

HEALTHWATCH NORTH YORKSHIRE

England & Wales · Charity number 1171152

Details

Status Registered

Legal form CIO

Registered 2017-01-17

Register [View on the Charity Commission register](#)

Contact

Address Healthwatch North Yorkshire
55-57 Grove Road
Harrogate
North Yorkshire
HG1 5EP

Phone 01423 788128

Email hello@hwny.co.uk

Website www.healthwatchnorthyorkshire.co.uk

Activities

Objects: 3(1) THE OBJECTS OF THE CIO ARE:(A) PROVIDING INFORMATION AND ADVICE TO THE GENERAL PUBLIC ABOUT LOCAL HEALTH AND SOCIAL CARE SERVICES;(B) MAKING THE VIEWS AND EXPERIENCES OF MEMBERS OF THE GENERAL PUBLIC KNOWN TO HEALTH AND SOCIAL CARE PROVIDERS AND COMMISSIONERS;(C) ENABLING LOCAL PEOPLE TO HAVE A VOICE IN THE DEVELOPMENT, DELIVERY, IMPROVEMENT AND EQUALITY OF ACCESS TO LOCAL HEALTH AND CARE SERVICES AND FACILITIES; AND(D) PROVIDING TRAINING AND THE DEVELOPMENT OF SKILLS FOR VOLUNTEERS AND THE WIDER COMMUNITY IN UNDERSTANDING, SCRUTINIZING, REVIEWING AND MONITORING LOCAL HEALTH AND CARE SERVICES AND FACILITIES.

Activities: Healthwatch North Yorkshire aims to improve health and social care services and population wellbeing by involving the public and patients in shaping service delivery and reform.

Classification

- **How:** Provides Services, Provides Advocacy/advice/information, Sponsors Or Undertakes Research, Acts As An Umbrella Or Resource Body
- **What:** The Advancement Of Health Or Saving Of Lives, Other Charitable Purposes
- **Who:** The General Public/mankind

Geography

- North Yorkshire

Finances

Period end	Income	Expenditure	Assets	Employees
2025-03-31	£264,896	£230,853	-	-
2024-03-31	£196,831	£237,610	-	-
2023-03-31	£237,420	£252,307	-	-
2022-03-31	£185,059	£172,126	-	-
2021-03-31	£167,459	£135,004	-	-

Trustees

Name	Role	Appointed
Alan Cram		2024-02-22
Alison Wood		2024-02-22
Caroline O'Neill		2025-04-08
Dr Alan Cunningham		2024-06-20
Dr Stephen Hanna		2025-04-08
Hannah Darton		2025-04-08
Janette Walker		2025-04-08
John Michael Cunningham		2019-10-28
Patricia Southgate		2019-11-12
Shona Eyre		2025-04-08

HEALTHWATCH NORTH YORKSHIRE

England & Wales - Charity number 1171152

Accounts



Annual Report 2024–2025

**Unlocking the power of
people-driven care**

Healthwatch North Yorkshire

Contents

A message from our chief executive	3
About us	4
Our year in numbers	5
A year of making a difference	8
Working together for change	9
Making a difference in the community	10
Listening to your experiences	13
Hearing from all communities	17
Information and signposting	22
Showcasing volunteer impact	24
Finance and future priorities	26
Statutory statements	28



“The impact that Healthwatch North Yorkshire have is vitally important. Healthwatch is empowering their communities to share their experiences. They’re changing the health and care landscape and making sure that people’s views are central to making care better and tackling health inequalities.”

Louise Ansari, Chief Executive, Healthwatch England

A message from our CEO

Thank you to everyone who has shared their health and social care experiences with us—through our surveys, at events, and in conversations with our staff and volunteers. Your honest feedback continues to be vital in showing what’s working and what needs to change across health and care services.

Crucially, what we hear also helps highlight when services are getting things right—so they can learn from what works, and people have the chance to say thank you.

This year, two areas of our work stand out. The first is how much stronger our working relationships have become with local organisations, allowing us to shape our activity with greater understanding and reach. The second is our ongoing drive to do things differently. This makes sure people’s views are not just gathered but acted upon by people in charge of your health and social care to make improvements.

We’ve worked closely with North Yorkshire Council to understand how people experience adult social care, and with Tees, Esk & Wear Valleys NHS Foundation Trust to support their **mental health service improvement** plans.

We also **heard from mothers about the care they received after giving birth**, and recently released a **report focusing on the challenges farmers face** when trying to access health services.

A highlight of the year was hosting the **Rural Health & Care Summit** with Community First Yorkshire. It brought together key organisations, including the York & North Yorkshire Mayor, to look at how we can improve support for people living in rural areas.

As we continue our work through our current three-year plan until 2026, we remain focused on making sure local people’s voices are part of every conversation about how health and care is delivered in North Yorkshire.



“Healthwatch’s sole purpose is to listen and make care better. Getting feedback from people really works. Feedback about what is and isn’t working plays a crucial role in helping care services spot issues and understand how they can improve quality, safety, and efficiency.”

**Ashley Green, Chief Executive Officer,
Healthwatch North Yorkshire**

About us

Healthwatch North Yorkshire is your local health and social care champion.

We ensure that NHS leaders and decision makers hear your voice and use your feedback to improve care. We can also help you find reliable and trustworthy information and advice.



Our vision

To bring closer the day when everyone gets the care they need.



Our mission

To make sure that people's experiences help make health and care better.



Our values are:

We are **independent** of health and care providers, the government. We work on things that matter to people.

We are **inclusive**, making sure everyone's voice is heard.

We **act with integrity**, and we provide challenge and community-led ideas, speaking truth to power.

We **work together** with the public, charities, community organisations, NHS and North Yorkshire Council so we can support them to get health and care services right.

We hold services to account by **driving for changes**, tracking those changes in real time and letting people know what changes and impact happens.

Our year in numbers

We've supported people to have their say and get information about their care. We currently employ 7 staff, and our work is supported by 31 volunteers.

Reaching out:



1,726 people reached

People we spoke with to raise awareness about who Healthwatch is and help them find information and advice.

1,092 gave feedback

Spoke to us through our website, events, phone and surveys about health and social care issues

Championing your voice:



We published **12** individual reports about the improvements people would like to see in areas like **accessible information**, **care homes**, **mental health** and **farmers**.

Plus, we published an additional **8** reports with our Healthwatch partners in West Yorkshire & the Humber & York, covering areas of **migrant health**, **older people's health** and **palliative & end of life care**.

Statutory funding:



We're funded by North Yorkshire Council. In 2024/25 we received **£180,000** which is **7% higher** than last year.

Our digital reach

Over the past year, we've continued growth in how people connect with Healthwatch North Yorkshire across digital platforms.

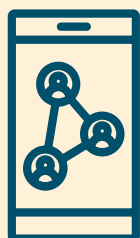
Reaching people through our website:



Our website remains one of the most active across the Healthwatch network. Between 1 April 2024 and 31 March 2025, we recorded **41,722 page views** and **23,304 people using it**.

The most visited pages were our **homepage, news and reports, search, job opportunities, and contact details**. This shows people are not only reading our content—they're actively looking to connect with Healthwatch and find information.

Social media



Facebook

Views: **89,515** – times our posts were seen.

Page/profile visits: **3,395** – times people clicked to our page.

Reach: **82,587** – unique people who saw our posts.

Instagram

Views: **17,384** – times posts and stories were viewed.

Reach: **7,491** – unique people who saw our content.

Our posts shared healthcare rights, event updates, and local stories. This helped to amplify people's voices. Instagram helped us reach a younger audience through visual-based content, while some paid posts boosted our reach further.

Email newsletters



We sent out **17 newsletters** reaching inboxes **18,463 times**.

These shared updates, public opportunities to get involve and the real-world impact of people speaking up.

Media coverage

Healthwatch appeared across 20 media outlets. This includes local papers, national websites, specialist publications and local radio.

Healthwatch North Yorkshire's recent media round-up demonstrates the extraordinary influence of its efforts with features that amplified public voices on critical issues.

By spotlighting matters such as postnatal care disparities, rural healthcare access, youth vaping, and dental provision, they reached a substantial audience—over a quarter of a million people—engaging local communities and decision-makers alike.

A big achievement was the uncovering of postcode-based inequalities in maternal support. Coverage in the Yorkshire Post, Greatest Hits Radio, and The Scarborough News brought these concerns sharply into public and policy focus. These stories not only raised awareness but also helped to pressure local authorities (councils) to address service gaps in rural and coastal areas.

Impact summary



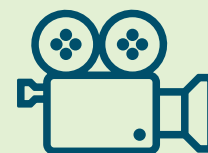
Printed circulation: 127,514

Website reach: 117,200

Radio reach: 25,500

TV viewers: 2,600

Total reach: 272,814



All media coverage focused on turning personal stories into powerful advocacy. By sharing real experiences in newspapers, on radio, and on TV, Healthwatch North Yorkshire brought attention to the issues that matter most to local people.

These stories didn't just raise awareness — they sparked conversations, challenged decision-makers, and helped shape better health and care services across the county.

A year of making a difference

Over the year we've been out and about in the community listening to people's stories, engaging with partners and working to improve care in North Yorkshire. Here are a few highlights.

We **helped women and girls share their experiences** on contraception, mental health, menopause, and healthy ageing, leading to a plan for real change by North Yorkshire Council.



We worked with the Refugee Council to listen to women's experiences about their access to healthcare and the need to ensure translation services are accessible to them and meet their needs to access the right care.



New **perinatal pelvic-health service** now empowers pregnant women and new mothers across North Yorkshire to self-refer for specialist physiotherapy, breaking stigma and ensuring timely and supportive care.



We explored adult social care access for ethnic minority communities, revealing barriers like language, cultural misunderstanding, and stigma can all act to stop people accessing the care they need.



We listened to what new mothers wanted and mapped **accessible, free or low-cost community support groups** ensuring that mothers felt connected, informed, and supported in those early weeks after giving birth.



We shared our **postnatal care report** with GP practices, and they have delivered a series of protected learning time training session covering mother's physical health and mental well-being support.



Local hospitals have strengthened their commitment to unpaid carers thanks to Healthwatch working them to make information clearer, more accessibility and create a shared identity and brand that carers feel a part of.



Healthwatch evidence strengthened the case for a ban on selling vapes to under-18s, directly informing new public health legislation. Healthwatch also made **recommendations**.



Working together for change

We've worked with neighbouring Healthwatch to ensure people's experiences of care in North Yorkshire are heard at the Integrated Care System (ICS) level, and they influence decisions made about services at the Humber and North Yorkshire Health and Care Partnership.

This year, we've worked with local Healthwatch to achieve the following:

Amplifying young people's voices in healthcare



Young people often feel overlooked when it comes to health and care services. That's why, with funding from NHS England, we supported a team of young volunteers (aged 14–25) to speak directly with their peers about what's working, and what isn't in local healthcare.

Over the course of the project, we heard from 887 young people across the Humber and North Yorkshire. Their honest feedback is already helping to shape services, with findings shared both locally and with the wider NHS through the Children and Young People's Transformation Programme.

This work means decision makers are now hearing directly from young people themselves, not just adults speaking on their behalf.

Listening to communities to improve cancer care



Early diagnosis saves lives, but not everyone has the same awareness or access to cancer information. That's why we worked with the Humber and North Yorkshire Cancer Alliance to find out what people know, and what they don't.

We listened to people often left out, including those in poverty, refugees, carers, autistic people, people with ADHD, people with mental health conditions, and those experiencing homelessness. We spoke to communities in urban, rural, and coastal areas so no one was left behind.

What we learned will help shape cancer services to be more accessible, inclusive, and shaped by real experiences.

Making a difference in the community

Creating empathy and breaking continence stigma



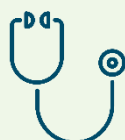
Healthwatch has supported decision makers to understand the human impact of continence care challenges, driving improvements that support dignity and better services for local people.

We brought powerful stories to health decision makers, showing the real impact of stigma and lack of support for people who live with incontinence.

Since then, tangible improvements have rolled out across hospitals, GP practices, and community services:



Hospital care that respects individual needs: Hospitals such as York and Scarborough NHS Trust introduced continence needs screening within 72 hours of admission; Harrogate District Hospital implemented toilet plans to reduce unnecessary pad use; and both now offer accessible online information and pre- and post-op guidance to stoma patients' evidence.



GPs leading early conversations: General practices have started proactively discussing continence during check-ups, with a focus on preventing long-term issues such as untreated infections and delayed diagnoses.



Supporting care staff to provide better day-to-day care: Care homes and home-care providers are receiving enhanced training to help staff better identify urinary tract infections, manage continence products effectively, and provide appropriate catheter and stoma care.



Public campaigns breaking taboos: Public health teams are promoting bowel health awareness, using tools like the Bristol Stool Chart to help people talk more openly and confidently about their symptoms.

We know things aren't perfect. More needs to be done. But by listening to even a small number of voices, **we've helped to break the silence and improve dignity and care for people** who experiences continence challenges in North Yorkshire.

Making a difference in the community

Getting equipment providers to involve the public

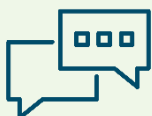


Medequip acted on your feedback and Healthwatch's recommendations, making equipment delivery, communication, and support better for everyone.

“The equipment has given me back my independence,” shared one North Yorkshire resident after receiving essential mobility aids from Medequip. Medequip provides vital equipment to help people live independently at home.

In 2023, Healthwatch North Yorkshire asked people to share their experiences with Medequip. While 75% rated the service highly, concerns were raised about communication, delivery delays, and equipment suitability.

Medequip listened and introduced significant improvements throughout 2024:



Improved communication: Clearer timelines for deliveries and repairs, proactive updates on any delays, and better trained customer service teams to respond swiftly and with empathy.



Equipment suitability: Greater involvement of healthcare professionals in selecting the right equipment for individual needs and the creation of equipment review groups that include service users themselves.



Information access: Over 30,000 leaflets were distributed explaining services, how to get equipment, and self-funding options, ensuring everyone understands their choices.



Compassionate collections: More sensitive collection processes, especially for bereaved families, and increased awareness of recycling options to support sustainability.

These changes mean more people in North Yorkshire now receive the right equipment at the right time. Boosting independence and wellbeing. Your feedback made this possible.

Learn more about [how the Medequip healthcare aids and equipment has improved](#).

Making a difference in the community

Making health information work for everyone



When health information meets people's needs, they feel included, respected, and empowered to make informed choices about their care, understand their options, and feel more able to manage their health.



“When I finally received information in a format I could understand, it felt like someone had listened. I didn’t have to rely on anyone else—I could do it myself.”

That’s what accessible information makes possible — independence, dignity, and equal access to care.



In 2022, people across North Yorkshire shared their experiences with us. Too often, they weren’t being asked how they preferred to receive information. Or if they were, their needs weren’t met. As a result, people missed appointments, felt excluded, and had to rely on other people just to access basic health information. We listened and acted.



Our report highlighted the need for better systems, more awareness, and consistent use of the Accessible Information Standard. We called for change. And action happened.



Over the last year we have heard how NHS Hospital Trusts, including South Tees, Harrogate District and York & Scarborough, have improved, for example, how they ask, record, and respond to people’s communication needs. From easy read letters to accessible websites and specialist training.



Staff champions, communication flags on patient records, and feedback groups involving people with lived experience are making a real difference. More people are now receiving information in the format that works for them, whether that’s large print, braille, or translated documents.

This is a powerful example of what happens when people speak up and services listen. Together, we’re building a more inclusive, person-centred health and care system, where everyone’s voice is heard clearly.

Learn more about [how we've improved accessible information](#).

Listening to your experiences

Services can't improve if they don't know what's wrong. Your experiences shine a light on issues that may otherwise go unnoticed.

This year, we've listened to feedback from all corners of our community, gathering insights from people of all ages and backgrounds. Your experiences of health and social care help us see what's working well and, just as importantly, what isn't.

By sharing your stories, you help us build a clearer picture of local services, what's making a difference and where things need to change. This allows us to feed that evidence back to the people who make decisions, so they can understand the real-world impact of their services and make improvements that benefit everyone, no matter where they live.

In a county as vast as North Yorkshire, it's vital that every community, whether urban, coastal, or rural feels heard. Because when services listen and act, they can make sure the right support reaches those who need it most.



Listening to your experiences

Championing community concerns to improve access and health in rural areas

From farming communities to remote villages, people living rurally are shaping health and care that works for them. By breaking down barriers, building services, and ensuring no one is overlooked.

Across North Yorkshire, rural communities are experiencing tangible improvements in how health and care services are delivered.

What did we do?

Rural voices took centre stage at our health and care event.

With Community First Yorkshire, we brought together community organisations, charities, the NHS, North Yorkshire Council, the York & North Yorkshire Mayor, and people living in rural areas to tackle the challenges facing people. Through discussions, shared learning, and real-life examples, we created a space to uncover key issues, exchange ideas, and shape a health and care system that better responds to the needs of people.

What difference has it made?

Working with Community First Yorkshire, we will be establishing a group called the North Yorkshire Rural Health Taskforce to tackle the problem.

This includes North Yorkshire Council, NHS, the York and North Yorkshire Combined Authority (Mayor) as well as voluntary and community organisations to take forward the actions. Our focus will be to ensure that our future health and care services are 'rural proofed' and meet needs.

We heard about long journeys to appointments, poor public transport, and digital barriers. But we also heard ideas and saw change already underway:

- 'Hospital at Home' is bringing medical care to people's front doors.
- MyCare24 offers round-the-clock phone and video support for people with long-term conditions.
- Clustering of medical appointments is being explored by Hambleton Community Action to ease transport challenges for patients.
- The Living Well, Dying Well initiative aims to shift more end-of-life care into the community.

Learn more about the [action being taken](#) to make rurality and healthcare work better for people locally.

Listening to your experiences

Building bridges to better mental health

Local improvements in mental health services, like specialist roles, GP-based practitioners, and trauma-informed training, are already making a difference by helping people feel heard, supported, and cared for in the way that matters most.

Healthwatch highlighted how poor communication, and fragmented record-keeping can leave people feeling unsupported. Many told us they had to repeat their story multiple times or were passed between services without clear follow-up. They also told us support didn't feel very personalised, and whilst people understand procedures had to be followed, things came across as a 'tickbox'.

In response to local feedback, the NHS, GPs, North Yorkshire Council and Tees, Esk and Wear Valleys NHS Foundation Trust, has introduced several initiatives to improve continuity and coordination in care:

What difference we made together

New complex emotional needs specialists: These roles provide dedicated, consistent support for people with complex emotional health needs.

Introduced 45 mental health practitioners GP practices: Access to mental health support through local GP practices is helping people receive quicker, more joined-up care without needing to navigate multiple services. This ensures people are offered support that's right for them.

Trauma-informed care training: Over 1,000 staff have received training to better understand and respond to people's past experiences, creating more sensitive and appropriate care.

Recognition by award win highlights power of public voices in shaping mental health support:

The national recognition celebrates the courage of local people who shared their experiences—and reinforces how public feedback can lead to meaningful change through Healthwatch.



Access to the right care, at the right time, supported by clear and accurate records, can transform lives. These **developments** reflect a shared commitment to improving mental health support based on what people are telling us. We know more needs to be done. Healthwatch will continue to campaign for better mental health support for people across North Yorkshire.

Listening to your experiences

Making a difference for people in care homes

Through our Enter & View visits, we listen, learn, and share insights that drives meaningful change in care homes. Championing residents' voices, influencing improvements, and highlighting what's working well.

Enter & View visits are at the heart of Healthwatch North Yorkshire's work. Our trusted, respectful conversations and observations in care homes allow trained Healthwatch staff and volunteers to witness the real day-to-day experience of people living there, as well as their families and staff. These visits aren't just window-dressing: they drive improvements, celebrate good practice, and influence positive change.

What difference we made together

The Grange Care Home, Selby: Our visit highlighted a genuinely "family-home" atmosphere, warm staff relationships and a rich, structured life for residents. Our recommendation to enhance communication around accessing healthcare, like eyesight and dental checks, has already prompted the home to review care-plan clarity, ensuring residents feel empowered to seek vital health support.

