORK PLANS FOR 2025/2026

Over the next year, we will continue to deliver our project work as effectively and continuously as we can. Because of the long term nature of our work planning, we will need to give some thought to how we manage the community engagement work that informs our work plans. At some point, this will be work that we undertake to inform not our plans, but the plans of the ICB and Local Authority who will pick up this work after us.

We will also work together with partners and our local Integrated Care System to help develop an NHS culture where, at every level, staff strive to listen and learn from patients to make care better.

Our work plan for 2025/26 was drafted based on community needs and experiences with input from stakeholders. We are particularly aware that we, and our colleagues, will need to respond to emerging needs arising from the new political direction and that our priorities may change considerably.

## OUR PRIORITIES FOR THE NEXT YEAR ARE:

- Carers and Young Carers Charter –working with London Borough of Richmond upon Thames and other voluntary sector partners to replace the Carers and Young Carers Strategy 2020-2025.
- Community Nursing – we are working with Kingston and Richmond NHS Foundation Trust to review community nursing and inform the recommissioning of community services more broadly.
- Adult Mental Health – we are working with South West London St George’s Mental Health Trust to complete our review of their transformation.
- West Middlesex University Hospital In-Patient Care Enter and Views.
- Kingston Hospital Emergency Department Enter and Views.
- Enter and View visits to selected GP Practices.
- Visits to Holybourne Hospital with Healthwatch Wandsworth.
- Exploring patients experiences of:
  - cancer care
  - elective care
  - hospital discharge.

## FINANCIAL REVIEW

### RESERVES POLICY

To ensure business continuity, to cover the possible costs of wind-up of the organisation, Healthwatch Richmond LTD has set a reserves policy that requires a balance of not less than 3 and not more than 6 months of operating costs plus wind up costs. This allows the charity to continue to deliver a service, manage variations in its income and, if necessary to meet its liabilities should it need to wind up.

For simplicity, this is set at:

3-6 months operating costs: £42,250-£85,000

Wind up costs: £40,750

**Total reserves: £83,000-£125,500**

### EXPENDABLE ENDOWMENT FUND AND INVESTMENT POLICY

In addition to our reserve, we hold an Expendable Endowment Fund of up to £129,500 to generate returns that are spent on service delivery.

### PRINCIPAL FUNDING SOURCES

We secured the Healthwatch Richmond contract from the London Borough of Richmond upon Thames (LBRuT) via a competitive tender. The contract runs for 3 years (with options to extend twice for an additional year) from April 2024 and is worth £131,000 per annum followed by CPI linked increases from March 2025. This is a £15,500 per annum reduction to our income compared to previous years.

In addition to the Healthwatch Contract, we secured the Community Involvement Service from LBRuT as Lot 2 of the same tendering exercise. This has equal terms to the Healthwatch contract and is worth £41,188. We have subcontracted Richmond CVS to deliver this contract for us and transfer the associated funds in full.

As mentioned previously, the legislation requiring the Healthwatch contract is expected to change and we are therefore seeking to separate the two elements of this contract and to novate the Community Involvement Service Contract to the London Borough of Richmond upon Thames.

### ADDITIONAL INCOME WAS RECEIVED IN THIS FINANCIAL YEAR:

- £12,000 from London Borough of Richmond upon Thames for a commissioned reviews of Modern Day Services and as a contribution to our Signposting Directory
- £7,585 from SWL ICS for a commissioned review of Community Nursing and to support our work at SWL level
- £7,357 came from interest
- £3,979 was released from funds previously restricted by SWL ICB who asked us to apply these to the Signposting Directory
- £2,000 – from Healthwatch England for commissioned work supporting data collection around Primary Care

- £100 came from bank payments

## EXPENDITURE OF FUNDS IN 2024-2025

As is clear from the Accounts, we planned a modest deficit this year to enable us to hold staffing levels despite a reduction in our Healthwatch Contractual Income and expend additional resources on our operational activity. This supported the delivery of both more work towards our Healthwatch Contract and the above additional activity. Staff costs have been subject to considerable inflationary pressures arising in part from London Living Wage, wage growth and Employers National Insurance Contributions.

Our subcontract to Richmond CVS is our next largest cost at £41,188. This discharges our duties under the Community Involvement Contract. There is no consideration for our management of this contract which we undertake through a steering group and contract management in partnership with the commissioner.

The direct operational costs of our work vary in relation to the needs of our project work, for example email campaigns are low cost whereas the design and distribution of 60,000 signposting directories has a considerable cost. This also includes operational overheads necessary to undertake our work such as IT, communication and marketing, office costs, financial costs, banking services, regulatory compliance costs, and insurance related to our activity.