Beachwood Place, Malton: We observed a welcoming environment where staff knew each resident's preferences and curated engaging activities. We suggested improved signage and better facilitation for residents with hearing needs. The home has begun reviewing signage and is working to boost inclusive social activities. ensuring no one misses out.

Southlands Care Home, Harrogate: We found that strong leadership, staff development and responsive call-bell systems contribute to a culture of continuous improvement. Importantly, Healthwatch had no formal recommendations for Southlands—because what we witnessed was quality care in action, with prompt response to needs, personalised meals, and an uplifting atmosphere.

In listening to people, Healthwatch have been able to help care providers focus support where it matters so that people living in a care home are comfortable and feel included. It's not just about observing, it's about listening, validating good practice, and working with residents, families and staff to create better experiences.

Hearing from all communities

We're here for all people in North Yorkshire. That's why, over the past year, we've worked hard to reach out to those communities whose voices may go unheard.

Every member of the community should have the chance to share their story and play a part in shaping services to meet their needs.

This year, we have reached different communities by:

- Listening to the **healthcare experiences of migrant communities** so they feel they have a voice when it comes to the services provided to them.
- **Listened to people who live in care homes**, so families and staff can identify what is working well with services and where they could be made better.
- Ensured that the voices of **people living with bladder and bowel conditions** were heard by collecting their experiences, presenting findings to health leaders, and prompting service reviews and improvements locally.



Improved adult social care support

Healthwatch North Yorkshire's 'mystery shopping' exercise has led to practical improvements in adult social care services, including reduced call wait times, clearer website information, enhanced staff training, and more accessible support materials.

We explored how easy it was for the public to find and access adult social care information and support through the phone, website and email. Our findings have helped shape how North Yorkshire Council provides information about adult social care to the public.

The improvements achieved

Faster call response times: North Yorkshire Council is actively working to reduce call wait times and prioritise calls from the public. A new phone system will be introduced over the next year which will include queue updates and call-back options for callers to help provide an improved experience and faster response time.

Easier website access: The [adult social care web pages](#) have been reviewed and an easier to navigate layout has been created to ensure better accessibility for people. The new layout has been created with user feedback to make the website more intuitive, to meet accessibility standards, and improve people's website journeys. User testing will continue to ensure the pages meet the needs of all people.

Increase staff knowledgeable: A newly developed training programme has been introduced for new starters in the specialist customer service officer role. This training is delivered by staff from Health & Adult Services with specialist knowledge. Additionally, a comprehensive list of training courses to support the SCSO role has been created.

Better information materials: Updated leaflets and guides to adult social care are now available at local contact points, and there is increased collaboration between partners to distribute key information more widely, such as in GP practices, pharmacies, foodbanks etc. All adult social care leaflets have been reviewed to ensure they contain the right information and are in an accessible format.

Improved face-to-face support: All frontline staff have receiving additional training to help them with supporting the public. This training will be expanded to all library staff, volunteers, and customer service staff this year. Video booths will be installed in face-to-face locations to allow the public to speak with specialist customer service officer role.

Hearing from all communities

Involving autistic people in how care and services work for them

We've ensured that the voices of autistic people and their families shaped North Yorkshire's Autism Strategy, turning experiences into real, positive change.

Healthwatch North Yorkshire is proud to have played a crucial role in shaping the North Yorkshire **All Age Autism Strategy (2025–2030)**. Our work has ensured that the voices of autistic people and their families are at the heart of the strategy's design, making it more inclusive and community-focused.

With over 6,000 children, young people, and adults in North Yorkshire who describe themselves as autistic, it was vital to hear their voices and ensure services work for them.

What difference did this make?

By listening to autistic people and their families, we highlighted what matters most to them. Things like early diagnosis, accessible support, and inclusive communities. This feedback directly influenced the plan's priorities, ensuring that services reflect real experiences.

Our work also made the plan more inclusive and user-friendly. We helped shape public workshops and sessions so that everyone felt welcomed and able to share their thoughts. This strengthened the community's sense of ownership and trust in the plan.

We've already seen the difference our efforts have made. The first-year action plan includes practical steps that reflect the lived experiences of autistic people, from better health and care services to more supportive education and pathways into work.

By standing alongside autistic people and their families, we've ensured the plan isn't just a document – it's a promise of real change.

Since the Autism Act 2009, we've seen improvements in support and awareness of autism in North Yorkshire. But there's still work to do to ensure autistic people have the same opportunities as everyone else.

Healthwatch North Yorkshire is committed to making that happen, so everyone in our community can live a happy and healthy life.

Listening to mothers to improve care after birth

Following our report into mothers' reflections on postnatal care, we're already seeing encouraging action. But the work is only just beginning.

Postnatal care is essential for helping mothers recover and give babies the healthiest start in life. Yet it's often overlooked and underfunded compared to other parts of maternity care. We wanted to understand what the availability and quality of postnatal care was like from mothers and identify the areas where services can be improved, as well as champion what is working well.

Our report, [What mothers told us about postnatal care](#), has helped those organisations and providers of postnatal care to understand what mothers want to see improved.

What difference did this make?

Helping healthcare services listen and learn from mothers: Your feedback helped GP practices, maternity voice partnerships, local care partnerships, and hospitals across the county. One standout success was North Yorkshire Primary Care's commitment to deliver Protected Learning Time training for GPs on postnatal care. A major step forward in awareness and clinical understanding.

Educational classes: York & Scarborough Hospitals NHS Trust have undertaken a quality improvement project on antenatal education classes. They have used the feedback from our report to inform the sessions to ensure parents are better prepared for the realities of postnatal care.

Improving infant feeding support: Airedale Foundation NHS Trust has introduced a weekly breastfeeding clinic and a weekly tongue tie clinic. They have also begun offering breastfeeding support drop-in sessions in community settings.

Improved support at home and in rural areas: Our report's findings highlighted the need for home visits, improved pelvic health support, and the importance of in-person care for those in rural areas or recovering from surgery. As a result, local providers have been reviewing their visit protocols and digital systems like Badgernet to better share information between professionals, improving consistency for mothers.

These are early but encouraging signs of progress. From reshaping services to enhancing frontline support, our work is prompting a wider conversation about what good postnatal care should look like. But the work is far from done. Sustained improvement will rely on continued listening, greater coordination, and a commitment to putting mums and their babies first.

Hearing from all communities

Helping farmers get healthcare support

Our report on farming communities has sparked change by bringing vital services directly to farmers and influencing healthcare planning.

Farmers are often reluctant to use health services. Not because they don't need them, but because traditional models don't fit the farming way of life. This can mean health problems go untreated until they become serious, leading to poorer health outcomes for this vital rural community.

We listened to over 200 people across North Yorkshire revealing widespread issues – with 74% reporting physical pain and 42% struggling with stress or anxiety. But it also uncovered clear, practical solutions. Such as, bringing services to auction marts, offering more flexible appointment times, and ensuring healthcare staff understand the unique pressures of farming.

Now, thanks to the voices of farmers, those ideas are starting to become reality.

What difference did this make?

Bringing healthcare to auction marts:

Thanks to your feedback, new services are being trialled at Selby and Hawes auction marts, bringing health checks and wellbeing support directly to farmers, making it easier to get help without having to travel too far.

Local GP practices taking action: GP practices in Central Dales and Richmondshire are responding to our report's findings. They're exploring ways to offer mobile health checks and provide social prescribing, helping farmers access non-medical support that fits around their farming work.

Innovative ideas driven by your voices: From a pilot mobile cancer screening bus to involving local vets in signposting, your feedback is inspiring practical solutions. These innovative ideas are being considered to support ways of reaching the farming community to ensure their health and wellbeing needs are met.

Healthwatch volunteer action leads to parliamentary response and local partners joining in: MP for Skipton and Ripon, Julian Smith, **raised three written questions in Parliament prompting formal government responses** about mobile health services, walk-in GP access, and mental health support via vets for rural communities.

This is just the beginning. Your voices are helping make rural health more visible, more flexible, and more accessible. Bringing support closer to farmers and breaking down barriers that have been in place for too long.

Information and signposting

Whether it's finding an NHS dentist, making a complaint, or choosing a good care home for a loved one – you can count on us. This year we helped 1,726 people in-person and 23,304 people used our website for advice, support or help finding services.

This year, we've helped people by:

- Providing up-to-date information people can trust
- Helping people access the services they need
- Supporting people to look after their health
- Signposting people to additional support services



New GP guide empowers patients and eases pressures on practices



"With clearer information, I feel more confident in managing appointments and understanding my rights as a patient. It's reassuring to know where to turn and what to expect at each step."

That's just one of the many positive responses we've received since launching our new guide to using your local GP practice.

People often tell us that accessing GP services can feel confusing and overwhelming. That's why we created a clear, practical guide. Written with patients in mind. To help everyone understand how their local GP practice works and how to get the support they need.

The guide includes helpful information on:

- Booking and managing appointments
- Understanding the roles of different healthcare professionals
- Using online and telephone services
- Accessing urgent care and raising concerns

It's designed to give patients the knowledge and confidence to make the right choices, while also helping GP practices run more efficiently by reducing avoidable appointments and misunderstandings.

Developed with input from healthcare professionals, GP staff, and local people, the guide has been welcomed across the county as a useful, timely resource.



"This guide helped me understand when to see a GP or another professional, making my healthcare journey smoother and less stressful."

By giving people, the tools to navigate services more easily, we're making access to healthcare fairer and more effective for everyone.

Showcasing volunteer impact

Our volunteers have given their time to support our work. Thanks to their dedication to improving care, we can better understand what is working and what needs improving in our community.

This year, our volunteers:

- Visited community venues and events to promote Healthwatch and helped people find information and advice so they know their options and can make the best decisions about their care – or someone they love.
- Visited GP practices, helping to raise awareness of our [patient guide to GP practices](#). This is to help them get the most out of their visit but also save GP practices time by helping people get the right care sooner.
- Collected people's experiences and supported people across the county to share their views and to see the worth in why [speaking up is important as it can truly make a difference](#)
- Carried out [visits to local care homes](#) in Harrogate, Malton and Selby to listen to how people living their feel, as well as their loved ones, staff and managers to see what's working well and what things need to improve.
- Reviewed 84 GP practice which [led to a number of improvements](#), such as accessibility features, clearer appointment guidance, and updated contact information.



Showcasing volunteer impact

At the heart of what we do

From finding out what people think to helping raise awareness, our volunteers have championed community concerns to improve care.

“When I found Healthwatch and saw what they did, I could see the passion, care and dedication behind all they do. They are eager to create positive changes.”

Fliss started volunteering for Healthwatch after having bad experiences of using health care. She wanted to help others using her own experience to make suggestions that could help services.

“While volunteering with Healthwatch I have gained more knowledge of the issues locally. I’ve learnt a huge amount from training and tasks that I’ve performed, and I’ve gained confidence in myself.”



Fliss

Sheena joined our Healthwatch team after a long career as a nurse of 40 years and after hearing about us through the Patients Association, another independent patient charity campaigning improvements in health and social care.

“I want to ensure that all our people receive the care they deserve. I love speaking with people and listening to them and have really valued volunteering for Healthwatch.”



Sheena

Be part of the change.

If you've felt inspired by these stories, contact us today and find out how you can volunteer for us.



[HealthwatchNorthYorkshire.co.uk](https://www.healthwatchnorthyorkshire.co.uk)



01423 788 128



Hello@hwny.co.uk

Finance and future priorities

We receive funding from North Yorkshire Council under the Health and Social Care Act 2012 to help us do our work.

Our income and expenditure:

Income		Expenditure	
Annual grant from Government	£180,000.00	Expenditure on staff/salaries	£177,677
Additional income	£84,896	Expenditure on organisational delivery	£35,221
		Office and management fee	£17,243
Total income	£264,896	Total Expenditure	£230,141

Additional income for projects:

- **£4,560** from Humber & North Yorkshire Health and Care Partnership
– Health Equity Fellowship support
- **£1,636** from the Association of Directors of Adult Social Services
– Mystery shopping (adult social care), North Yorkshire Council
- **£7,400** from York St John University and the Humber and North Yorkshire Cancer Alliance
– Hearing people's knowledge of the signs and symptoms of cancer
- **£12,990** from North Yorkshire Council
– Conversations with ethnic minority groups about adult social care
- **£50,000** from North Yorkshire Council Development Fund
– Develop volunteer networks and to increase our social media presence.

Integrated Care System (ICS) funding:

Healthwatch across West Yorkshire (including Healthwatch North Yorkshire for Craven) receive funding to support joint working initiatives.

Purpose of ICS funding	Amount
For continued work to listen to experiences and ensure the public's voice is heard at meetings with the NHS	£5,000

Our future priorities

Next steps:

Over the next year, we will keep reaching out to every part of society, especially people in the most deprived areas, so that those in power hear their views and experiences.

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

Our priorities for April 2025 to March 2026, include:

- Working with partners across health and care to ensure there is equitable access and care for people who live rurally, building on our farming report and our Rural Health & Care Summit from 2025.
- We will expand our reach and awareness through digital communication, by working with pharmacies and hospital radio, through targeted conversations with the public using our 'what matters most to your health & wellbeing' survey, and through our volunteers speaking with people.
- We will explore people's perceptions around alcohol consumption and identify the key reasons behind alcohol misuse focusing on the most disadvantaged communities within North Yorkshire.
- Following on from our previous Accessibility report & GP website report, we will review whether adequate 'reasonable adjustments' are being made in primary care to support people with physical and mental disabilities access care.
- We will focus on ensuring that our work continues to make an impact, via monitoring our work and reports, and share this impact with the public via reports and our website.

healthwatch
North Yorkshire

Statutory statements

Healthwatch North Yorkshire, 55 Grove Road, Harrogate, HG1 5EP

Healthwatch North Yorkshire uses the Healthwatch Trademark when undertaking our statutory activities as covered by the licence agreement.

The way we work

Involvement of volunteers and lay people in our governance and decision-making.

Our Healthwatch board consists of ten trustees who work voluntarily to provide direction, oversight, and scrutiny of our activities.

They ensure that decisions about priority areas of work reflect the concerns and interests of our diverse county.

Throughout 2024/25, the board of trustees met five times and made decisions on matters such as staff recruitment, HR and governance policies, finance and our future work priorities. We ensure wider public involvement in deciding our work priorities.

Methods and systems used across the year to obtain people's experiences


We use a wide range of approaches to ensure that as many people as possible can provide us with insight into their experience of using services.

During 2024/25, we have been available by phone and email, provided a web form on our website and through social media, and attended meetings of community groups and forums.

We ensure that this annual report is made available to as many members of the public and partner organisations as possible. We will publish it on our website, email it to those who fund and run health and social care services, community organisations, and the public, and tell people about it at community events and at meetings with health and care decision makers (commissioners and providers).

Healthwatch North Yorkshire
55 Grove Road
Harrogate
HG1 5EP

 www.healthwatchnorthyorkshire.co.uk

 01423 788 128

 hello@hwny.co.uk

 #HealthwatchNorthYorkshire

 #healthwatchNY

 #HealthwatchNY

 #Healthwatch-North-Yorkshire

 #<https://bsky.app/profile/healthwatchny.bsky.social>

Healthwatch North Yorkshire

Trustees' Annual Report *(continued)*

Year ended 31 March 2025

Achievements and performance

- We reached over 1,700 people across the year as part of our research projects, talking to people at awareness events, outdoor stalls, and through our volunteer network. Alongside this over 1,000 people shared their feedback with us about using and accessing health and social care in North Yorkshire. This was via our website, phone calls, email enquiries, and surveys.
- We published 20 reports which featured people's insight into their use and experiences of accessing health and social care. This included our own reports, on for example community postnatal care, accessible information, mental health and farming, alongside joint reports with our local Healthwatch colleagues in West Yorkshire and Humberside. Here we produced a number of reports, on for example migrant health, older people and palliative and end of life care. Additionally, we produced reports on care homes as part of our enter & view programme.
- Over 23,000 people visited our website for information and resources, including information on local health and care services. This was a 21% increase in views from the previous year. We reached 273,000 people via social media, print, radio and TV.
- We have focused on hearing from people facing the greatest health inequalities which have included people living in rural North Yorkshire, with a specific spotlight on the farming community, older people, for example those people living with dementia as part of our care home visits. Women, where we heard from new mothers and their experiences of using and accessing postnatal care (midwife, health visitor and GP). People living with a mental health condition, carers, veterans and adults using adult social care services.
- We have worked collaboratively with our NHS, council, integrated care system, and voluntary community sector partners across the year to ensure public feedback was used to influence improvements in care and services. This has included our involvement in the Women's Health strategy, All-Age Autism strategy and work around supporting carers. Attendance at the North Yorkshire Health & Wellbeing Board, North Yorkshire Adult Safeguarding Board, Humber & North Yorkshire Quality Committee, and York & North Yorkshire Quality Group.
- As a result of our work and reports we have seen improvements in care and service across the system, including in mental health with new mental health practitioners in GP practices providing care for people, improvements in accessible information to support people with additional needs, a renewed focus on directing care for people living rurally to ensure they can access services, and additional support for people with their end of life care needs

Financial review

The trustees are satisfied with the financial position of the charity.

Reserves policy

Healthwatch North Yorkshire will work towards ensuring unrestricted funds are equivalent to one months' running costs. This is to ensure we can provide financial stability and the means for the development of our required activities. The Board will annually review the number of reserves that are required to ensure that they are adequate to fulfil our continuing obligations.

Healthwatch North Yorkshire

Trustees' Annual Report *(continued)*

Year ended 31 March 2025

The trustees' annual report was approved on 3 October 2025 and signed on behalf of the board of trustees by:



P Southgate
Trustee



A Cram
Trustee

Healthwatch North Yorkshire

Trustees' Annual Report *(continued)*

Year ended 31 March 2025

Objectives and activities

The objects of the charity are:

- Gather the views and understand the experiences of people who use health and care services, carers and the wider community.
- Make people's views known, promoting and supporting the involvement of people in the commissioning and provision of local care services and how they are scrutinised.
- Provide advice and information (signposting) to the public about access to services and support to enable people to make informed choices.

Trustees have considered the Charity Commission's guidance on public benefits and believe that Healthwatch North Yorkshire meets the public benefit requirements in delivering the activities that contribute to the objects of the charity. The achievements are set out below in summary on how we delivered our charitable objects and who the beneficiaries are.

Healthwatch North Yorkshire

Trustees' Annual Report

Year ended 31 March 2025

The trustees present their report and the unaudited financial statements of the charity for the year ended 31 March 2025.

Reference and administrative details

Registered charity name	Healthwatch North Yorkshire
Charity registration number	1171152
Principal office	55 Grove Road Harrogate North Yorkshire HG1 5EP

The trustees

P Southgate
J Cunningham
A Cram
A Wood
A Cunningham
S Eyre
J Walker
S Hannah
C O'Neill
H Darton
A Green

Independent examiner	Mr R I Crisop FCA Unit 1, Borough House Business Centre, 5 Borough Road, Richmond, North Yorkshire DL10 4SX
-----------------------------	---

Structure, governance and management

The charity is a Charitable Incorporated Organisation (CIO) registered with the Charity Commission on 17th January 2017. The charity is managed by the board of trustees. Trustees are appointed for a term of 3 years.

New trustees receive an induction and briefing on their legal obligations under charitable law and the content of the constitution as well as management committee papers to familiarise themselves with their role and responsibilities.

Funding is provided through a grant from North Yorkshire County Council and external earned income for time limited projects.

Healthwatch North Yorkshire

Financial Statements

Year ended 31 March 2025

	Page
Trustees' annual report	1
Independent examiner's report to the trustees	5
Statement of financial activities	6
Statement of financial position	7
Notes to the financial statements	8
The following pages do not form part of the financial statements	
Detailed statement of financial activities	16
Notes to the detailed statement of financial activities	17

CHARITY REGISTRATION NUMBER: 1171152

Healthwatch North Yorkshire
Unaudited Financial Statements
31 March 2025

IAN CRISOP ACCOUNTANCY
Chartered accountants
Unit 1, Borough House Business Centre,
5 Borough Road, Richmond,
North Yorkshire
DL10 4SX

Healthwatch North Yorkshire

Statement of Financial Activities

Year ended 31 March 2025

		2025			2024
	Note	Unrestricted funds £	Restricted funds £	Total funds £	Total funds £
Income and endowments					
Donations and legacies	4	212,636	50,000	262,636	189,168
Charitable activities	5	–	–	–	6,242
Investment income	6	2,260	–	2,260	1,421
Total income		<u>214,896</u>	<u>50,000</u>	<u>264,896</u>	<u>196,831</u>
Expenditure					
Expenditure on charitable activities	7,8	214,297	16,556	230,853	237,610
Total expenditure		<u>214,297</u>	<u>16,556</u>	<u>230,853</u>	<u>237,610</u>
Net income/(expenditure) and net movement in funds					
		<u>599</u>	<u>33,444</u>	<u>34,043</u>	<u>(40,779)</u>
Reconciliation of funds					
Total funds brought forward		<u>99,362</u>	<u>–</u>	<u>99,362</u>	<u>140,141</u>
Total funds carried forward		<u>99,961</u>	<u>33,444</u>	<u>133,405</u>	<u>99,362</u>

The statement of financial activities includes all gains and losses recognised in the year. All income and expenditure derive from continuing activities.

The notes on pages 8 to 14 form part of these financial statements.

Healthwatch North Yorkshire

Independent Examiner's Report to the Trustees of Healthwatch North Yorkshire

Year ended 31 March 2025

I report to the trustees on my examination of the financial statements of Healthwatch North Yorkshire ('the charity') for the year ended 31 March 2025.

Responsibilities and basis of report

As the trustees of the charity you are responsible for the preparation of the financial statements in accordance with the requirements of the Charities Act 2011 ('the Act').

I report in respect of my examination of the charity's financial statements carried out under section 145 of the 2011 Act and in carrying out my examination I have followed all the applicable Directions given by the Charity Commission under section 145(5)(b) of the Act.

Independent examiner's statement

Since the charity's gross income exceeded £250,000 your examiner must be a member of a body listed in section 145 of the 2011 Act. I confirm that I am qualified to undertake the examination because I am a member of the Institute of Chartered Accountants in England and Wales (ICAEW), which is one of the listed bodies.

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

1. accounting records were not kept in respect of the charity as required by section 130 of the Act; or
2. the financial statements do not accord with those records; or
3. the financial statements do not comply with the applicable requirements concerning the form and content of accounts set out in the Charities (Accounts and Reports) Regulations 2008 other than any requirement that the accounts give a 'true and fair' view which is not a matter considered as part of an independent examination.

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

Mr R I Crisop FCA
Independent Examiner

Unit 1, Borough House Business Centre,
5 Borough Road, Richmond,
North Yorkshire
DL10 4SX

3 October 2025

Healthwatch North Yorkshire

Statement of Financial Position


31 March 2025

	Note	2025 £	£	2024 £
Fixed assets				
Tangible fixed assets	13		684	1,395
Current assets				
Debtors	14	1,050		15,288
Cash at bank and in hand		<u>132,332</u>		<u>83,340</u>
		133,382		98,628
Creditors: amounts falling due within one year	15	<u>661</u>		<u>661</u>
Net current assets			<u>132,721</u>	<u>97,967</u>
Total assets less current liabilities			<u>133,405</u>	<u>99,362</u>
Net assets			<u>133,405</u>	<u>99,362</u>
Funds of the charity				
Restricted funds			33,444	–
Unrestricted funds			<u>99,961</u>	<u>99,362</u>
Total charity funds	16		<u>133,405</u>	<u>99,362</u>

These financial statements were approved by the board of trustees and authorised for issue on 3 October 2025, and are signed on behalf of the board by:



P Southgate
Trustee



A Cram
Trustee

The notes on pages 8 to 14 form part of these financial statements.

Healthwatch North Yorkshire

Notes to the Financial Statements

Year ended 31 March 2025

1. General information

The charity is a public benefit entity and a registered charity in England and Wales and is unincorporated. The address of the principal office is 55 Grove Road, Harrogate, North Yorkshire, HG1 5EP.

2. Statement of compliance

These financial statements have been prepared in compliance with FRS 102, 'The Financial Reporting Standard applicable in the UK and the Republic of Ireland', the 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) (Charities SORP (FRS 102)) and the Charities Act 2011.

3. Accounting policies

Basis of preparation

The financial statements have been prepared on the historical cost basis, as modified by the revaluation of certain financial assets and liabilities and investment properties measured at fair value through income or expenditure.

The financial statements are prepared in sterling, which is the functional currency of the entity.

Going concern

There are no material uncertainties about the charity's ability to continue.

Judgements and key sources of estimation uncertainty

The preparation of the financial statements requires management to make judgements, estimates and assumptions that affect the amounts reported. These estimates and judgements are continually reviewed and are based on experience and other factors, including expectations of future events that are believed to be reasonable under the circumstances.

Fund accounting

Unrestricted funds are available for use at the discretion of the trustees to further any of the charity's purposes.

Designated funds are unrestricted funds earmarked by the trustees for particular future project or commitment.

Restricted funds are subjected to restrictions on their expenditure declared by the donor or through the terms of an appeal, and fall into one of two sub-classes: restricted income funds or endowment funds.

Healthwatch North Yorkshire

Notes to the Financial Statements *(continued)*

Year ended 31 March 2025

3. Accounting policies *(continued)*

Incoming resources

All incoming resources are included in the statement of financial activities when entitlement has passed to the charity; it is probable that the economic benefits associated with the transaction will flow to the charity and the amount can be reliably measured. The following specific policies are applied to particular categories of income:

- income from donations or grants is recognised when there is evidence of entitlement to the gift, receipt is probable and its amount can be measured reliably.
- legacy income is recognised when receipt is probable and entitlement is established.
- income from donated goods is measured at the fair value of the goods unless this is impractical to measure reliably, in which case the value is derived from the cost to the donor or the estimated resale value. Donated facilities and services are recognised in the accounts when received if the value can be reliably measured. No amounts are included for the contribution of general volunteers.
- income from contracts for the supply of services is recognised with the delivery of the contracted service. This is classified as unrestricted funds unless there is a contractual requirement for it to be spent on a particular purpose and returned if unspent, in which case it may be regarded as restricted.

Resources expended

Expenditure is recognised on an accruals basis as a liability is incurred. Expenditure includes any VAT which cannot be fully recovered, and is classified under headings of the statement of financial activities to which it relates:

- expenditure on raising funds includes the costs of all fundraising activities, events, non-charitable trading activities, and the sale of donated goods.
- expenditure on charitable activities includes all costs incurred by a charity in undertaking activities that further its charitable aims for the benefit of its beneficiaries, including those support costs and costs relating to the governance of the charity apportioned to charitable activities.
- other expenditure includes all expenditure that is neither related to raising funds for the charity nor part of its expenditure on charitable activities.

All costs are allocated to expenditure categories reflecting the use of the resource. Direct costs attributable to a single activity are allocated directly to that activity. Shared costs are apportioned between the activities they contribute to on a reasonable, justifiable and consistent basis.

Tangible assets

Tangible assets are initially recorded at cost, and subsequently stated at cost less any accumulated depreciation and impairment losses. Any tangible assets carried at revalued amounts are recorded at the fair value at the date of revaluation less any subsequent accumulated depreciation and subsequent accumulated impairment losses.

Healthwatch North Yorkshire

Notes to the Financial Statements *(continued)*

Year ended 31 March 2025

3. Accounting policies *(continued)*

Tangible assets *(continued)*

An increase in the carrying amount of an asset as a result of a revaluation, is recognised in other recognised gains and losses, unless it reverses a charge for impairment that has previously been recognised as expenditure within the statement of financial activities. A decrease in the carrying amount of an asset as a result of revaluation, is recognised in other recognised gains and losses, except to which it offsets any previous revaluation gain, in which case the loss is shown within other recognised gains and losses on the statement of financial activities.

Depreciation

Depreciation is calculated so as to write off the cost or valuation of an asset, less its residual value, over the useful economic life of that asset as follows:

Fixtures, equipment etc. - 20% straight line

Impairment of fixed assets

A review for indicators of impairment is carried out at each reporting date, with the recoverable amount being estimated where such indicators exist. Where the carrying value exceeds the recoverable amount, the asset is impaired accordingly. Prior impairments are also reviewed for possible reversal at each reporting date.

For the purposes of impairment testing, when it is not possible to estimate the recoverable amount of an individual asset, an estimate is made of the recoverable amount of the cash-generating unit to which the asset belongs. The cash-generating unit is the smallest identifiable group of assets that includes the asset and generates cash inflows that largely independent of the cash inflows from other assets or groups of assets.

For impairment testing of goodwill, the goodwill acquired in a business combination is, from the acquisition date, allocated to each of the cash-generating units that are expected to benefit from the synergies of the combination, irrespective of whether other assets or liabilities of the charity are assigned to those units.

Financial instruments

A financial asset or a financial liability is recognised only when the charity becomes a party to the contractual provisions of the instrument.

Basic financial instruments are initially recognised at the amount receivable or payable including any related transaction costs.

Current assets and current liabilities are subsequently measured at the cash or other consideration expected to be paid or received and not discounted.

Debt instruments are subsequently measured at amortised cost.

Where investments in shares are publicly traded or their fair value can otherwise be measured reliably, the investment is subsequently measured at fair value with changes in fair value recognised in income and expenditure. All other such investments are subsequently measured at cost less impairment.

Healthwatch North Yorkshire

Notes to the Financial Statements *(continued)*

Year ended 31 March 2025

3. Accounting policies *(continued)*

Financial instruments *(continued)*

Other financial instruments, including derivatives, are initially recognised at fair value, unless payment for an asset is deferred beyond normal business terms or financed at a rate of interest that is not a market rate, in which case the asset is measured at the present value of the future payments discounted at a market rate of interest for a similar debt instrument.

Other financial instruments are subsequently measured at fair value, with any changes recognised in the statement of financial activities, with the exception of hedging instruments in a designated hedging relationship.

Financial assets that are measured at cost or amortised cost are reviewed for objective evidence of impairment at the end of each reporting date. If there is objective evidence of impairment, an impairment loss is recognised under the appropriate heading in the statement of financial activities in which the initial gain was recognised.

For all equity instruments regardless of significance, and other financial assets that are individually significant, these are assessed individually for impairment. Other financial assets are either assessed individually or grouped on the basis of similar credit risk characteristics.

Any reversals of impairment are recognised immediately, to the extent that the reversal does not result in a carrying amount of the financial asset that exceeds what the carrying amount would have been had the impairment not previously been recognised.

4. Donations and legacies

	Unrestricted Funds £	Restricted Funds £	Total Funds 2025 £
Grants			
NYCC service grant	180,000	–	180,000
Other grants	32,636	50,000	82,636
	<u>212,636</u>	<u>50,000</u>	<u>262,636</u>
	Unrestricted Funds £	Restricted Funds £	Total Funds 2024 £
Grants			
NYCC service grant	168,793	–	168,793
Other grants	20,375	–	20,375
	<u>189,168</u>	<u>–</u>	<u>189,168</u>

5. Charitable activities

	Unrestricted Funds £	Total Funds 2025 £	Unrestricted Funds £	Total Funds 2024 £
Other commissioned work	–	–	2,857	2,857
Other work	–	–	3,385	3,385
	<u>–</u>	<u>–</u>	<u>6,242</u>	<u>6,242</u>

Healthwatch North Yorkshire

Notes to the Financial Statements *(continued)*

Year ended 31 March 2025

6. Investment income

	Unrestricted Funds	Total Funds 2025	Unrestricted Funds	Total Funds 2024
	£	£	£	£
Bank interest receivable	<u>2,260</u>	<u>2,260</u>	<u>1,421</u>	<u>1,421</u>

7. Expenditure on charitable activities by fund type

	Unrestricted Funds	Restricted Funds	Total Funds 2025
	£	£	£
Charitable activity	<u>214,297</u>	<u>16,556</u>	<u>230,853</u>

	Unrestricted Funds	Restricted Funds	Total Funds 2024
	£	£	£
Charitable activity	<u>237,610</u>	<u>—</u>	<u>237,610</u>

8. Expenditure on charitable activities by activity type

	Activities undertaken directly	Total funds 2025	Total fund 2024
	£	£	£
Charitable activity	<u>230,853</u>	<u>230,853</u>	<u>237,610</u>

9. Net income/(expenditure)

Net income/(expenditure) is stated after charging/(crediting):

	2025	2024
	£	£
Depreciation of tangible fixed assets	711	711
Operating lease rentals	<u>2,869</u>	<u>6,211</u>

10. Independent examination fees

	2025	2024
	£	£
Fees payable to the independent examiner for: Independent examination of the financial statements	<u>720</u>	<u>700</u>

11. Staff costs

The total staff costs and employee benefits for the reporting period are analysed as follows:

	2025	2024
	£	£
Wages and salaries	<u>179,276</u>	<u>182,392</u>

The average head count of employees during the year was 6 (2024: 6).

No employee received employee benefits of more than £60,000 during the year (2024: Nil).

Healthwatch North Yorkshire

Notes to the Financial Statements *(continued)*

Year ended 31 March 2025

12. Trustee remuneration and expenses

No remuneration or other benefits from employment with the charity or a related entity were received by the trustees.

13. Tangible fixed assets

	Equipment £	Total £
Cost		
At 1 April 2024 and 31 March 2025	<u>15,950</u>	<u>15,950</u>
Depreciation		
At 1 April 2024	14,555	14,555
Charge for the year	<u>711</u>	<u>711</u>
At 31 March 2025	<u>15,266</u>	<u>15,266</u>
Carrying amount		
At 31 March 2025	<u>684</u>	<u>684</u>
At 31 March 2024	<u>1,395</u>	<u>1,395</u>

14. Debtors

	2025 £	2024 £
Other debtors	<u>1,050</u>	<u>15,288</u>

15. Creditors: amounts falling due within one year

	2025 £	2024 £
Accruals and deferred income	<u>661</u>	<u>661</u>

16. Analysis of charitable funds

Unrestricted funds

	At 1 April 2024 £	Income £	Expenditure £	At 31 March 2025 £
General funds	<u>99,362</u>	<u>214,896</u>	<u>(214,297)</u>	<u>99,961</u>

	At 1 April 2023 £	Income £	Expenditure £	At 31 March 2024 £
General funds	<u>140,141</u>	<u>196,831</u>	<u>(237,610)</u>	<u>99,362</u>

Healthwatch North Yorkshire

Notes to the Financial Statements *(continued)*

Year ended 31 March 2025

16. Analysis of charitable funds *(continued)*

Restricted funds

	At 1 April 2024	Income £	Expenditure £	At 31 March 2025
Restricted Fund	£ -	50,000	(16,556)	£ 33,444

	At 1 April 2023	Income £	Expenditure £	At 31 March 2024
Restricted Fund	£ -	-	-	£ -

17. Analysis of net assets between funds

	Unrestricted Funds £	Total Funds 2025 £
Tangible fixed assets	684	684
Current assets	99,938	99,938
Creditors less than 1 year	(661)	(661)
Net assets	<u>99,961</u>	<u>99,961</u>

	Unrestricted Funds £	Total Funds 2024 £
Tangible fixed assets	1,395	1,395
Current assets	98,628	98,628
Creditors less than 1 year	(661)	(661)
Net assets	<u>99,362</u>	<u>99,362</u>

Healthwatch North Yorkshire

Management Information

Year ended 31 March 2025

The following pages do not form part of the financial statements.

Healthwatch North Yorkshire

Detailed Statement of Financial Activities

Year ended 31 March 2025

	2025 £	2024 £
Income and endowments		
Donations and legacies		
NYCC service grant	180,000	168,793
Other grants	<u>82,636</u>	<u>20,375</u>
	<u>262,636</u>	<u>189,168</u>
Charitable activities		
Other commissioned work	-	2,857
Other work	-	3,385
	<u>-</u>	<u>6,242</u>
Investment income		
Bank interest receivable	<u>2,260</u>	<u>1,421</u>
Total income	<u>264,896</u>	<u>196,831</u>
Expenditure		
Expenditure on charitable activities		
Wages/salaries inc. fees	179,276	182,392
Staff training and welfare	2,869	6,211
Subs & publications	1,951	782
Engagement budget	8,045	6,834
Sundry expenses	-	31
Insurance	1,737	1,679
Staff travel and expenses	3,554	6,251
Repairs and IT costs	6,716	6,432
Volunteer travel expenses	590	276
Legal, professional and consultancy fees	1,010	1,134
Trustees expenses	414	610
Office rent, broadband and phone	18,823	18,776
Depreciation	711	711
Bank charges	60	60
Printing, stationery and postage	1,295	831
Marketing and publicity	3,351	3,646
Room hire and hospitality	451	954
	<u>230,853</u>	<u>237,610</u>
Total expenditure	<u>230,853</u>	<u>237,610</u>
Net income/(expenditure)	<u>34,043</u>	<u>(40,779)</u>

Healthwatch North Yorkshire

Notes to the Detailed Statement of Financial Activities

Year ended 31 March 2025

	2025	2024
	£	£
Expenditure on charitable activities		
<i>Activities undertaken directly</i>		
Wages/salaries inc fees	179,276	182,392
Staff training and welfare	2,869	6,211
Subs & publications	1,951	782
Engagement budget	8,045	6,834
Sundry expenses	–	31
Insurance	1,737	1,679
Staff travel and expenses	3,554	6,251
Repairs and IT costs	6,716	6,432
Volunteer travel expenses	590	276
Legal, professional and consultancy fees	1,010	1,134
Trustees expenses	414	610
Office rent, broadband and phone	18,823	18,776
Depreciation	711	711
Bank charges	60	60
Printing, stationery and postage	1,295	831
Marketing and publicity	3,351	3,646
Room hire and hospitality	451	954
	<u>230,853</u>	<u>237,610</u>
Expenditure on charitable activities	<u>230,853</u>	<u>237,610</u>

Healthwatch North Yorkshire

Trustees' Annual Report *(continued)*

Year ended 31 March 2025

Achievements and performance

- We reached over 1,700 people across the year as part of our research projects, talking to people at awareness events, outdoor stalls, and through our volunteer network. Alongside this over 1,000 people shared their feedback with us about using and accessing health and social care in North Yorkshire. This was via our website, phone calls, email enquiries, and surveys.
- We published 20 reports which featured people's insight into their use and experiences of accessing health and social care. This included our own reports, on for example community postnatal care, accessible information, mental health and farming, alongside joint reports with our local Healthwatch colleagues in West Yorkshire and Humberside. Here we produced a number of reports, on for example migrant health, older people and palliative and end of life care. Additionally, we produced reports on care homes as part of our enter & view programme.
- Over 23,000 people visited our website for information and resources, including information on local health and care services. This was a 21% increase in views from the previous year. We reached 273,000 people via social media, print, radio and TV.
- We have focused on hearing from people facing the greatest health inequalities which have included people living in rural North Yorkshire, with a specific spotlight on the farming community, older people, for example those people living with dementia as part of our care home visits. Women, where we heard from new mothers and their experiences of using and accessing postnatal care (midwife, health visitor and GP). People living with a mental health condition, carers, veterans and adults using adult social care services.
- We have worked collaboratively with our NHS, council, integrated care system, and voluntary community sector partners across the year to ensure public feedback was used to influence improvements in care and services. This has included our involvement in the Women's Health strategy, All-Age Autism strategy and work around supporting carers. Attendance at the North Yorkshire Health & Wellbeing Board, North Yorkshire Adult Safeguarding Board, Humber & North Yorkshire Quality Committee, and York & North Yorkshire Quality Group.
- As a result of our work and reports we have seen improvements in care and service across the system, including in mental health with new mental health practitioners in GP practices providing care for people, improvements in accessible information to support people with additional needs, a renewed focus on directing care for people living rurally to ensure they can access services, and additional support for people with their end of life care needs

Financial review

The trustees are satisfied with the financial position of the charity.