Governance costs, which include the costs of holding Board meetings, running the charity, and making statutory filings accounted for £600 of total expenditure. These costs remain low because our governance meetings do not incur any costs.

## STATEMENT OF TRUSTEES' RESPONSIBILITIES

The Trustees are responsible for preparing the annual report and the financial statements in accordance with applicable law and regulations.

Company law requires the Trustees to prepare financial statements for each financial year. Under that law, the Trustees have elected to prepare the financial statements in accordance with United Kingdom Generally Accepted Accounting Practice (United Kingdom Accounting Standards and applicable law). Under company law, the Trustees must not approve the financial statements unless they are satisfied that they give a true and fair view of the state of affairs of the Charitable Company and of the result for that year.

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 judgments and accounting estimates that are reasonable and prudent;
- have due regard to public benefit guidance published by the Commission as required by section 17(5) of the Charities Act 2011;
- prepare the financial statements on a going concern basis unless it is inappropriate to presume that the charitable company will continue in business.

The Trustees are responsible for keeping adequate accounting records that are sufficient to show and explain the charitable company's transactions and 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.

So far as each of the Trustees is aware at the time the report is approved, there is no relevant audit information of which the charitable company's auditors are unaware; and the Trustees have taken all steps that they ought to have taken to make themselves aware of any relevant audit information and to establish that the auditors are aware of that information.

Approved by the Trustees on **(Date)** .....  
and signed on their behalf by:

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**(Print name)**

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**(Sign)**

**- Acting Chair**

**Company Registration No: 08382351**

# INDEPENDENT EXAMINER'S REPORT TO THE TRUSTEES OF HEALTHWATCH RICHMOND LTD FOR THE YEAR ENDED 31 MARCH 2025 (COMPANY LIMITED BY GUARANTEE NO. 8382351)

I report on the accounts of the company for the year ended 31 March 2025, which are set out on pages 15 to 21.

## RESPECTIVE RESPONSIBILITIES OF TRUSTEES AND EXAMINER

The Trustees (who are also the directors of the company for the purposes of company law) are responsible for the preparation of the accounts in accordance with the requirements of the Companies Act 2006 ('the 2006 Act'). The charity's Trustees consider that an audit is not required for this period under Part 16 of the 2006 Act and that an independent examination is needed. The charity's gross income did not exceed £250,000 and I am qualified to undertake the examination by being a qualified member of The Institute of Chartered Accountants in England and Wales.

Having satisfied myself that the charity is not subject to audit under company law and is eligible for independent examination, it is my responsibility to:

- examine the accounts under section 145 of the Charities Act 2011;
- follow the procedures laid down in the general Directions given by the Charity Commission under section 145(5)(b) of the Charities Act 2011; and

to state whether particular matters have come to my attention.

## BASIS OF INDEPENDENT EXAMINER'S REPORT

My examination was carried out in accordance with the general Directions given by the Charity Commission. An examination includes a review of the accounting records kept by the charity and a comparison of the accounts presented with those records. It also includes consideration of any unusual items or disclosures in the accounts, and seeking explanations from you as Trustees concerning any such matters. The procedures undertaken do not provide all the evidence that would be required in an audit and consequently no opinion is given as to whether the accounts present a 'true and fair view' and the report is limited to those matters set out below.

## INDEPENDENT EXAMINER'S STATEMENT

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

(1) which gives me reasonable cause to believe that in any material respect the requirements:

- to keep accounting records in accordance with section 386 of the Companies Act 2006; and
  - to prepare accounts which accord with the accounting records, comply with the accounting requirements of section 396 of the Companies Act 2006 and with the methods and principles of the Statement of Recommended Practice: Accounting and Reporting by Charities (Charities SORP FRS102)
- have not been met; or

(2) to which, in my opinion, attention should be drawn in order to enable a proper understanding of the accounts to be reached.

NAME: Mr Paul Ross

RELEVANT PROFESSIONAL QUALIFICATION OR BODY: The Institute of Chartered Accountants in England and Wales

ADDRESS: 18 Woodcock Dell Avenue, Kenton, Harrow, Middx, HA3 0NS

DATE:

**Statement of financial activities for the year ended 31 March 2025**

		<b>2025</b>		<b>2024</b>	
	<b>Note</b>	<b>Restricted funds £</b>	<b>Unrestricted funds £</b>	<b>Total this year £</b>	<b>Total last year £</b>
<b>Income and endowments from:</b>					
Charitable Activities	2	-	197,852	<b>197,852</b>	169,670
Investment income		-	7,357	<b>7,357</b>	3,796
<b>Total income</b>		-	<b>205,209</b>	<b>205,209</b>	173,466
<b>Expenditure on:</b>					
Charitable Activities	3	3,979	219,064	<b>223,043</b>	163,235
Others	4	-	600	<b>600</b>	795
<b>Total expenditure</b>		<b>3,979</b>	<b>219,664</b>	<b>223,643</b>	164,030
<b>Net movement in funds</b>		<b>(3,979)</b>	<b>(14,455)</b>	<b>(18,434)</b>	9,436
<b>Total funds brought forward</b>		<b>5,469</b>	<b>174,997</b>	<b>180,466</b>	171,030
<b>Total funds carried forward</b>		<b>1,490</b>	<b>160,542</b>	<b>162,032</b>	180,466

The statement of financial activities includes all gains and losses in the year. All incoming resources expended derive from continuing activities.

The notes on pages 12 to 17 form part of these financial statements.



**Balance sheet as at 31 March 2025**

		<b>2025</b>	<b>2024</b>
	<b>Note</b>	<b>£</b>	<b>£</b>
<b>Current assets</b>			
Debtors	6	<b>44,723</b>	54,644
Cash at bank and in hand		<b>170,410</b>	191,222
		<b>215,133</b>	245,866
<b>Creditors</b>			
Amounts falling due within one year	7	<b>53,101</b>	65,400
<b>Net current assets</b>		<b>162,032</b>	180,466
<b>Total net assets</b>		<b>162,032</b>	180,466
<b>Funds</b>			
<b>Unrestricted funds</b>	8	<b>160,542</b>	174,997
<b>Restricted funds</b>	9	<b>1,490</b>	5,469
<b>Total funds</b>		<b>162,032</b>	180,466

These accounts have been prepared in accordance with the provisions available to companies subject to the small companies regime within Part 15 of the Companies Act 2006 and with the Financial Reporting Standard 102.

For the financial year ended 31st March 2025 the company was entitled to exemption from audit under section 477 Companies Act 2006. No member of the company has deposited a notice, pursuant to section 476, requiring an audit of these financial statements under the requirements of the Companies Act 2006.

The directors acknowledge their responsibilities for complying with the requirements of the Companies Act 2006 with respect to accounting records and the preparation of financial statements.

The notes on pages 17 to 21 form part of these financial statements.

Approved by the Trustees on 2025 and signed on their behalf by:

- Acting Chair

## Notes to the accounts

### 1. Accounting policies

The principal accounting policies are set out below. The accounting policies have been adopted consistently throughout the year.

- a. Basis of accounting
- b.

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 (FRS102)), the Financial Reporting Standard applicable in the UK and Republic of Ireland (FRS 102) and the Companies Act 2006.

Healthwatch Richmond meets the definition of a public benefit entity under FRS 102. Assets and liabilities are initially recognised at historical cost or transaction value unless otherwise stated in the relevant accounting policy note.

- c. Going Concern

The Trustees have considered a period of more than 12 months from the signing of these financial statements and are of the view that funding is sufficient for the Charity to continue its operations until at least this time. The Trustees therefore feel the Charity is a going concern and as such the financial statements have been prepared on this basis.

- 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 the amount can be measured reliably.

- e. Expenditure

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

Expenditure is classified under the following activity headings:

- Cost of raising funds: Costs relating to tendering for grants.
- Expenditure on charitable activities: Costs incurred in undertaking activities to further the purposes of the charity and related support costs.
- Other expenditure: Any costs not included in other headings, including governance costs.

- f. Fund structure

The funds held by the charity are either:

- Unrestricted funds are funds which can be used in accordance with the charitable objectives at the discretion of the trustees.

- Restricted funds are funds which are used in accordance with the specific restrictions imposed by the donor.

## Notes to the accounts (continued)

### g. Tangible fixed assets and depreciation

Depreciation is provided on cost in equal annual instalments over the estimated useful lives of the assets. The rates of depreciation are as follows:

Computer equipment - 33.33% on cost  
Office furniture - 33.33% on cost

### h. Debtors

Trade and Other Debtors are recognised at their settlement value. Prepayments are valued at the amount calculated as being prepaid.

### i. Creditors

Creditors 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 reliably. Creditors are recognised at their settlement value.

### j. Financial Instruments

The Charity only has financial assets and 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.

### k. Taxation

The charity is exempt from corporation tax on its charitable activities.

### l. Pension

The charity makes contributions into a defined contribution pension scheme on behalf of its employees. Contributions are recognised as expenditure when the charity incurs an obligation to pay these contributions.