Reserves policy

Healthwatch North Yorkshire will work towards ensuring unrestricted funds are equivalent to one months' running costs. This is to ensure we can provide financial stability and the means for the development of our required activities. The Board will annually review the number of reserves that are required to ensure that they are adequate to fulfil our continuing obligations.

Healthwatch North Yorkshire

Trustees' Annual Report *(continued)*

Year ended 31 March 2025

The trustees' annual report was approved on 3 October 2025 and signed on behalf of the board of trustees by:



P Southgate
Trustee



A Cram
Trustee

Healthwatch North Yorkshire

Trustees' Annual Report *(continued)*

Year ended 31 March 2025

Objectives and activities

The objects of the charity are:

- Gather the views and understand the experiences of people who use health and care services, carers and the wider community.
- Make people's views known, promoting and supporting the involvement of people in the commissioning and provision of local care services and how they are scrutinised.
- Provide advice and information (signposting) to the public about access to services and support to enable people to make informed choices.

Trustees have considered the Charity Commission's guidance on public benefits and believe that Healthwatch North Yorkshire meets the public benefit requirements in delivering the activities that contribute to the objects of the charity. The achievements are set out below in summary on how we delivered our charitable objects and who the beneficiaries are.

Healthwatch North Yorkshire

Trustees' Annual Report

Year ended 31 March 2025

The trustees present their report and the unaudited financial statements of the charity for the year ended 31 March 2025.

Reference and administrative details

Registered charity name	Healthwatch North Yorkshire
Charity registration number	1171152
Principal office	55 Grove Road Harrogate North Yorkshire HG1 5EP

The trustees

P Southgate
J Cunningham
A Cram
A Wood
A Cunningham
S Eyre
J Walker
S Hannah
C O'Neill
H Darton
A Green

Independent examiner	Mr R I Crisop FCA Unit 1, Borough House Business Centre, 5 Borough Road, Richmond, North Yorkshire DL10 4SX
-----------------------------	---

Structure, governance and management

The charity is a Charitable Incorporated Organisation (CIO) registered with the Charity Commission on 17th January 2017. The charity is managed by the board of trustees. Trustees are appointed for a term of 3 years.

New trustees receive an induction and briefing on their legal obligations under charitable law and the content of the constitution as well as management committee papers to familiarise themselves with their role and responsibilities.

Funding is provided through a grant from North Yorkshire County Council and external earned income for time limited projects.

Healthwatch North Yorkshire

Financial Statements

Year ended 31 March 2025

	Page
Trustees' annual report	1
Independent examiner's report to the trustees	5
Statement of financial activities	6
Statement of financial position	7
Notes to the financial statements	8
The following pages do not form part of the financial statements	
Detailed statement of financial activities	16
Notes to the detailed statement of financial activities	17

CHARITY REGISTRATION NUMBER: 1171152

Healthwatch North Yorkshire
Unaudited Financial Statements
31 March 2025

IAN CRISOP ACCOUNTANCY
Chartered accountants
Unit 1, Borough House Business Centre,
5 Borough Road, Richmond,
North Yorkshire
DL10 4SX

Healthwatch North Yorkshire

Statement of Financial Activities

Year ended 31 March 2025

		2025		2024	
	Note	Unrestricted funds £	Restricted funds £	Total funds £	Total funds £
Income and endowments					
Donations and legacies	4	212,636	50,000	262,636	189,168
Charitable activities	5	–	–	–	6,242
Investment income	6	2,260	–	2,260	1,421
Total income		<u>214,896</u>	<u>50,000</u>	<u>264,896</u>	<u>196,831</u>
Expenditure					
Expenditure on charitable activities	7,8	214,297	16,556	230,853	237,610
Total expenditure		<u>214,297</u>	<u>16,556</u>	<u>230,853</u>	<u>237,610</u>
Net income/(expenditure) and net movement in funds					
		<u>599</u>	<u>33,444</u>	<u>34,043</u>	<u>(40,779)</u>
Reconciliation of funds					
Total funds brought forward		<u>99,362</u>	<u>–</u>	<u>99,362</u>	<u>140,141</u>
Total funds carried forward		<u>99,961</u>	<u>33,444</u>	<u>133,405</u>	<u>99,362</u>

The statement of financial activities includes all gains and losses recognised in the year. All income and expenditure derive from continuing activities.

The notes on pages 8 to 14 form part of these financial statements.

Healthwatch North Yorkshire

Independent Examiner's Report to the Trustees of Healthwatch North Yorkshire

Year ended 31 March 2025

I report to the trustees on my examination of the financial statements of Healthwatch North Yorkshire ('the charity') for the year ended 31 March 2025.

Responsibilities and basis of report

As the trustees of the charity you are responsible for the preparation of the financial statements in accordance with the requirements of the Charities Act 2011 ('the Act').

I report in respect of my examination of the charity's financial statements carried out under section 145 of the 2011 Act and in carrying out my examination I have followed all the applicable Directions given by the Charity Commission under section 145(5)(b) of the Act.

Independent examiner's statement

Since the charity's gross income exceeded £250,000 your examiner must be a member of a body listed in section 145 of the 2011 Act. I confirm that I am qualified to undertake the examination because I am a member of the Institute of Chartered Accountants in England and Wales (ICAEW), which is one of the listed bodies.

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

1. accounting records were not kept in respect of the charity as required by section 130 of the Act; or
2. the financial statements do not accord with those records; or
3. the financial statements do not comply with the applicable requirements concerning the form and content of accounts set out in the Charities (Accounts and Reports) Regulations 2008 other than any requirement that the accounts give a 'true and fair' view which is not a matter considered as part of an independent examination.

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

Mr R I Crisop FCA
Independent Examiner

Unit 1, Borough House Business Centre,
5 Borough Road, Richmond,
North Yorkshire
DL10 4SX

3 October 2025


Healthwatch North Yorkshire

Statement of Financial Position


31 March 2025

	Note	2025 £	2024 £
Fixed assets			
Tangible fixed assets	13	684	1,395
Current assets			
Debtors	14	1,050	15,288
Cash at bank and in hand		<u>132,332</u>	<u>83,340</u>
		133,382	98,628
Creditors: amounts falling due within one year	15	<u>661</u>	<u>661</u>
Net current assets		132,721	97,967
Total assets less current liabilities		133,405	99,362
Net assets		<u>133,405</u>	<u>99,362</u>
Funds of the charity			
Restricted funds		33,444	–
Unrestricted funds		<u>99,961</u>	<u>99,362</u>
Total charity funds	16	<u>133,405</u>	<u>99,362</u>

These financial statements were approved by the board of trustees and authorised for issue on 3 October 2025, and are signed on behalf of the board by:



P Southgate
Trustee



A Cram
Trustee

The notes on pages 8 to 14 form part of these financial statements.

Healthwatch North Yorkshire

Notes to the Financial Statements

Year ended 31 March 2025

1. General information

The charity is a public benefit entity and a registered charity in England and Wales and is unincorporated. The address of the principal office is 55 Grove Road, Harrogate, North Yorkshire, HG1 5EP.

2. Statement of compliance

These financial statements have been prepared in compliance with FRS 102, 'The Financial Reporting Standard applicable in the UK and the Republic of Ireland', the 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) (Charities SORP (FRS 102)) and the Charities Act 2011.

3. Accounting policies

Basis of preparation

The financial statements have been prepared on the historical cost basis, as modified by the revaluation of certain financial assets and liabilities and investment properties measured at fair value through income or expenditure.

The financial statements are prepared in sterling, which is the functional currency of the entity.

Going concern

There are no material uncertainties about the charity's ability to continue.

Judgements and key sources of estimation uncertainty

The preparation of the financial statements requires management to make judgements, estimates and assumptions that affect the amounts reported. These estimates and judgements are continually reviewed and are based on experience and other factors, including expectations of future events that are believed to be reasonable under the circumstances.

Fund accounting

Unrestricted funds are available for use at the discretion of the trustees to further any of the charity's purposes.

Designated funds are unrestricted funds earmarked by the trustees for particular future project or commitment.

Restricted funds are subjected to restrictions on their expenditure declared by the donor or through the terms of an appeal, and fall into one of two sub-classes: restricted income funds or endowment funds.

Healthwatch North Yorkshire

Notes to the Financial Statements *(continued)*

Year ended 31 March 2025

3. Accounting policies *(continued)*

Incoming resources

All incoming resources are included in the statement of financial activities when entitlement has passed to the charity; it is probable that the economic benefits associated with the transaction will flow to the charity and the amount can be reliably measured. The following specific policies are applied to particular categories of income:

- income from donations or grants is recognised when there is evidence of entitlement to the gift, receipt is probable and its amount can be measured reliably.
- legacy income is recognised when receipt is probable and entitlement is established.
- income from donated goods is measured at the fair value of the goods unless this is impractical to measure reliably, in which case the value is derived from the cost to the donor or the estimated resale value. Donated facilities and services are recognised in the accounts when received if the value can be reliably measured. No amounts are included for the contribution of general volunteers.
- income from contracts for the supply of services is recognised with the delivery of the contracted service. This is classified as unrestricted funds unless there is a contractual requirement for it to be spent on a particular purpose and returned if unspent, in which case it may be regarded as restricted.

Resources expended

Expenditure is recognised on an accruals basis as a liability is incurred. Expenditure includes any VAT which cannot be fully recovered, and is classified under headings of the statement of financial activities to which it relates:

- expenditure on raising funds includes the costs of all fundraising activities, events, non-charitable trading activities, and the sale of donated goods.
- expenditure on charitable activities includes all costs incurred by a charity in undertaking activities that further its charitable aims for the benefit of its beneficiaries, including those support costs and costs relating to the governance of the charity apportioned to charitable activities.
- other expenditure includes all expenditure that is neither related to raising funds for the charity nor part of its expenditure on charitable activities.

All costs are allocated to expenditure categories reflecting the use of the resource. Direct costs attributable to a single activity are allocated directly to that activity. Shared costs are apportioned between the activities they contribute to on a reasonable, justifiable and consistent basis.

Tangible assets

Tangible assets are initially recorded at cost, and subsequently stated at cost less any accumulated depreciation and impairment losses. Any tangible assets carried at revalued amounts are recorded at the fair value at the date of revaluation less any subsequent accumulated depreciation and subsequent accumulated impairment losses.

Healthwatch North Yorkshire

Notes to the Financial Statements *(continued)*

Year ended 31 March 2025

3. Accounting policies *(continued)*

Tangible assets *(continued)*

An increase in the carrying amount of an asset as a result of a revaluation, is recognised in other recognised gains and losses, unless it reverses a charge for impairment that has previously been recognised as expenditure within the statement of financial activities. A decrease in the carrying amount of an asset as a result of revaluation, is recognised in other recognised gains and losses, except to which it offsets any previous revaluation gain, in which case the loss is shown within other recognised gains and losses on the statement of financial activities.

Depreciation

Depreciation is calculated so as to write off the cost or valuation of an asset, less its residual value, over the useful economic life of that asset as follows:

Fixtures, equipment etc. - 20% straight line

Impairment of fixed assets

A review for indicators of impairment is carried out at each reporting date, with the recoverable amount being estimated where such indicators exist. Where the carrying value exceeds the recoverable amount, the asset is impaired accordingly. Prior impairments are also reviewed for possible reversal at each reporting date.

For the purposes of impairment testing, when it is not possible to estimate the recoverable amount of an individual asset, an estimate is made of the recoverable amount of the cash-generating unit to which the asset belongs. The cash-generating unit is the smallest identifiable group of assets that includes the asset and generates cash inflows that largely independent of the cash inflows from other assets or groups of assets.

For impairment testing of goodwill, the goodwill acquired in a business combination is, from the acquisition date, allocated to each of the cash-generating units that are expected to benefit from the synergies of the combination, irrespective of whether other assets or liabilities of the charity are assigned to those units.

Financial instruments

A financial asset or a financial liability is recognised only when the charity becomes a party to the contractual provisions of the instrument.

Basic financial instruments are initially recognised at the amount receivable or payable including any related transaction costs.

Current assets and current liabilities are subsequently measured at the cash or other consideration expected to be paid or received and not discounted.

Debt instruments are subsequently measured at amortised cost.

Where investments in shares are publicly traded or their fair value can otherwise be measured reliably, the investment is subsequently measured at fair value with changes in fair value recognised in income and expenditure. All other such investments are subsequently measured at cost less impairment.

Healthwatch North Yorkshire

Notes to the Financial Statements *(continued)*

Year ended 31 March 2025

3. Accounting policies *(continued)*

Financial instruments *(continued)*

Other financial instruments, including derivatives, are initially recognised at fair value, unless payment for an asset is deferred beyond normal business terms or financed at a rate of interest that is not a market rate, in which case the asset is measured at the present value of the future payments discounted at a market rate of interest for a similar debt instrument.

Other financial instruments are subsequently measured at fair value, with any changes recognised in the statement of financial activities, with the exception of hedging instruments in a designated hedging relationship.

Financial assets that are measured at cost or amortised cost are reviewed for objective evidence of impairment at the end of each reporting date. If there is objective evidence of impairment, an impairment loss is recognised under the appropriate heading in the statement of financial activities in which the initial gain was recognised.

For all equity instruments regardless of significance, and other financial assets that are individually significant, these are assessed individually for impairment. Other financial assets are either assessed individually or grouped on the basis of similar credit risk characteristics.

Any reversals of impairment are recognised immediately, to the extent that the reversal does not result in a carrying amount of the financial asset that exceeds what the carrying amount would have been had the impairment not previously been recognised.

4. Donations and legacies

	Unrestricted Funds £	Restricted Funds £	Total Funds 2025 £
Grants			
NYCC service grant	180,000	–	180,000
Other grants	32,636	50,000	82,636
	<u>212,636</u>	<u>50,000</u>	<u>262,636</u>
	Unrestricted Funds £	Restricted Funds £	Total Funds 2024 £
Grants			
NYCC service grant	168,793	–	168,793
Other grants	20,375	–	20,375
	<u>189,168</u>	<u>–</u>	<u>189,168</u>

5. Charitable activities

	Unrestricted Funds £	Total Funds 2025 £	Unrestricted Funds £	Total Funds 2024 £
Other commissioned work	–	–	2,857	2,857
Other work	–	–	3,385	3,385
	<u>–</u>	<u>–</u>	<u>6,242</u>	<u>6,242</u>

Healthwatch North Yorkshire

Notes to the Financial Statements *(continued)*

Year ended 31 March 2025

6. Investment income

	Unrestricted Funds	Total Funds 2025	Unrestricted Funds	Total Funds 2024
	£	£	£	£
Bank interest receivable	2,260	<u>2,260</u>	1,421	<u>1,421</u>

7. Expenditure on charitable activities by fund type

	Unrestricted Funds	Restricted Funds	Total Funds 2025
	£	£	£
Charitable activity	214,297	16,556	<u>230,853</u>

	Unrestricted Funds	Restricted Funds	Total Funds 2024
	£	£	£
Charitable activity	237,610	—	<u>237,610</u>

8. Expenditure on charitable activities by activity type

	Activities undertaken directly	Total funds 2025	Total fund 2024
	£	£	£
Charitable activity	230,853	<u>230,853</u>	<u>237,610</u>

9. Net income/(expenditure)

Net income/(expenditure) is stated after charging/(crediting):

	2025	2024
	£	£
Depreciation of tangible fixed assets	711	711
Operating lease rentals	<u>2,869</u>	<u>6,211</u>

10. Independent examination fees

	2025	2024
	£	£
Fees payable to the independent examiner for: Independent examination of the financial statements	<u>720</u>	<u>700</u>

11. Staff costs

The total staff costs and employee benefits for the reporting period are analysed as follows:

	2025	2024
	£	£
Wages and salaries	<u>179,276</u>	<u>182,392</u>

The average head count of employees during the year was 6 (2024: 6).

No employee received employee benefits of more than £60,000 during the year (2024: Nil).

Healthwatch North Yorkshire

Notes to the Financial Statements *(continued)*

Year ended 31 March 2025

12. Trustee remuneration and expenses

No remuneration or other benefits from employment with the charity or a related entity were received by the trustees.

13. Tangible fixed assets

	Equipment £	Total £
Cost		
At 1 April 2024 and 31 March 2025	<u>15,950</u>	<u>15,950</u>
Depreciation		
At 1 April 2024	14,555	14,555
Charge for the year	<u>711</u>	<u>711</u>
At 31 March 2025	<u>15,266</u>	<u>15,266</u>
Carrying amount		
At 31 March 2025	<u>684</u>	<u>684</u>
At 31 March 2024	<u>1,395</u>	<u>1,395</u>

14. Debtors

	2025 £	2024 £
Other debtors	<u>1,050</u>	<u>15,288</u>

15. Creditors: amounts falling due within one year

	2025 £	2024 £
Accruals and deferred income	<u>661</u>	<u>661</u>

16. Analysis of charitable funds

Unrestricted funds

	At 1 April 2024 £	Income £	Expenditure £	At 31 March 2025 £
General funds	<u>99,362</u>	<u>214,896</u>	<u>(214,297)</u>	<u>99,961</u>

	At 1 April 2023 £	Income £	Expenditure £	At 31 March 2024 £
General funds	<u>140,141</u>	<u>196,831</u>	<u>(237,610)</u>	<u>99,362</u>

Healthwatch North Yorkshire

Notes to the Financial Statements *(continued)*

Year ended 31 March 2025

16. Analysis of charitable funds *(continued)*

Restricted funds

	At 1 April 2024	Income	Expenditure	At 31 March 2025
	£	£	£	£
Restricted Fund	<u>—</u>	<u>50,000</u>	<u>(16,556)</u>	<u>33,444</u>

	At 1 April 2023	Income	Expenditure	At 31 March 2024
	£	£	£	£
Restricted Fund	<u>—</u>	<u>—</u>	<u>—</u>	<u>—</u>

17. Analysis of net assets between funds

	Unrestricted Funds	Total Funds 2025
	£	£
Tangible fixed assets	684	684
Current assets	99,938	99,938
Creditors less than 1 year	(661)	(661)
Net assets	<u>99,961</u>	<u>99,961</u>

	Unrestricted Funds	Total Funds 2024
	£	£
Tangible fixed assets	1,395	1,395
Current assets	98,628	98,628
Creditors less than 1 year	(661)	(661)
Net assets	<u>99,362</u>	<u>99,362</u>

Healthwatch North Yorkshire

Management Information

Year ended 31 March 2025

The following pages do not form part of the financial statements.

Healthwatch North Yorkshire

Detailed Statement of Financial Activities

Year ended 31 March 2025

	2025 £	2024 £
Income and endowments		
Donations and legacies		
NYCC service grant	180,000	168,793
Other grants	<u>82,636</u>	<u>20,375</u>
	<u>262,636</u>	<u>189,168</u>
Charitable activities		
Other commissioned work	-	2,857
Other work	-	<u>3,385</u>
	<u>-</u>	<u>6,242</u>
Investment income		
Bank interest receivable	<u>2,260</u>	<u>1,421</u>
Total income	<u>264,896</u>	<u>196,831</u>
Expenditure		
Expenditure on charitable activities		
Wages/salaries inc. fees	179,276	182,392
Staff training and welfare	2,869	6,211
Subs & publications	1,951	782
Engagement budget	8,045	6,834
Sundry expenses	-	31
Insurance	1,737	1,679
Staff travel and expenses	3,554	6,251
Repairs and IT costs	6,716	6,432
Volunteer travel expenses	590	276
Legal, professional and consultancy fees	1,010	1,134
Trustees expenses	414	610
Office rent, broadband and phone	18,823	18,776
Depreciation	711	711
Bank charges	60	60
Printing, stationery and postage	1,295	831
Marketing and publicity	3,351	3,646
Room hire and hospitality	451	954
	<u>230,853</u>	<u>237,610</u>
Total expenditure	<u>230,853</u>	<u>237,610</u>
Net income/(expenditure)	<u>34,043</u>	<u>(40,779)</u>

Healthwatch North Yorkshire

Notes to the Detailed Statement of Financial Activities

Year ended 31 March 2025

	2025 £	2024 £
Expenditure on charitable activities		
<i>Activities undertaken directly</i>		
Wages/salaries inc fees	179,276	182,392
Staff training and welfare	2,869	6,211
Subs & publications	1,951	782
Engagement budget	8,045	6,834
Sundry expenses	—	31
Insurance	1,737	1,679
Staff travel and expenses	3,554	6,251
Repairs and IT costs	6,716	6,432
Volunteer travel expenses	590	276
Legal, professional and consultancy fees	1,010	1,134
Trustees expenses	414	610
Office rent, broadband and phone	18,823	18,776
Depreciation	711	711
Bank charges	60	60
Printing, stationery and postage	1,295	831
Marketing and publicity	3,351	3,646
Room hire and hospitality	451	954
	<u>230,853</u>	<u>237,610</u>
Expenditure on charitable activities	<u>230,853</u>	<u>237,610</u>

HEALTHWATCH NORTH YORKSHIRE

England & Wales - Charity number 1171152

Accounts

The value of listening

Healthwatch North Yorkshire
Annual report 2023-2024



Contents

Message from our CEO	3
About us	4
Year in review	5
Our digital reach	6
How we've made a difference this year	7
Your voice heard at a wider level	8
Listening to experiences	10
Three ways we've made a difference	12
Hearing from all communities	14
Advice and information	18
Volunteering	20
Finance and future priorities	22
Statutory statements	25
The way we work	26
Visits to care homes	28
Public feedback reports	32

Message from our CEO, Ashley Green

Over the last decade, Healthwatch North Yorkshire has empowered thousands of people to share their personal experiences of care.

In sharing those experiences, members of the public have demonstrated the power they have to show what is and isn't working about our health and social care system. They have been pivotal not only in identifying the issues, but in highlighting how to make real and lasting change.

The last year has been another busy time for us – our staff, trustees, and volunteers – who all deserve special praise for their commitment and hard work to ensure that through listening to the public we help bring about better care for people.

It's been rewarding to see improvements in services and care due to actions taken by NHS commissioners, providers, and North Yorkshire Council based on our report recommendations. For example, enhanced independence through accessible health information, quick support for mental health issues at GP practices, and improved continence support. I thank those in health and social care (NHS and North Yorkshire Council), community organisations and volunteers for their valuable work.

We look forward to continuing our work which we set out in our ambitious [three-year plan](#) (2023–2026) to make sure people have a say about their care. I hope you find our annual report informative and useful, and I welcome the opportunity to work with you over the next year.



“We’re here to represent the views of the public and their loved ones and improve care and services across North Yorkshire.”

Ashley Green, Chief Executive Officer,
Healthwatch North Yorkshire



About us

Healthwatch North Yorkshire is your local health and social care champion.

We make sure health and care leaders and decision-makers hear your voice and use your feedback to improve care. We can also help you to find reliable and trustworthy information and advice.

Our vision

A world where we can all get the health and care we need



Our mission

To make sure people's experiences help make health and care better



Our values are:

- **Listening** to people and making sure their voices are heard
- **Including** everyone in the conversation – especially those who don't always have their voice heard
- **Analysing** different people's experiences to learn how to improve care
- **Acting** on feedback and driving change
- **Partnering** with care providers, Government, and the voluntary sector – serving as the public's independent advocate



Year in review

2023-2024

Reaching out:

3,626 people reached

People we spoke with and raised awareness about who Healthwatch are and how we can help

2,468 gave feedback

Spoke to us through our website, events, phone and surveys about health and social care issues



Making a difference to care:

We published

22 reports

about the improvements people would like to see in health and social care services

Our most popular report was

Continence care

which [highlighted the stigma over talking openly and the struggles people face accessing the support they need](#)



Health and social care that works for you:

We're lucky to have **35** outstanding volunteers who gave up their time to make care better for our community

We're funded by North Yorkshire Council

In 2023 - 24 we received **£168,792** which is **0.6% more** than the previous year.

We currently employ

5 staff

who help us with our work



Our digital reach

2023-2024

Website

35,260 webpage views

People accessed news about local health and social care services plus our advice and information articles

19,457 visits to our website



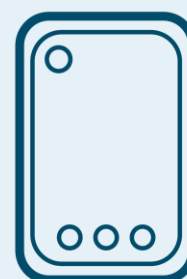
Social media

We reached more people this year than ever to tell them about Healthwatch and how we can help

152,800 people reached on Facebook

+ 258,492 additional through adverts

3,900 people reached on Instagram



Email newsletter





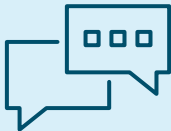

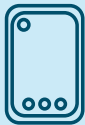

We sent out **15** newsletters about our local and national work as a people's champion

Our newsletters were opened a total of **4,718** times

Our most popular newsletter covered people's experiences of mental health services



How we have made a difference nationally

Spring	 <p>We drew attention to the “hidden waiting list” created by delays to GP referrals</p>	 <p>We took steps to get people the support they needed while waiting for planned care</p>
Summer	 <p>We highlighted the increasing issues people have getting mental health support, contributing to the release of a primary care recovery plan</p>	 <p>We called on the NHS to review and update the Accessible Information Standard to make sure everyone gets the care they need</p>
Autumn	 <p>Our “Because we all care” campaign encouraged more people to share their experiences, helping us improve care further</p>	 <p>We revisited the issue of maternal mental health, leading to updated guidance for GPs on six-week postnatal checks</p>
Winter	 <p>The NHS ran a campaign around the NHS app and how it can help patients after we highlighted the need to increase confidence in the NHS</p>	 <p>We highlighted the impact of the soaring cost of living on healthcare</p>

Your voice heard at a wider level

North Yorkshire

We work with other local Healthwatch to ensure the experiences of over 615,000 people living in North Yorkshire influence decisions made about services within the NHS and social care.

Hearing what matters to young people



Across Humber and North Yorkshire, we have been recruiting young **community connector** volunteers to listen to other young people's views.

We have also launched a survey, focusing on hearing experiences relating asthma, diabetes, epilepsy, oral health and mental health. This is part of helping NHS England make improvements to services, particularly in coastal areas. We have partnered with Coast and Vale Community Action to help us deliver this work across Scarborough.



Making sure people feel equal

Local Healthwatch attended a workshop to help NHS organisations in Humber and North Yorkshire improve performance for people receiving care who have protected characteristics.

What are protected characteristics? The Equality Act 2010 sets out age, disability, gender reassignment, marriage and civil partnership, race, religion or belief, sex, and sexual orientation.

Our role was to assess and score evidence to influence fair treatment and equal care for all. This is part of an ongoing review by the local NHS, and we will be holding them to account to make sure this happens.

Your voice heard at a wider level

Craven

We work with other local Healthwatch to ensure the experiences of over 50,000 people in Craven (covered by NHS services in West Yorkshire) influence decisions made about services within the NHS and social care.



People's experiences of end-of-life care

We heard from 143 people who shared their and their loved one's experiences of receiving end-of-life care, to ensure we reached people who don't always feel heard.

From these experiences we produced a comprehensive report which highlighted a need, for example of a more person-centred approach and systems needing to be built for diversity and understanding people's different and individual needs. The experiences captured in the report will feed into the local NHS's work to assess people's needs and ensure the right care.



"Life on hold" – Neurodiversity report

Healthwatch and the West Yorkshire Voice created a report on neurodivergent people's healthcare experiences.

Most people said they feel like their lives are on hold while waiting for an assessment, diagnosis or support. Feedback from people with autism or attention deficit hyperactivity disorder has informed discussions with the NHS and we have agreed to continue to hear feedback from people who don't always feel a part of a conversation or having a say on their care.



Listening to experiences

Services can't make improvements without hearing your views. That's why, over the last year, we have made listening to feedback from all areas of the community a priority. This allows us to understand the full picture, and feed this back to those people and organisations responsible for providing and commissioning care.

Getting people talking about continence

We published findings of the experiences the public shared with us about trying to access good continence care and how it was for them. Thanks to this insight, the NHS are working to simplify this process so people can better understand what to expect.

You shared worrying experiences with us that not enough people are talking. And more needs to happen to make sure continence is flagged at the earliest opportunity and pathways to diagnosis and treatment are as smooth as possible.

14 million people affected

by bladder and bowel health in the UK



What people told us about continence care

- Incontinence affects people of all ages and genders.
- There is a taboo around discussing it seriously, leading to embarrassment and jokes.
- Access to quality incontinence products varies.
- Public facilities often lack suitable toilets for all genders.
- The impact on mental health is often overlooked in care services.

What difference did your views and our report make?

- [York and Scarborough Teaching Hospitals NHS Foundation Trust](#) have introduced a tool for continence screening within 72 hours of a patient being admitted to hospital. It quickly determines the person's continence related needs.
- [Harrogate and District NHS Foundation Trust](#) have updated their website to contain information on how people can access continence services including self-referral. They also provide health promotion leaflets which people can access (including a contact phone number and the names of key staff involved in the specialist continence service).
- [North Yorkshire Council](#) will review the option for including continence poverty into their work for improving public health.

Making mental health services better for you

With one in four people in England experiencing a mental health condition, people in North Yorkshire feel more needs to be done. We undertook a major engagement project across North Yorkshire to hear from people and to understand the challenges they faced in using and accessing mental health support.

How are our people feeling?

- People felt that services didn't always cater to individual needs and that a more person-centred approach was required.
- People felt that they had more complex lives with multiple issues affecting their mental health, from housing and finances to relationships and education.
- People were feeling passed between services and that this was causing more harm than good.
- People were ending up on multiple waiting lists and having to repeat their story to several different people, which was causing additional stress and anxiety.

Your feedback is helping make things change:

- New first contact mental health practitioners have been recruited across North Yorkshire, with plans to hire more throughout 2024 and 2025. These practitioners serve as the initial point of contact for mental health assessments.
- Community mental health groups in Harrogate, Scarborough, Selby Vale, and Hambleton and Richmondshire have used our report recommendations to plan their work and budget allocations.
- Pilot projects have been launched to support individuals with severe mental illnesses, including a link worker programme and an allotment-based project to boost confidence.
- Specialist roles for adult eating disorders and complex emotional needs have been introduced for early intervention access.
- Mental health hubs will be established in North Yorkshire to provide support to people.
- Tees Esk and Wear Valley NHS Foundation Trust, who provide mental health services across the county, is expanding services for individuals with eating disorders. This includes new early intervention roles and working with Beat to provide support and training.

Three ways we have made a difference in the community

Throughout our work we gather information about health inequalities by speaking to people whose experiences aren't often heard.

Acting on what older people have told us

We have undertaken visits to care homes to ensure that those people who don't always have a voice are heard.

Our visits and reports have led care homes to implement new initiatives supporting more residents in physical activities, social events, and interaction. They have reassessed staffing levels to meet residents' needs and have prioritised updating and discussing care plans with family and carers.



Getting services to involve the public

Services need to understand the benefits of involving local people to help improve care for everyone.

We worked with Medequip, who supply equipment and aids to help people live more independently at home and after coming out of hospital. They have committed to improving communication and delivery timescales, improve staff training, and ensure that the equipment provided meets the needs of the user.



Improving GP websites over time

Change takes time. We work with services to consistently raise issues and call for improvements to be made.

Our volunteers conducted a check-up of GP websites to assess how the patient journey is when navigating and using the websites. As a result, many GP practices have already made their websites more accessible, easier to use and navigate.





Hearing from all communities

Over the past year, we have worked hard to make sure we hear from everyone within our local area. We consider it important to reach out to the communities we hear from less frequently to gather their feedback and make sure their voice is heard, and services meet their needs.

This year we have reached different communities by:

- Getting people to share their experiences to make more people aware of why it's important to give feedback about their experiences of using health and social care services.
- Spoke with people across rural areas to hear why they're struggling to access the care they need, including veterans and people living with neurodiversity.
- We heard from older people and those living with dementia as part of our visits at care and nursing homes, hearing about experiences and how things can be improved.

Supporting a healthier Selby

Thanks to local feedback, those responsible for improving health and well-being in Selby Vale, are setting out priorities around reducing health inequalities; focussing on mental health, frailty and ageing well.

Healthwatch North Yorkshire and Up for Yorkshire heard how people felt about good health, their experiences of keeping themselves healthy, and their interactions with healthcare providers.

Your feedback has helped

- More funding and support for those experiencing health inequalities to participate in physical activity locally.
- Our findings also contributed to the insight gathering for a new plan (North Yorkshire Joint Health & Wellbeing) from 2023 to 2030.

Creating person-centred care in Scarborough, Selby and Malton

NHS services have taken steps to make care better for those patients who are most in need after work by local Healthwatch to listen.

There are ongoing challenges in urgent and emergency care services, including ambulance delays, long waits in A&E, and a significant number of postponed operations and appointments in England. This is compounded by limited GP access, inconsistent care, travel difficulties, confusion about urgent care options, and communication issues.

This situation is reinforced by a national picture of 819,000 operations, procedures and appointments in England having been postponed over the last year, adding to the 7.5 million people nationally waiting to start routine hospital treatment.

You said, we did

Local hospitals and GPs in York, Scarborough, Malton, Whitby, and Selby are working together to improve healthcare services. A new GP out of hours contract has been agreed and York Hospital will now run urgent treatment centers across York & North Yorkshire. They now share a health record system to improve communication and cooperation. This service has been in operation since April 2024.

Breaking down the barrier of rurality

It's essential that care is not only available, but that people can access it



With a population of over 615,000 spread across a vast area, with only eight towns having more than 10,000 residents, this presents challenges for residents in terms of accessing services, dealing with isolation, and transportation.

Public research conducted by us and York St John University examined how rurality impacted people's access to health and social care.

How your views are changing things

Rurality is being brought to the forefront of NHS and North Yorkshire Council's plans to make things better.

- The local NHS in Harrogate & district is working to reducing rural health inequalities, including reducing long waiting times in rural locations, with a particular focus on dementia patients.
- In Hambleton and Richmond, the NHS is trialling a project to group hospital appointments by postcodes, piloting clinics in village halls, allowing self-referrals, and improving coordination between NHS and community organisations.

Making information accessible to all

Over the last year we have continued to champion the views of those people who often struggle to access, understand and receive their health and social care information in a way that meets their needs.

The Accessible Information Standard is a law to make sure people who have a disability, impairment or sensory loss are given information they can easily read or understand. We have highlighted the daily challenges for those with communication needs to get the accessible healthcare information they're entitled to. This has led to improved rights and, crucially, more people being able to exercise those rights and get the support and information they need.

We have asked that:

- Services are held accountable for fully delivering the standard.
- Every health and care service has an accessibility champion appointed to lead their service's accessible policy and delivery.
- Better technology and systems are available so patients can update services with their communication needs.
- People with communication needs are involved and can regularly give feedback on their experiences to ensure continuous improvement.
- Training is made mandatory for all health and care staff.

People feel communication in the NHS is slow, inefficient, and lacks empathy. The NHS needs to prioritise quicker access and better customer service for booking appointments and answering questions.

How your views are changing things

- The NHS in Harrogate have produced an easy-read format for their friends and family test and feedback forms for patients, carers, children and young people.
- The NHS in York and Scarborough produce letters for patients using a system called Synertec in a person's preferred format automatically. The system automatically creates large print, Easy Read and other versions based on a person's need.
- The NHS in South Tees now provide hospital passports for patients, their families and carers to improve patient information.



Advice and information

If you feel lost and don't know where to turn, Healthwatch is here for you. In times of worry or stress, we can provide confidential support and free information to help you understand your options and get the help you need. Whether it's finding an NHS dentist or making a complaint – you can count on us.

This year we've helped people by:

- Providing up-to-date health & care information that people can trust
- Helping people access the services they need, such as community transport
- Supporting people to access NHS dentistry
- Supporting people to look after their health during the continued cost-of-living crisis

Making NHS dentistry better and fairer



A new recovery plan has been created to ensure that people have clear, accurate communication about their care – and get to see a dentist.

The NHS and the Government published a plan in February 2024 to improve (recover) NHS dentistry, setting out a new focus on prevention and good oral health in young children, and an expansion of the dental workforce.

Evidence from across North Yorkshire tells us that people on low incomes, children and women, have particularly found it difficult to get an NHS dental appointment. But your feedback is helping to change things.

The power of your feedback so far

- £50 million extra funding from NHS England to support dentistry.
- NHS dental practices were asked to complete a survey from NHS England to make the case for new dental services by providing up-to-date information on unmet patient needs and workforce capacity.
- NHS dentists will be given a 'new patient' payment of between £15–£50 (depending on treatment need) to treat around a million new patients nationally who have not seen an NHS dentist in two years or more.
- A new 'Smile For Life' programme will be rolled out across England to offer parents and parents-to-be advice for baby gums and milk teeth, with the aim that by the time children go to school, every child will see tooth brushing as a normal part of their day.
- Dental vans will help deliver dental treatment to people in rural and coastal areas, including North Yorkshire.
- New NHS dental practices have been opened in Scarborough, Whitby, Helmsley and Thirsk.



Volunteering

We're supported by a team of amazing volunteers who are at the heart of what we do. Thanks to their efforts in the community, we're able to understand what is working and what needs improving.

This year our volunteers:

- Reviewed GP websites, looking at how easy to use, up-to-date and accessible they were to help see improvements made across all GP practice websites in North Yorkshire.
- Supported our project on mothers' experiences of community postnatal care, mapping out mum and baby groups across North Yorkshire and looking at what literature is available and where the gaps are.
- Carried out visits to care and nursing homes to hear about people's experiences as part of our enter & view visits.
- Introduced more people to Healthwatch, and listened to experiences and suggestions for change so providers can act on them.



"I wanted to volunteer for an organisation that gave me new experiences. The Healthwatch North Yorkshire team give me the ability to complete tasks that give me a connection to the community and a sense of purpose. I now understand the unique issues locally.

I enjoy helping people and making a difference. The health and social care sector is so important for everyone, and I appreciate the opportunities that Healthwatch has given me to listen to diverse communities and promote local voices and opinions to try and make care better."



Sally
Healthwatch
volunteer



"My colleague suggested I volunteer as she felt I had something to offer. Over 20 years I had undertaken several health and social care related projects. I felt volunteering would be an exciting thing to do with my knowledge and skills.

"It has allowed me to still feel involved in the health and social care sector, but from the other side of the fence. I've had to look at issues as a person accessing services rather than someone who delivers services. It's been a steep learning curve, but it's been one that I have enjoyed and found fulfilling."



Lesley
Healthwatch
volunteer

Do you feel inspired?



We are always on the lookout for new volunteers, so please get in touch today.

🌐 www.HealthwatchNorthYorkshire.co.uk/Volunteer

📞 01423 788 128

✉️ Hello@HWNy.co.uk

WE'VE SHARED OUR VIEWS!

Talk to us...



Finance and future priorities

To help us carry out our work we receive funding from North Yorkshire Council (our local authority) under the Health and Social Care Act 2012.

Our income and expenditure reflects a planned spend from our reserves of £43,189.

Income		Expenditure	
Annual grant from Government	£168,793	Expenditure on pay	£182,391
Additional income	£26,617	Non-pay expenditure	£38,934
		Office and management fees	£17,274
Total income	£19,5410	Total expenditure	£238,599

Additional funding

What we received

Who funded us and the purpose of it	Amount
Healthwatch England For organising and hosting a Healthwatch Yorkshire and Humber event	£2,800
West Yorkshire Health and Care Partnership (an integrated care system) For continued work to listen to experiences and ensure the public's voice is heard at meetings with the NHS	£5,000
West Yorkshire Health and Care Partnership For end-of-life care project work (a report of experiences and recommendations)	£650
Humber and North Yorkshire Health and Care Partnership Work on recruiting volunteer community connectors to listen to young people's experiences of healthcare	£12,500
York Health and Care Alliance Hearing people's experiences of urgent treatment centres to help providers make improvements	£2,450
Medequip For listening to local people's experiences of the equipment and aids service to help them improve their service for people living more independently at home and after returning from hospital	£2,900

Next steps: Our future priorities



Over the next year, we will keep reaching out to every part of society, especially people in the most deprived areas, so that those in power hear their views and experiences.