## 2. Income from Charitable activities

	Restricted Funds	Unrestricted Funds	Total 2025	Total 2024
	£	£	£	£
<b>Grants</b>				
LBRuT – Core Contract	-	131,000	<b>131,000</b>	146,500
LBRuT – RCVS Contract		41,188	<b>41,188</b>	-
LBRuT - Other		12,000	<b>12,000</b>	-
SWL ICS Income	-	11,564	<b>11,564</b>	4,000
Others	-	2,100	<b>2,100</b>	19,170
<b>Total</b>	<b>-</b>	<b>197,852</b>	<b>197,852</b>	<b>169,670</b>

**3. Expenditure on charitable activities - Healthwatch Richmond**

	<b>Restricted Funds</b>	<b>Unrestricted Funds</b>	<b>Total 2025</b>	<b>Total 2024</b>
	£	£	£	£
Staff costs	-	142,003	<b>142,003</b>	136,132
Operational costs	3,979	35,873	<b>39,852</b>	27,103
RCVS Contract payment	-	41,188	<b>41,188</b>	-
<b>Total</b>	<b>3,979</b>	<b>219,064</b>	<b>223,043</b>	163,235

**4. Expenditure on other costs**

	<b>Restricted</b>	<b>Unrestricted</b>	<b>Total</b>	<b>Total</b>
	£	£	£	£
Independent Examiners fees	-	600	<b>600</b>	600
Trustees expenses	-	-	-	195
<b>Total</b>	<b>-</b>	<b>600</b>	<b>600</b>	795

**5. Employee information**

	<b>2025</b>	<b>2024</b>
	£	£
<b>Analysis of staff costs</b>		
Wages and salaries	<b>129,923</b>	124,603
Social security costs	<b>6,665</b>	6,195
Pension contributions	<b>5,415</b>	5,334
<b>Total</b>	<b>142,003</b>	136,132

The Charity operated a money purchase occupational pension scheme. This is open to all employees.

	<b>2025</b>	<b>2024</b>
<b>Head counts for the year was:</b>	<b>No.</b>	<b>No.</b>
Operational staff	<b>5</b>	5

No employees received benefits (excluding employer pension schemes) of more than £60,000 (2024 - none).

**6. Debtors**

	<b>Total</b>	<b>Total</b>
	£	£
Other debtors	<b>44,338</b>	54,266
Prepayments	<b>385</b>	378

Total	<u>44,723</u>	<u>54,644</u>
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### 7. Creditors: amounts falling due within one year

	Total £	Total £
Trade creditors	-	2,815
Pension liability	1,175	1,047
Accrued expenses	2,096	2,021
Deferred income	49,830	59,517
Total	<u>53,101</u>	<u>65,400</u>

### 8. Movement in funds

	At 1st April 2024 £	Incoming resources £	Outgoing resources £	At 31st March 2025 £
<b>Unrestricted funds – current year</b>				
General funds	<u>174,997</u>	<u>205,209</u>	<u>219,664</u>	<u>160,542</u>

	At 1st April 2023 £	Incoming resources £	Outgoing resources £	At 31st March 2024 £
<b>Unrestricted funds – previous year</b>				
General funds	<u>165,561</u>	<u>173,466</u>	<u>164,030</u>	<u>174,997</u>

### 9. Restricted funds

	At 1st April 2024 £	Incoming resources £	Outgoing resources £	At 31st March 2025 £
<b>Restricted funds – current year</b>				
	<u>5,469</u>	<u>-</u>	<u>3,979</u>	<u>1,490</u>

	At 1st April 2023 £	Incoming resources £	Outgoing resources £	At 31st March 2024 £
<b>Restricted funds – previous year</b>				
	<u>5,469</u>	<u>-</u>	<u>-</u>	<u>5,469</u>

Name of Fund                      Description, nature and purposes of the fund

Restricted Funds      This fund consists of grant income received by Healthwatch Richmond and expenditure incurred to fulfil grant conditions and allowable under the grant terms.

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## 10. Net assets split between funds

	Unrestricted	Restricted	Total
	£	£	£
Debtors	44,723	-	44,723
Cash at bank and in hand	168,920	1,490	170,410
Creditors	(53,101)	-	(53,101)
	<u>160,542</u>	<u>1,490</u>	<u>162,032</u>

### Net assets split between funds – previous year

	Unrestricted	Restricted	Total
	£	£	£
Debtors	54,644	-	54,644
Cash at bank and in hand	185,753	5,469	191,222
Creditors	(65,400)	-	(65,400)
	<u>174,997</u>	<u>5,469</u>	<u>180,466</u>

## 11. Commitments under operating leases

At 31st March 2025, the Company had annual commitments under non-cancellable operating leases as set out below:

	2025	2024
	£	£
Operating leases which		
Within one year	<u>4,516</u>	<u>4,516</u>

## 12. Related party transactions

No trustees or persons connected with them received any emoluments in their role as Trustees (2024 - nil).