We will listen and learn from patients and the public to make care better.

- We will complete our review of community and at home postnatal care for mothers after birth, exploring the availability and quality, with a specific focus on understanding mothers' experiences.
- We will work with the farming community to hear what health and wellbeing issues affect them, what the barriers are for accessing health services and explore what would facilitate them to seek help sooner.
- We will expand our reach and awareness, so more people know about us via digital communication and through the expansion and development of our volunteer network.
- We will continue our visits to care homes across the county to ensure some of the most vulnerable people are heard and their feedback and experiences are acted upon.



"Local Healthwatch have shown what happens when people speak up about their care, and services listen. They are helping the NHS unlock the power of people's views and experiences, especially those facing the most serious health inequalities."

Louise Ansari, Healthwatch England





Statutory statements

Healthwatch North Yorkshire, 55 Grove Road, Harrogate, HG1 5EP

Healthwatch North Yorkshire uses the Healthwatch Trademark when undertaking our statutory activities as covered by the licence agreement.

The way we work

Involvement in our governance and decision-making

Our Healthwatch board of trustees consists of eight members who work on a voluntary basis to provide direction, oversight and scrutiny of our activities. They ensure that decisions about priority areas of work reflect the concerns and interests of our diverse local community.

Throughout 2023/24, they met six times and made decisions on matters such as staff and trustee recruitment, policy and finance review, and procurement for our current Healthwatch contract.

We ensure wider public involvement in deciding our work priorities.



How we heard people's experiences

We use a wide range of approaches to ensure that as many people as possible can provide us with insight into their experience of using services. During 2023/24, we have been available by phone, and email, provided a web form on our website and through social media, as well as attending meetings of community groups and forums.

We ensure that this report is made available to as many members of the public and managers in the NHS and North Yorkshire Council as possible. We will publish it on our website, share it via our monthly newsletter, promote it via social media, have printed copies available for people and share the report with volunteers and community organisations.

The way we work

Responses to recommendations

We have worked with health and social care providers to ensure our reports are acknowledged and acted on. Despite challenges due to the complexity of the system (with multiple health providers and two integrated care systems), we have received responses from most of our providers and commissioners. Any outstanding responses, such as from NHS hospital trusts or integrated care systems, have been escalated.

The only report without a response (from the NHS or North Yorkshire Council) is our Rural Health Inequalities report from October 2023. No issues were escalated to Healthwatch England Committee, resulting in no additional reviews or investigations.



Taking people's experiences to decision-makers

We ensure that people who can make decisions about services hear about the insights and experiences that have been shared with us. For example, we share a monthly insight register of public feedback with organisations such as North Yorkshire Council, acute & mental health NHS services, primary care, Care Quality Commission. This is alongside sharing Healthwatch reports.

We also take insight and experiences to decision-makers at integrated care systems ([Humber and North Yorkshire Health and Care Partnership](#) and [West Yorkshire Health and Care Partnership](#) (Includes Craven)). We also share our data with Healthwatch England to help address health and care issues at a national level.



Visits to care homes

We have a legal power to visit hospitals and care homes and see them in action. This is called 'enter and view'.

It offers a way for us to meet some of our statutory functions and to identify what is working well with services and where they could be made better.

What Healthwatch do:

- Visit and gather views of the residents and patients, their relatives and the experiences of the services provided.
- Observe the ongoing care being provided for the residents and their interaction with staff and their surroundings.
- We ask for a response from to our recommendations with actions that are being taken, or are planned to be and when these will take place.

Location	Example of recommendation and action taken
<p>Scorton Care Village</p>	<p>Recommendation: Update the decoration in Elizabeth House and include dementia friendly elements, including colour contrast on toilet seats, switches, and rails.</p> <p>Actions taken to date:</p> <ul style="list-style-type: none"> Elizabeth House has an action plan in place to improve the decoration and dementia elements, this includes creating five new bedrooms, a laundry section, staff/training room, administration office, maintenance section.
<p>Hambleton Grange Care Home</p>	<p>Recommendation: Encourage agency staff to wear name badges to help the residents interact with them.</p> <p>Actions taken to date:</p> <ul style="list-style-type: none"> The home has introduced name badges for all agency staff. Additionally, recruitment and reliance on agency staff has reduced.
<p>Scarborough Hall Care Home</p>	<p>Recommendation: Review mealtime protocols and staffing levels to ensure sufficient staff are available in the dining room throughout the meal rooms.</p> <p>Actions taken to-date:</p> <ul style="list-style-type: none"> Staff rotas have been reviewed at lunchtime to ensure no staff have dinner breaks during resident mealtimes, as well as host staff being available to help during mealtimes.



Location	Example of recommendation and action taken
<p>Rosedale Nursing Home</p>	<p>Recommendation: Review the staff well-being support policy to ensure that appropriate and relevant support is offered to the team and some concerns about workload addressed.</p> <p>Actions taken to date:</p> <ul style="list-style-type: none"> • The home has reviewed this policy and has put in place a huge range of rewards and support for employees. • The rewards manager is planning to visit the home to explain all the rewards on offer.
<p>Saint Cecilia's Nursing Home</p>	<p>Recommendation: Evaluate staffing levels on weekends, holidays, and during shift handovers to ensure consistent care.</p> <p>Actions taken to date:</p> <ul style="list-style-type: none"> • This was assigned to the manager and clinical lead who now reviews the staffing dependency tool every Friday.

Location	Example of recommendation & action taken
<p>The Mill House</p>	<p>Recommendation: Enhance room signage for better recognition and accessibility. Consider adding local-themed decorations to connect residents to their surroundings.</p> <p>Actions taken to date:</p> <ul style="list-style-type: none"> • They have memory boxes next to each bedroom door to hold items such as photographs that mean something to the resident to help them identify their room.. There is a name plaque on each door, but the residents respond better to the memory boxes and room numbers to help them find their rooms. • If a resident needs a larger sign on their door, then this is something that they put in place for them.
<p>Mount Vale Care Home</p>	<p>Recommendation: Ensure that activities are accessible to all residents with an interest in participation and look for opportunities for one-to-one interaction for those unable or unwilling to participate in group activities.</p> <p>Actions taken to date</p> <ul style="list-style-type: none"> • Work closely with the provider of 'Oomph' which was created to bring personalised wellbeing to every care home resident, partnering with experts in areas including dementia, mental health and arthritis. Oomph has a specialist range of content and activities, such as Zoo Lab, Instructor Live and Arthritis Action, Archery UK, amongst others. • Upon admission, individuals provide their life history and communicate with their next of kin / family and friends to incorporate their past into their hobbies. Care plans are personalised to reflect individuals' needs and capabilities for tailored activities.

Healthwatch helping you to be heard

Healthwatch North Yorkshire is represented on the North Yorkshire Council Health and Wellbeing Board by Ashley Green, Chief Executive Officer.

Ashley also meets with the [Humber and North Yorkshire Health and Care Partnership](#) and [West Yorkshire Health and Care Partnership](#) to bring the people's experiences and recommendations for change to the decision-makers to act on it.

2023 – 2024 reports

Report
Enter and View – Scorton Care Village
Being healthy: Ideas and reflections from Selby
Enter and View – Hambleton Grange Care Home
Enter and View – Scarborough Hall Care Home
Why it's time to talk about continence
Public's experiences of mental health services
Healthwatch shares insight into experiences of mental health support (Craven and West Yorkshire)
Insight into the public's health and care views
Enter and View – Rosedale Nursing Home
Why people living in our rural areas are struggling to access care
Enter and View – Saint Cecillia's Nursing Home

Report

What are people's experiences of urgent care?

GP websites health check

Making aids and equipment services work better for people

Focus on winter – your experiences of health and care (West Yorkshire and Craven)

Insight into your health and care views

People's experiences of end-of-life care (West Yorkshire and Craven)

"Life on hold" – Neurodivergent people and healthcare experiences (West Yorkshire and Craven)

Hospital care (West Yorkshire and Craven)




healthwatch

North Yorkshire

Healthwatch North Yorkshire
55 Grove Road
Harrogate
HG1 5EP

 www.HealthwatchNorthYorkshire.co.uk

 01423 788 128

 hello@hwny.co.uk



CHARITY REGISTRATION NUMBER: 1171152

Healthwatch North Yorkshire
Unaudited Financial Statements
31 March 2024

Healthwatch North Yorkshire

Financial Statements

Year ended 31 March 2024

	Page
Trustees' annual report	1
Independent examiner's report to the trustees	5
Statement of financial activities	6
Statement of financial position	7
Notes to the financial statements	8
The following pages do not form part of the financial statements	
Detailed statement of financial activities	16
Notes to the detailed statement of financial activities	17

Healthwatch North Yorkshire

Trustees' Annual Report

Year ended 31 March 2024

The trustees present their report and the unaudited financial statements of the charity for the year ended 31 March 2024.

Reference and administrative details

Registered charity name Healthwatch North Yorkshire

Charity registration number 1171152

Principal office
55 Grove Road
Harrogate
North Yorkshire
HG1 5EP

The trustees

P Southgate
J Cunningham
L Parker
K Hodgson
A Cram
A Wood

(Appointed 1 April 2023)
(Appointed 1 April 2023)

Independent examiner

Mr R I Crisop FCA
Unit 1, Borough House Business Centre,
5 Borough Road, Richmond,
North Yorkshire
DL10 4SX

Structure, governance and management

The charity is a Charitable Incorporated Organisation (CIO) registered with the Charity Commission on 17th January 2017. The charity is managed by the board of trustees. Trustees are appointed for a term of 3 years.

New trustees receive an induction and briefing on their legal obligations under charitable law and the content of the constitution as well as management committee papers to familiarise themselves with their role and responsibilities.

Funding is provided through a grant from North Yorkshire County Council and external earned income for time limited projects.

Healthwatch North Yorkshire

Trustees' Annual Report *(continued)*

Year ended 31 March 2024

Objectives and activities

The objects of the charity are:

- Gather the views and understand the experiences of people who use health and care services, carers and the wider community.
- Make people's views known, promoting and supporting the involvement of people in the commissioning and provision of local care services and how they are scrutinised.
- Provide advice and information (signposting) to the public about access to services and support to enable people to make informed choices.

Trustees have considered the Charity Commission's guidance on public benefits and believe that Healthwatch North Yorkshire meets the public benefit requirements in delivering the activities that contribute to the objects of the charity. The achievements are set out below in summary on how we delivered our charitable objects and who the beneficiaries are.

Healthwatch North Yorkshire

Trustees' Annual Report *(continued)*

Year ended 31 March 2024

Achievements and performance

- We reached over 3,600 people across the year as part of our research projects, talking to people at awareness events, outdoor stalls, and through our volunteer network. Alongside this almost 2,500 people shared their feedback with us about using and accessing health and social care in North Yorkshire. This was via our website, phone calls, email enquiries, and surveys.
- We published 22 reports which featured people's insight into their use and experiences of accessing health and social care. This included our own reports, on for example rurality, continence services, GP websites and mental health, alongside joint reports with our local Healthwatch colleagues in West Yorkshire. Here we produced a number of reports, on for example hospital care, primary care, neurodiversity, and mental health services. Additionally, we produced reports on care homes as part of our enter & view programme.
- Over 19,000 people visited our website for information and resources, including information on local health and care services. We reached over 400,000 people via social media, including Facebook, Instagram, and through targeted social media campaigns.
- We have focused on hearing from people facing the greatest health inequalities which have included people living in rural North Yorkshire, older people, for example those people living with dementia as part of our care home visits. Younger people, where we have prioritised those living in coastal areas to understand the issues facing them when using and accessing care. People living with a mental health condition, as well as those living with autism and attention deficit hyperactivity disorder (ADHD).
- We have worked collaboratively with our NHS, council, integrated care system, and voluntary community sector partners across the year to ensure public feedback was used to influence improvements in care and services. This has included our involvement in the All-Age Autism strategy and North Yorkshire Joint Health Wellbeing strategy (2023-2030). Attendance at the North Yorkshire Health & Wellbeing Board, North Yorkshire Adult Safeguarding Board, Humber & North Yorkshire Quality Committee, and York & North Yorkshire Quality Group.
- As a result of our work and reports we have seen improvements in care and service across the system, including in mental health with new mental health practitioners in GP practices providing care for people, improvements in accessible information to support people with additional needs, a renewed focus on directing care for people living rurally to ensure they can access services, and additional support for people with their end of life care needs.

Financial review

The trustees are satisfied with the financial performance of the Trust for the year ended 31 March 2024.

Healthwatch North Yorkshire

Trustees' Annual Report *(continued)*

Year ended 31 March 2024

The trustees' annual report was approved on 14 October 2024 and signed on behalf of the board of trustees by:



P Southgate
Trustee



A Cram
Trustee

Healthwatch North Yorkshire

Independent Examiner's Report to the Trustees of Healthwatch North Yorkshire

Year ended 31 March 2024

I report to the trustees on my examination of the financial statements of Healthwatch North Yorkshire ('the charity') for the year ended 31 March 2024.

Responsibilities and basis of report

As the trustees of the charity you are responsible for the preparation of the financial statements in accordance with the requirements of the Charities Act 2011 ('the Act').

I report in respect of my examination of the charity's financial statements carried out under section 145 of the 2011 Act and in carrying out my examination I have followed all the applicable Directions given by the Charity Commission under section 145(5)(b) of the Act.

Independent examiner's statement

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

1. accounting records were not kept in respect of the charity as required by section 130 of the Act; or
2. the financial statements do not accord with those records; or
3. the financial statements do not comply with the applicable requirements concerning the form and content of accounts set out in the Charities (Accounts and Reports) Regulations 2008 other than any requirement that the accounts give a 'true and fair' view which is not a matter considered as part of an independent examination.

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

Mr R I Crisop FCA
Independent Examiner

Unit 1, Borough House Business Centre,
5 Borough Road, Richmond,
North Yorkshire
DL10 4SX

14 October 2024

Healthwatch North Yorkshire

Statement of Financial Activities

Year ended 31 March 2024

		2024	2023
	Note	Unrestricted funds £	Total funds £
Income and endowments			
Donations and legacies	4	189,168	237,208
Charitable activities	5	6,242	–
Investment income	6	1,421	212
Total income		<u>196,831</u>	<u>237,420</u>
Expenditure			
Expenditure on charitable activities	7, 8	237,610	252,307
Total expenditure		<u>237,610</u>	<u>252,307</u>
Net expenditure and net movement in funds		<u>(40,779)</u>	<u>(14,887)</u>
Reconciliation of funds			
Total funds brought forward		140,141	155,028
Total funds carried forward		<u>99,362</u>	<u>140,141</u>

The statement of financial activities includes all gains and losses recognised in the year.
All income and expenditure derive from continuing activities.

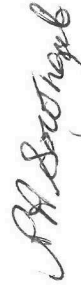
Healthwatch North Yorkshire

Statement of Financial Position

31 March 2024

	Note	2024 £	2023 £
Fixed assets			
Tangible fixed assets	13	1,395	363
Current assets			
Debtors	14	15,288	15,000
Cash at bank and in hand		<u>83,340</u>	<u>125,414</u>
		<u>98,628</u>	<u>140,414</u>
Creditors: amounts falling due within one year	15	<u>661</u>	<u>636</u>
Net current assets		<u>97,967</u>	<u>139,778</u>
Total assets less current liabilities		<u>99,362</u>	<u>140,141</u>
Net assets		<u>99,362</u>	<u>140,141</u>
Funds of the charity			
Unrestricted funds		<u>99,362</u>	<u>140,141</u>
Total charity funds	16	<u>99,362</u>	<u>140,141</u>

These financial statements were approved by the board of trustees and authorised for issue on 14 October 2024, and are signed on behalf of the board by:



P Southgate
Trustee



A Cram
Trustee

Healthwatch North Yorkshire

Notes to the Financial Statements

Year ended 31 March 2024

1. General information

The charity is a public benefit entity and a registered charity in England and Wales and is unincorporated. The address of the principal office is 55 Grove Road, Harrogate, North Yorkshire, HG1 5EP.

2. Statement of compliance

These financial statements have been prepared in compliance with FRS 102, 'The Financial Reporting Standard applicable in the UK and the Republic of Ireland', the 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) (Charities SORP (FRS 102)) and the Charities Act 2011.

3. Accounting policies

Basis of preparation

The financial statements have been prepared on the historical cost basis, as modified by the revaluation of certain financial assets and liabilities and investment properties measured at fair value through income or expenditure.

The financial statements are prepared in sterling, which is the functional currency of the entity.

Going concern

There are no material uncertainties about the charity's ability to continue.

Judgements and key sources of estimation uncertainty

The preparation of the financial statements requires management to make judgements, estimates and assumptions that affect the amounts reported. These estimates and judgements are continually reviewed and are based on experience and other factors, including expectations of future events that are believed to be reasonable under the circumstances.

Fund accounting

Unrestricted funds are available for use at the discretion of the trustees to further any of the charity's purposes.

Designated funds are unrestricted funds earmarked by the trustees for particular future project or commitment.

Restricted funds are subjected to restrictions on their expenditure declared by the trustees.

Healthwatch North Yorkshire

Notes to the Financial Statements *(continued)*

Year ended 31 March 2024

3. Accounting policies *(continued)*

Incoming resources

All incoming resources are included in the statement of financial activities when entitlement has passed to the charity; it is probable that the economic benefits associated with the transaction will flow to the charity and the amount can be reliably measured. The following specific policies are applied to particular categories of income:

- income from donations or grants is recognised when there is evidence of entitlement to the gift, receipt is probable and its amount can be measured reliably.
- legacy income is recognised when receipt is probable and entitlement is established.
- income from donated goods is measured at the fair value of the goods unless this is impractical to measure reliably, in which case the value is derived from the cost to the donor or the estimated resale value. Donated facilities and services are recognised in the accounts when received if the value can be reliably measured. No amounts are included for the contribution of general volunteers.
- income from contracts for the supply of services is recognised with the delivery of the contracted service. This is classified as unrestricted funds unless there is a contractual requirement for it to be spent on a particular purpose and returned if unspent, in which case it may be regarded as restricted.

Resources expended

Expenditure is recognised on an accruals basis as a liability is incurred. Expenditure includes any VAT which cannot be fully recovered, and is classified under headings of the statement of financial activities to which it relates:

- expenditure on raising funds includes the costs of all fundraising activities, events, non-charitable trading activities, and the sale of donated goods.
- expenditure on charitable activities includes all costs incurred by a charity in undertaking activities that further its charitable aims for the benefit of its beneficiaries, including those support costs and costs relating to the governance of the charity apportioned to charitable activities.
- other expenditure includes all expenditure that is neither related to raising funds for the charity nor part of its expenditure on charitable activities.

All costs are allocated to expenditure categories reflecting the use of the resources. Direct costs

Healthwatch North Yorkshire

Notes to the Financial Statements *(continued)*

Year ended 31 March 2024

3. Accounting policies *(continued)*

Tangible assets *(continued)*

An increase in the carrying amount of an asset as a result of a revaluation, is recognised in other recognised gains and losses, unless it reverses a charge for impairment that has previously been recognised as expenditure within the statement of financial activities. A decrease in the carrying amount of an asset as a result of revaluation, is recognised in other recognised gains and losses, except to which it offsets any previous revaluation gain, in which case the loss is shown within other recognised gains and losses on the statement of financial activities.

Depreciation

Depreciation is calculated so as to write off the cost or valuation of an asset, less its residual value, over the useful economic life of that asset as follows:

Fixtures, equipment etc. - 20% straight line

Impairment of fixed assets

A review for indicators of impairment is carried out at each reporting date, with the recoverable amount being estimated where such indicators exist. Where the carrying value exceeds the recoverable amount, the asset is impaired accordingly. Prior impairments are also reviewed for possible reversal at each reporting date.

For the purposes of impairment testing, when it is not possible to estimate the recoverable amount of an individual asset, an estimate is made of the recoverable amount of the cash-generating unit to which the asset belongs. The cash-generating unit is the smallest identifiable group of assets that includes the asset and generates cash inflows that largely independent of the cash inflows from other assets or groups of assets.

For impairment testing of goodwill, the goodwill acquired in a business combination is, from the acquisition date, allocated to each of the cash-generating units that are expected to benefit from the synergies of the combination, irrespective of whether other assets or liabilities of the charity are assigned to those units.

Financial instruments

A financial asset or a financial liability is recognised only when the charity becomes a party to the contractual provisions of the instrument.

Basic financial instruments are initially recognised at the amount receivable or payable including any related transaction costs.

Healthwatch North Yorkshire

Notes to the Financial Statements *(continued)*

Year ended 31 March 2024

3. Accounting policies *(continued)*

Financial instruments *(continued)*

Other financial instruments, including derivatives, are initially recognised at fair value, unless payment for an asset is deferred beyond normal business terms or financed at a rate of interest that is not a market rate, in which case the asset is measured at the present value of the future payments discounted at a market rate of interest for a similar debt instrument.

Other financial instruments are subsequently measured at fair value, with any changes recognised in the statement of financial activities, with the exception of hedging instruments in a designated hedging relationship.

Financial assets that are measured at cost or amortised cost are reviewed for objective evidence of impairment at the end of each reporting date. If there is objective evidence of impairment, an impairment loss is recognised under the appropriate heading in the statement of financial activities in which the initial gain was recognised.

For all equity instruments regardless of significance, and other financial assets that are individually significant, these are assessed individually for impairment. Other financial assets are either assessed individually or grouped on the basis of similar credit risk characteristics.

Any reversals of impairment are recognised immediately, to the extent that the reversal does not result in a carrying amount of the financial asset that exceeds what the carrying amount would have been had the impairment not previously been recognised.

4. Donations and legacies

	Unrestricted Funds	Total Funds	Unrestricted Funds	Total Funds
	£	£	£	£
Grants				
NYCC service grant	168,793	168,793	167,459	167,459
Other grants	20,375	20,375	8,229	8,229
MH funded project	–	–	60,000	60,000
Grants receivable	–	–	1,520	1,520
	<u>189,168</u>	<u>189,168</u>	<u>237,208</u>	<u>237,208</u>

5. Charitable activities

Unrestricted Funds	Total Funds	Unrestricted Funds	Total Funds
2024	2024	2023	2023

Healthwatch North Yorkshire

Notes to the Financial Statements *(continued)*

Year ended 31 March 2024

7. Expenditure on charitable activities by fund type

	Unrestricted Funds	Total Funds 2024	Unrestricted Funds	Total Funds 2023
Charitable activity	£ 237,610	£ 237,610	£ 252,307	£ 252,307

8. Expenditure on charitable activities by activity type

	Activities undertaken directly	Total funds	Total fund
Charitable activity	£ 237,610	£ 237,610	£ 252,307

9. Net expenditure

Net expenditure is stated after charging/(crediting):

Depreciation of tangible fixed assets	2024	2023
Staff training and welfare	£ 711	£ 2,697
	£ 6,211	£ -

10. Independent examination fees

Fees payable to the independent examiner for: Independent examination of the financial statements	2024	2023
	£ 700	£ 660

11. Staff costs

The average head count of employees during the year was 6 (2023: 6).

No employee received employee benefits of more than £60,000 during the year (2023: Nil).

12. Trustee remuneration and expenses

No remuneration or other benefits from employment with the charity or a related entity were received by the trustees.

Healthwatch North Yorkshire

Notes to the Financial Statements (continued)

Year ended 31 March 2024

13. Tangible fixed assets

	Equipment £	Total £
Cost		
At 1 April 2023	14,207	14,207
Additions	1,743	1,743
At 31 March 2024	<u>15,950</u>	<u>15,950</u>
Depreciation		
At 1 April 2023	13,844	13,844
Charge for the year	711	711
At 31 March 2024	<u>14,555</u>	<u>14,555</u>
Carrying amount		
At 31 March 2024	1,395	1,395
At 31 March 2023	363	363

14. Debtors

Other debtors	2024	2023
	£	£
	<u>15,288</u>	<u>15,000</u>

15. Creditors: amounts falling due within one year

Accruals and deferred income	2024	2023
	£	£
	<u>661</u>	<u>636</u>

16. Analysis of charitable funds

	At 1 April 2023 £	Income £	Expenditure £	At 31 March 2024 £
Unrestricted funds				
General funds	140,141	196,831	(237,610)	99,362

Healthwatch North Yorkshire

Notes to the Financial Statements *(continued)*

Year ended 31 March 2024

17. Analysis of net assets between funds

	Unrestricted Funds	Total Funds
	2024	2024
	£	£
Tangible fixed assets	1,395	1,395
Current assets	98,628	98,628
Creditors less than 1 year	(661)	(661)
Net assets	99,362	99,362
	Unrestricted Funds	Total Funds
	2023	2023
	£	£
Tangible fixed assets	363	363
Current assets	140,414	140,414
Creditors less than 1 year	(636)	(636)
Net assets	140,141	140,141

Healthwatch North Yorkshire

Management Information

Year ended 31 March 2024

The following pages do not form part of the financial statements.

Healthwatch North Yorkshire

Detailed Statement of Financial Activities

Year ended 31 March 2024

	2024 £	2023 £
Income and endowments		
Donations and legacies		
NYCC service grant	168,793	167,459
Other grants	20,375	8,229
MH funded project	-	60,000
Grants receivable	-	1,520
	<u>189,168</u>	<u>237,208</u>
Charitable activities		
Other commissioned work	2,857	-
Other work	3,385	-
	<u>6,242</u>	<u>-</u>
Investment income		
Bank interest receivable	1,421	212
	<u>196,831</u>	<u>237,420</u>
Total income		
Expenditure		
Expenditure on charitable activities		
Wages and salaries inc fees	182,392	174,501
Staff training and welfare	6,211	-
Subs and publications	782	3,169
Engagement budget	6,834	44,813
Sundry expenses	31	181
Insurance	1,679	1,583
Staff travel and expenses	6,251	8,744
Repairs and IT costs	6,432	3,588
Volunteer travel expenses	276	757
Legal,professional and consultancy fees	1,134	2,841
Trustees expenses	610	226
Office rent, broadband and phone	18,776	4,944
Depreciation	711	2,697
Bank charges	60	83
Printing, stationery and postage	831	-
Marketing and publicity	3,646	1,785
Room hire and hospitality	954	2,305

Healthwatch North Yorkshire

Notes to the Detailed Statement of Financial Activities

Year ended 31 March 2024

	2024	2023
	£	£
Expenditure on charitable activities		
Activity type 1		
Activities undertaken directly		
Wages/salaries inc fees	182,392	174,501
Staff training and welfare	6,211	—
Subs & publications	782	3,169
Engagement budget	6,834	44,813
Sundry expenses	31	181
Insurance	1,679	1,583
Staff travel and expenses	6,251	8,744
Repairs and IT costs	6,432	3,588
Volunteer travel expenses	276	757
Legal, professional and consultancy fees	1,134	2,841
Trustees expenses	610	226
Office rent, broadband and phone	18,776	4,944
Depreciation	711	2,697
Bank charges	60	83
Printing, stationery and postage	831	—
Marketing and publicity	3,646	1,785
Room hire and hospitality	954	2,395
	<u>237,610</u>	<u>252,307</u>
Expenditure on charitable activities	237,610	252,307

CHARITY REGISTRATION NUMBER: 1171152

Healthwatch North Yorkshire
Unaudited Financial Statements
31 March 2024

Healthwatch North Yorkshire

Financial Statements

Year ended 31 March 2024

	Page
Trustees' annual report	1
Independent examiner's report to the trustees	5
Statement of financial activities	6
Statement of financial position	7
Notes to the financial statements	8
The following pages do not form part of the financial statements	
Detailed statement of financial activities	16
Notes to the detailed statement of financial activities	17

Healthwatch North Yorkshire

Trustees' Annual Report

Year ended 31 March 2024

The trustees present their report and the unaudited financial statements of the charity for the year ended 31 March 2024.

Reference and administrative details

Registered charity name Healthwatch North Yorkshire

Charity registration number 1171152

Principal office
55 Grove Road
Harrogate
North Yorkshire
HG1 5EP

The trustees

P Southgate
J Cunningham
L Parker
K Hodgson
A Cram
A Wood

(Appointed 1 April 2023)
(Appointed 1 April 2023)

Independent examiner

Mr R I Crisop FCA
Unit 1, Borough House Business Centre,
5 Borough Road, Richmond,
North Yorkshire
DL10 4SX

Structure, governance and management

The charity is a Charitable Incorporated Organisation (CIO) registered with the Charity Commission on 17th January 2017. The charity is managed by the board of trustees. Trustees are appointed for a term of 3 years.

New trustees receive an induction and briefing on their legal obligations under charitable law and the content of the constitution as well as management committee papers to familiarise themselves with their role and responsibilities.

Funding is provided through a grant from North Yorkshire County Council and external earned income for time limited projects.

Healthwatch North Yorkshire

Trustees' Annual Report *(continued)*

Year ended 31 March 2024

Objectives and activities

The objects of the charity are:

- Gather the views and understand the experiences of people who use health and care services, carers and the wider community.
- Make people's views known, promoting and supporting the involvement of people in the commissioning and provision of local care services and how they are scrutinised.
- Provide advice and information (signposting) to the public about access to services and support to enable people to make informed choices.

Trustees have considered the Charity Commission's guidance on public benefits and believe that Healthwatch North Yorkshire meets the public benefit requirements in delivering the activities that contribute to the objects of the charity. The achievements are set out below in summary on how we delivered our charitable objects and who the beneficiaries are.

Healthwatch North Yorkshire

Trustees' Annual Report *(continued)*

Year ended 31 March 2024

Achievements and performance

- We reached over 3,600 people across the year as part of our research projects, talking to people at awareness events, outdoor stalls, and through our volunteer network. Alongside this almost 2,500 people shared their feedback with us about using and accessing health and social care in North Yorkshire. This was via our website, phone calls, email enquiries, and surveys.
- We published 22 reports which featured people's insight into their use and experiences of accessing health and social care. This included our own reports, on for example rurality, continence services, GP websites and mental health, alongside joint reports with our local Healthwatch colleagues in West Yorkshire. Here we produced a number of reports, on for example hospital care, primary care, neurodiversity, and mental health services. Additionally, we produced reports on care homes as part of our enter & view programme.
- Over 19,000 people visited our website for information and resources, including information on local health and care services. We reached over 400,000 people via social media, including Facebook, Instagram, and through targeted social media campaigns.
- We have focused on hearing from people facing the greatest health inequalities which have included people living in rural North Yorkshire, older people, for example those people living with dementia as part of our care home visits. Younger people, where we have prioritised those living in coastal areas to understand the issues facing them when using and accessing care. People living with a mental health condition, as well as those living with autism and attention deficit hyperactivity disorder (ADHD).
- We have worked collaboratively with our NHS, council, integrated care system, and voluntary community sector partners across the year to ensure public feedback was used to influence improvements in care and services. This has included our involvement in the All-Age Autism strategy and North Yorkshire Joint Health Wellbeing strategy (2023-2030). Attendance at the North Yorkshire Health & Wellbeing Board, North Yorkshire Adult Safeguarding Board, Humber & North Yorkshire Quality Committee, and York & North Yorkshire Quality Group.
- As a result of our work and reports we have seen improvements in care and service across the system, including in mental health with new mental health practitioners in GP practices providing care for people, improvements in accessible information to support people with additional needs, a renewed focus on directing care for people living rurally to ensure they can access services, and additional support for people with their end of life care needs.

Financial review

The trustees are satisfied with the financial performance of the charity for the year.

Healthwatch North Yorkshire

Trustees' Annual Report *(continued)*

Year ended 31 March 2024

The trustees' annual report was approved on 14 October 2024 and signed on behalf of the board of trustees by:



P Southgate
Trustee



A Cram
Trustee

Healthwatch North Yorkshire
Independent Examiner's Report to the Trustees of Healthwatch North Yorkshire
Year ended 31 March 2024

I report to the trustees on my examination of the financial statements of Healthwatch North Yorkshire ('the charity') for the year ended 31 March 2024.

Responsibilities and basis of report

As the trustees of the charity you are responsible for the preparation of the financial statements in accordance with the requirements of the Charities Act 2011 ('the Act').

I report in respect of my examination of the charity's financial statements carried out under section 145 of the 2011 Act and in carrying out my examination I have followed all the applicable Directions given by the Charity Commission under section 145(5)(b) of the Act.

Independent examiner's statement

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

1. accounting records were not kept in respect of the charity as required by section 130 of the Act; or
2. the financial statements do not accord with those records; or
3. the financial statements do not comply with the applicable requirements concerning the form and content of accounts set out in the Charities (Accounts and Reports) Regulations 2008 other than any requirement that the accounts give a 'true and fair' view which is not a matter considered as part of an independent examination.

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

Mr R I Crisop FCA
Independent Examiner

Unit 1, Borough House Business Centre,
5 Borough Road, Richmond,
North Yorkshire
DL10 4SX

14 October 2024

Healthwatch North Yorkshire

Statement of Financial Activities

Year ended 31 March 2024

		2024		2023	
	Note	Unrestricted funds £	Total funds £	Total funds £	Total funds £
Income and endowments					
Donations and legacies	4	189,168	189,168	237,208	237,208
Charitable activities	5	6,242	6,242	–	–
Investment income	6	1,421	1,421	212	212
Total income		<u>196,831</u>	<u>196,831</u>	<u>237,420</u>	<u>237,420</u>
Expenditure					
Expenditure on charitable activities	7, 8	237,610	237,610	252,307	252,307
Total expenditure		<u>237,610</u>	<u>237,610</u>	<u>252,307</u>	<u>252,307</u>
Net expenditure and net movement in funds		<u>(40,779)</u>	<u>(40,779)</u>	<u>(14,887)</u>	<u>(14,887)</u>
Reconciliation of funds					
Total funds brought forward		140,141	140,141	155,028	155,028
Total funds carried forward		<u>99,362</u>	<u>99,362</u>	<u>140,141</u>	<u>140,141</u>

The statement of financial activities includes all gains and losses recognised in the year.
All income and expenditure derive from continuing activities.

Healthwatch North Yorkshire

Statement of Financial Position

31 March 2024

	Note	2024 £	2023 £
Fixed assets			
Tangible fixed assets	13	1,395	363
Current assets			
Debtors	14	15,288	15,000
Cash at bank and in hand		<u>83,340</u>	<u>125,414</u>
		<u>98,628</u>	<u>140,414</u>
Creditors: amounts falling due within one year	15	<u>661</u>	<u>636</u>
Net current assets		<u>97,967</u>	<u>139,778</u>
Total assets less current liabilities		<u>99,362</u>	<u>140,141</u>
Net assets		<u>99,362</u>	<u>140,141</u>
Funds of the charity			
Unrestricted funds		<u>99,362</u>	<u>140,141</u>
Total charity funds	16	<u>99,362</u>	<u>140,141</u>

These financial statements were approved by the board of trustees and authorised for issue on 14 October 2024, and are signed on behalf of the board by:



P Southgate
Trustee



A Cram
Trustee

Healthwatch North Yorkshire

Notes to the Financial Statements

Year ended 31 March 2024

1. General information

The charity is a public benefit entity and a registered charity in England and Wales and is unincorporated. The address of the principal office is 55 Grove Road, Harrogate, North Yorkshire, HG1 5EP.

2. Statement of compliance

These financial statements have been prepared in compliance with FRS 102, 'The Financial Reporting Standard applicable in the UK and the Republic of Ireland', the 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) (Charities SORP (FRS 102)) and the Charities Act 2011.

3. Accounting policies

Basis of preparation

The financial statements have been prepared on the historical cost basis, as modified by the revaluation of certain financial assets and liabilities and investment properties measured at fair value through income or expenditure.

The financial statements are prepared in sterling, which is the functional currency of the entity.

Going concern

There are no material uncertainties about the charity's ability to continue.

Judgements and key sources of estimation uncertainty

The preparation of the financial statements requires management to make judgements, estimates and assumptions that affect the amounts reported. These estimates and judgements are continually reviewed and are based on experience and other factors, including expectations of future events that are believed to be reasonable under the circumstances.

Fund accounting

Unrestricted funds are available for use at the discretion of the trustees to further any of the charity's purposes.

Designated funds are unrestricted funds earmarked by the trustees for particular future project or commitment.

Restricted funds are subjected to restrictions on their expenditure declared by the trustees.

Healthwatch North Yorkshire

Notes to the Financial Statements *(continued)*

Year ended 31 March 2024

3. Accounting policies *(continued)*

Incoming resources

All incoming resources are included in the statement of financial activities when entitlement has passed to the charity; it is probable that the economic benefits associated with the transaction will flow to the charity and the amount can be reliably measured. The following specific policies are applied to particular categories of income:

- income from donations or grants is recognised when there is evidence of entitlement to the gift, receipt is probable and its amount can be measured reliably.
- legacy income is recognised when receipt is probable and entitlement is established.
- income from donated goods is measured at the fair value of the goods unless this is impractical to measure reliably, in which case the value is derived from the cost to the donor or the estimated resale value. Donated facilities and services are recognised in the accounts when received if the value can be reliably measured. No amounts are included for the contribution of general volunteers.
- income from contracts for the supply of services is recognised with the delivery of the contracted service. This is classified as unrestricted funds unless there is a contractual requirement for it to be spent on a particular purpose and returned if unspent, in which case it may be regarded as restricted.

Resources expended

Expenditure is recognised on an accruals basis as a liability is incurred. Expenditure includes any VAT which cannot be fully recovered, and is classified under headings of the statement of financial activities to which it relates:

- expenditure on raising funds includes the costs of all fundraising activities, events, non-charitable trading activities, and the sale of donated goods.
- expenditure on charitable activities includes all costs incurred by a charity in undertaking activities that further its charitable aims for the benefit of its beneficiaries, including those support costs and costs relating to the governance of the charity apportioned to charitable activities.
- other expenditure includes all expenditure that is neither related to raising funds for the charity nor part of its expenditure on charitable activities.

All costs are allocated to expenditure categories reflecting the use of the resources. Direct costs

Healthwatch North Yorkshire

Notes to the Financial Statements *(continued)*

Year ended 31 March 2024

3. Accounting policies *(continued)*

Tangible assets *(continued)*

An increase in the carrying amount of an asset as a result of a revaluation, is recognised in other recognised gains and losses, unless it reverses a charge for impairment that has previously been recognised as expenditure within the statement of financial activities. A decrease in the carrying amount of an asset as a result of revaluation, is recognised in other recognised gains and losses, except to which it offsets any previous revaluation gain, in which case the loss is shown within other recognised gains and losses on the statement of financial activities.

Depreciation

Depreciation is calculated so as to write off the cost or valuation of an asset, less its residual value, over the useful economic life of that asset as follows:

Fixtures, equipment etc. - 20% straight line

Impairment of fixed assets

A review for indicators of impairment is carried out at each reporting date, with the recoverable amount being estimated where such indicators exist. Where the carrying value exceeds the recoverable amount, the asset is impaired accordingly. Prior impairments are also reviewed for possible reversal at each reporting date.

For the purposes of impairment testing, when it is not possible to estimate the recoverable amount of an individual asset, an estimate is made of the recoverable amount of the cash-generating unit to which the asset belongs. The cash-generating unit is the smallest identifiable group of assets that includes the asset and generates cash inflows that largely independent of the cash inflows from other assets or groups of assets.

For impairment testing of goodwill, the goodwill acquired in a business combination is, from the acquisition date, allocated to each of the cash-generating units that are expected to benefit from the synergies of the combination, irrespective of whether other assets or liabilities of the charity are assigned to those units.

Financial instruments

A financial asset or a financial liability is recognised only when the charity becomes a party to the contractual provisions of the instrument.

Basic financial instruments are initially recognised at the amount receivable or payable including any related transaction costs.

Healthwatch North Yorkshire

Notes to the Financial Statements *(continued)*

Year ended 31 March 2024

3. Accounting policies *(continued)*

Financial instruments *(continued)*

Other financial instruments, including derivatives, are initially recognised at fair value, unless payment for an asset is deferred beyond normal business terms or financed at a rate of interest that is not a market rate, in which case the asset is measured at the present value of the future payments discounted at a market rate of interest for a similar debt instrument.

Other financial instruments are subsequently measured at fair value, with any changes recognised in the statement of financial activities, with the exception of hedging instruments in a designated hedging relationship.

Financial assets that are measured at cost or amortised cost are reviewed for objective evidence of impairment at the end of each reporting date. If there is objective evidence of impairment, an impairment loss is recognised under the appropriate heading in the statement of financial activities in which the initial gain was recognised.

For all equity instruments regardless of significance, and other financial assets that are individually significant, these are assessed individually for impairment. Other financial assets are either assessed individually or grouped on the basis of similar credit risk characteristics.

Any reversals of impairment are recognised immediately, to the extent that the reversal does not result in a carrying amount of the financial asset that exceeds what the carrying amount would have been had the impairment not previously been recognised.

4. Donations and legacies

	Unrestricted Funds	Total Funds	Unrestricted Funds	Total Funds
	£	£	£	£
Grants				
NYCC service grant	168,793	168,793	167,459	167,459
Other grants	20,375	20,375	8,229	8,229
MH funded project	–	–	60,000	60,000
Grants receivable	–	–	1,520	1,520
	<u>189,168</u>	<u>189,168</u>	<u>237,208</u>	<u>237,208</u>

5. Charitable activities

Unrestricted Funds	Total Funds	Unrestricted Funds	Total Funds
2024	2024	2023	2023

Healthwatch North Yorkshire

Notes to the Financial Statements *(continued)*

Year ended 31 March 2024

7. Expenditure on charitable activities by fund type

	Unrestricted Funds	Total Funds 2024	Unrestricted Funds	Total Funds 2023
Charitable activity	£ 237,610	£ 237,610	£ 252,307	£ 252,307

8. Expenditure on charitable activities by activity type

	Activities undertaken directly	Total funds	Total fund
Charitable activity	£ 237,610	£ 237,610	£ 252,307

9. Net expenditure

Net expenditure is stated after charging/(crediting):

Depreciation of tangible fixed assets	2024	2023
Staff training and welfare	£ 711	£ 2,697
	£ 6,211	—

10. Independent examination fees

Fees payable to the independent examiner for:
Independent examination of the financial statements

	2024	2023
	£ 700	£ 660

11. Staff costs

The average head count of employees during the year was 6 (2023: 6).

No employee received employee benefits of more than £60,000 during the year (2023: Nil).

12. Trustee remuneration and expenses

No remuneration or other benefits from employment with the charity or a related entity were received by the trustees.

Healthwatch North Yorkshire

Notes to the Financial Statements (continued)

Year ended 31 March 2024

13. Tangible fixed assets

	Equipment £	Total £
Cost		
At 1 April 2023	14,207	14,207
Additions	1,743	1,743
At 31 March 2024	<u>15,950</u>	<u>15,950</u>
Depreciation		
At 1 April 2023	13,844	13,844
Charge for the year	711	711
At 31 March 2024	<u>14,555</u>	<u>14,555</u>
Carrying amount		
At 31 March 2024	1,395	1,395
At 31 March 2023	363	363

14. Debtors

Other debtors	2024	2023
	£	£
	<u>15,288</u>	<u>15,000</u>

15. Creditors: amounts falling due within one year

Accruals and deferred income	2024	2023
	£	£
	<u>661</u>	<u>636</u>

16. Analysis of charitable funds

Unrestricted funds				
General funds	At 1 April 2023	Income	Expenditure	At 31 March 2024
	£	£	£	£
	<u>140,141</u>	<u>196,831</u>	<u>(237,610)</u>	<u>99,362</u>

Healthwatch North Yorkshire

Notes to the Financial Statements *(continued)*

Year ended 31 March 2024

17. Analysis of net assets between funds

	Unrestricted Funds	Total Funds
	2024	2024
	£	£
Tangible fixed assets	1,395	1,395
Current assets	98,628	98,628
Creditors less than 1 year	(661)	(661)
Net assets	99,362	99,362
	Unrestricted Funds	Total Funds
	2023	2023
	£	£
Tangible fixed assets	363	363
Current assets	140,414	140,414
Creditors less than 1 year	(636)	(636)
Net assets	140,141	140,141

Healthwatch North Yorkshire

Management Information

Year ended 31 March 2024

The following pages do not form part of the financial statements.

Healthwatch North Yorkshire

Detailed Statement of Financial Activities

Year ended 31 March 2024

	2024 £	2023 £
Income and endowments		
Donations and legacies		
NYCC service grant	168,793	167,459
Other grants	20,375	8,229
MH funded project	-	60,000
Grants receivable	-	1,520
	<u>189,168</u>	<u>237,208</u>
Charitable activities		
Other commissioned work	2,857	-
Other work	3,385	-
	<u>6,242</u>	<u>-</u>
Investment income		
Bank interest receivable	1,421	212
	<u>196,831</u>	<u>237,420</u>
Total income		
Expenditure		
Expenditure on charitable activities		
Wages and salaries inc fees	182,392	174,501
Staff training and welfare	6,211	-
Subs and publications	782	3,169
Engagement budget	6,834	44,813
Sundry expenses	31	181
Insurance	1,679	1,583
Staff travel and expenses	6,251	8,744
Repairs and IT costs	6,432	3,588
Volunteer travel expenses	276	757
Legal, professional and consultancy fees	1,134	2,841
Trustees expenses	610	226
Office rent, broadband and phone	18,776	4,944
Depreciation	711	2,697
Bank charges	60	83
Printing, stationery and postage	831	-
Marketing and publicity	3,646	1,785
Room hire and hospitality	954	2,305

Healthwatch North Yorkshire

Notes to the Detailed Statement of Financial Activities

Year ended 31 March 2024

	2024	2023
	£	£
Expenditure on charitable activities		
Activity type 1		
Activities undertaken directly		
Wages/salaries inc fees	182,392	174,501
Staff training and welfare	6,211	—
Subs & publications	782	3,169
Engagement budget	6,834	44,813
Sundry expenses	31	181
Insurance	1,679	1,583
Staff travel and expenses	6,251	8,744
Repairs and IT costs	6,432	3,588
Volunteer travel expenses	276	757
Legal, professional and consultancy fees	1,134	2,841
Trustees expenses	610	226
Office rent, broadband and phone	18,776	4,944
Depreciation	711	2,697
Bank charges	60	83
Printing, stationery and postage	831	—
Marketing and publicity	3,646	1,785
Room hire and hospitality	954	2,395
	<u>237,610</u>	<u>252,307</u>
Expenditure on charitable activities	237,610	252,307

HEALTHWATCH NORTH YORKSHIRE

England & Wales - Charity number 1171152

Accounts

Healthwatch North Yorkshire
Unaudited Financial Statements
31 March 2023

IAN CRISOP ACCOUNTANCY

Chartered accountants
Unit 1, Borough House Business Centre,
5 Borough Road, Richmond,
North Yorkshire
DL10 4SX

Healthwatch North Yorkshire

Financial Statements

Year ended 31 March 2023

	Page
Trustees' annual report	1
Independent examiner's report to the trustees	4
Statement of financial activities	5
Statement of financial position	6
Notes to the financial statements	7
The following pages do not form part of the financial statements	
Detailed statement of financial activities	15
Notes to the detailed statement of financial activities	16

Healthwatch North Yorkshire

Trustees' Annual Report

Year ended 31 March 2023

The trustees present their report and the unaudited financial statements of the charity for the year ended 31 March 2023.

Reference and administrative details

Registered charity name Healthwatch North Yorkshire

Charity registration number 1171152

Principal office 55 Grove Road
Harrogate
North Yorkshire
HG1 5EP

The trustees

P Southgate
J Cunningham
L Adams
L V Wolstenholme
D Bodell
L Parker
K Hodgson
A Barnes

Independent examiner Mr R I Crisop FCA
Unit 1, Borough House Business Centre,
5 Borough Road, Richmond,
North Yorkshire
DL10 4SX

Structure, governance and management

The charity is a Charitable Incorporated Organisation (CIO) registered with the Charity Commission on 17th January 2017. The charity is managed by the board of trustees. Trustees are appointed for a term of 3 years.

New trustees receive an induction and briefing on their legal obligations under charitable law and the content of the constitution as well as management committee papers to familiarise themselves with their role and responsibilities.

Funding is granted through a grant from North Yorkshire County Council and earned income for time limited projects.

Healthwatch North Yorkshire

Trustees' Annual Report *(continued)*

Year ended 31 March 2023

Objectives and activities

The objects of the charity are:

- providing information and advice to the general public about local health and social care services;
- making the views and experiences of members of the general public known to health and social care providers and commissioners;
- enabling local people to have a voice in the development, delivery, improvement and equality of access to local health and care services and facilities; and
- providing training and the development of skills for volunteers and the wider community in understanding, scrutinising, reviewing and monitoring local health and care services and facilities.

Trustees have considered the Charity Commission's guidance on public benefit and believe that Healthwatch North Yorkshire meets the public benefit requirements in delivering the activities that contribute to the objects of the charity. The achievements are set out in this report detailing how we deliver our charitable objects and who the beneficiaries are.

Achievements and performance

This report highlights the key achievements of the charity in this year of operation and how it has met its charitable objectives.

Providing information and advice to the general public about local health and social care services

We engaged with a diverse wide range of voluntary organisations reaching older people, families and children, mental health users, veterans and carers. We engaged with the public via market stall events, fayres, summer shows and public sector consultation events.

Making the views and experiences of members of the general public known to health and social care providers and commissioners

Healthwatch North Yorkshire is a member of North Yorkshire Health & Wellbeing Board directly feeding back views and experiences to commissioners in health and social care. We have worked closely with local health and social care providers attending meetings at a strategic level and operational level. Our trustees, staff and volunteers attended public consultation events to hear public opinion and ensure those opinions are heard.

Enabling local people to have a voice in the development, delivery, improvement and equality of access to local health and care services and facilities

Providing training and the development of skills for volunteers and the wider community in understanding, scrutinising, reviewing and monitoring local health and care services and facilities

Healthwatch North Yorkshire

Trustees' Annual Report *(continued)*

Year ended 31 March 2023

Financial review

The trustees are satisfied with the financial position of the charity.

Reserves policy

Healthwatch North Yorkshire will work towards ensuring unrestricted funds are equivalent to 3 months running costs. This is to ensure we can provide financial stability and the means for the development of our required activities. The Board will annually review the amount of reserves that are required to ensure that they are adequate to fulfill our continuing obligations.

The trustees' annual report was approved on 11 October 2023 and signed on behalf of the board of trustees by:

P Southgate
Trustee



L Adams
Trustee



Healthwatch North Yorkshire

Independent Examiner's Report to the Trustees of Healthwatch North Yorkshire

Year ended 31 March 2023

I report to the trustees on my examination of the financial statements of Healthwatch North Yorkshire ('the charity') for the year ended 31 March 2023.

Responsibilities and basis of report

As the trustees of the charity you are responsible for the preparation of the financial statements in accordance with the requirements of the Charities Act 2011 ('the Act').

I report in respect of my examination of the charity's financial statements carried out under section 145 of the 2011 Act and in carrying out my examination I have followed all the applicable Directions given by the Charity Commission under section 145(5)(b) of the Act.

Independent examiner's statement

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

1. accounting records were not kept in respect of the charity as required by section 130 of the Act; or
2. the financial statements do not accord with those records; or
3. the financial statements do not comply with the applicable requirements concerning the form and content of accounts set out in the Charities (Accounts and Reports) Regulations 2008 other than any requirement that the accounts give a 'true and fair' view which is not a matter considered as part of an independent examination.

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

Mr R I Crisop FCA
Independent Examiner

Unit 1, Borough House Business Centre,
5 Borough Road, Richmond,
North Yorkshire
DL10 4SX

11 October 2023

Healthwatch North Yorkshire

Statement of Financial Activities

Year ended 31 March 2023

		2023		2022
	Note	Unrestricted funds £	Total funds £	Total funds £
Income and endowments				
Donations and legacies	4	237,208	237,208	185,059
Investment income	5	212	212	–
Total income		<u>237,420</u>	<u>237,420</u>	<u>185,059</u>
Expenditure				
Expenditure on charitable activities	6,7	252,307	252,307	172,126
Total expenditure		<u>252,307</u>	<u>252,307</u>	<u>172,126</u>
Net (expenditure)/income and net movement in funds		<u>(14,887)</u>	<u>(14,887)</u>	<u>12,933</u>
Reconciliation of funds				
Total funds brought forward		155,028	155,028	142,095
Total funds carried forward		<u>140,141</u>	<u>140,141</u>	<u>155,028</u>

The statement of financial activities includes all gains and losses recognised in the year. All income and expenditure derive from continuing activities.

The notes on pages 7 to 13 form part of these financial statements.

Healthwatch North Yorkshire

Statement of Financial Position

31 March 2023

	Note	2023 £	£	2022 £
Fixed assets				
Tangible fixed assets	12		363	3,060
Current assets				
Debtors	13	15,000		—
Cash at bank and in hand		125,414		152,604
		<u>140,414</u>		<u>152,604</u>
Creditors: amounts falling due within one year	14	<u>636</u>		<u>636</u>
Net current assets			<u>139,778</u>	<u>151,968</u>
Total assets less current liabilities			<u>140,141</u>	<u>155,028</u>
Net assets			<u>140,141</u>	<u>155,028</u>
Funds of the charity				
Unrestricted funds			<u>140,141</u>	<u>155,028</u>
Total charity funds	16		<u>140,141</u>	<u>155,028</u>

These financial statements were approved by the board of trustees and authorised for issue on 11 October 2023, and are signed on behalf of the board by:

P Southgate
Trustee



L Adams
Trustee



The notes on pages 7 to 13 form part of these financial statements.

Healthwatch North Yorkshire

Notes to the Financial Statements

Year ended 31 March 2023

1. General information

The charity is a public benefit entity and a registered charity in England and Wales and is unincorporated. The address of the principal office is 55 Grove Road, Harrogate, North Yorkshire, HG1 5EP.

2. Statement of compliance

These financial statements have been prepared in compliance with FRS 102, 'The Financial Reporting Standard applicable in the UK and the Republic of Ireland', the 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) (Charities SORP (FRS 102)) and the Charities Act 2011.

3. Accounting policies

Basis of preparation

The financial statements have been prepared on the historical cost basis, as modified by the revaluation of certain financial assets and liabilities and investment properties measured at fair value through income or expenditure.

The financial statements are prepared in sterling, which is the functional currency of the entity.

Going concern

There are no material uncertainties about the charity's ability to continue.

Judgements and key sources of estimation uncertainty

The preparation of the financial statements requires management to make judgements, estimates and assumptions that affect the amounts reported. These estimates and judgements are continually reviewed and are based on experience and other factors, including expectations of future events that are believed to be reasonable under the circumstances.

Fund accounting

Unrestricted funds are available for use at the discretion of the trustees to further any of the charity's purposes.

Designated funds are unrestricted funds earmarked by the trustees for particular future project or commitment.

Restricted funds are subjected to restrictions on their expenditure declared by the donor or through the terms of an appeal, and fall into one of two sub-classes: restricted income funds or endowment funds.

Healthwatch North Yorkshire

Notes to the Financial Statements *(continued)*

Year ended 31 March 2023

3. Accounting policies *(continued)*

Incoming resources

All incoming resources are included in the statement of financial activities when entitlement has passed to the charity; it is probable that the economic benefits associated with the transaction will flow to the charity and the amount can be reliably measured. The following specific policies are applied to particular categories of income:

- income from donations or grants is recognised when there is evidence of entitlement to the gift, receipt is probable and its amount can be measured reliably.
- legacy income is recognised when receipt is probable and entitlement is established.
- income from donated goods is measured at the fair value of the goods unless this is impractical to measure reliably, in which case the value is derived from the cost to the donor or the estimated resale value. Donated facilities and services are recognised in the accounts when received if the value can be reliably measured. No amounts are included for the contribution of general volunteers.
- income from contracts for the supply of services is recognised with the delivery of the contracted service. This is classified as unrestricted funds unless there is a contractual requirement for it to be spent on a particular purpose and returned if unspent, in which case it may be regarded as restricted.

Resources expended

Expenditure is recognised on an accruals basis as a liability is incurred. Expenditure includes any VAT which cannot be fully recovered, and is classified under headings of the statement of financial activities to which it relates:

- expenditure on raising funds includes the costs of all fundraising activities, events, non-charitable trading activities, and the sale of donated goods.
- expenditure on charitable activities includes all costs incurred by a charity in undertaking activities that further its charitable aims for the benefit of its beneficiaries, including those support costs and costs relating to the governance of the charity apportioned to charitable activities.
- other expenditure includes all expenditure that is neither related to raising funds for the charity nor part of its expenditure on charitable activities.

All costs are allocated to expenditure categories reflecting the use of the resource. Direct costs attributable to a single activity are allocated directly to that activity. Shared costs are apportioned between the activities they contribute to on a reasonable, justifiable and consistent basis.

Tangible assets

Tangible assets are initially recorded at cost, and subsequently stated at cost less any accumulated depreciation and impairment losses. Any tangible assets carried at revalued amounts are recorded at the fair value at the date of revaluation less any subsequent accumulated depreciation and subsequent accumulated impairment losses.

Healthwatch North Yorkshire

Notes to the Financial Statements *(continued)*

Year ended 31 March 2023

3. Accounting policies *(continued)*

Tangible assets *(continued)*

An increase in the carrying amount of an asset as a result of a revaluation, is recognised in other recognised gains and losses, unless it reverses a charge for impairment that has previously been recognised as expenditure within the statement of financial activities. A decrease in the carrying amount of an asset as a result of revaluation, is recognised in other recognised gains and losses, except to which it offsets any previous revaluation gain, in which case the loss is shown within other recognised gains and losses on the statement of financial activities.

Depreciation

Depreciation is calculated so as to write off the cost or valuation of an asset, less its residual value, over the useful economic life of that asset as follows:

Fixtures, equipment etc. - 20% straight line

Impairment of fixed assets

A review for indicators of impairment is carried out at each reporting date, with the recoverable amount being estimated where such indicators exist. Where the carrying value exceeds the recoverable amount, the asset is impaired accordingly. Prior impairments are also reviewed for possible reversal at each reporting date.

For the purposes of impairment testing, when it is not possible to estimate the recoverable amount of an individual asset, an estimate is made of the recoverable amount of the cash-generating unit to which the asset belongs. The cash-generating unit is the smallest identifiable group of assets that includes the asset and generates cash inflows that largely independent of the cash inflows from other assets or groups of assets.

For impairment testing of goodwill, the goodwill acquired in a business combination is, from the acquisition date, allocated to each of the cash-generating units that are expected to benefit from the synergies of the combination, irrespective of whether other assets or liabilities of the charity are assigned to those units.

Financial instruments

A financial asset or a financial liability is recognised only when the charity becomes a party to the contractual provisions of the instrument.

Basic financial instruments are initially recognised at the amount receivable or payable including any related transaction costs.

Current assets and current liabilities are subsequently measured at the cash or other consideration expected to be paid or received and not discounted.

Debt instruments are subsequently measured at amortised cost.

Where investments in shares are publicly traded or their fair value can otherwise be measured reliably, the investment is subsequently measured at fair value with changes in fair value recognised in income and expenditure. All other such investments are subsequently measured at cost less impairment.

Healthwatch North Yorkshire

Notes to the Financial Statements *(continued)*

Year ended 31 March 2023

3. Accounting policies *(continued)*

Financial instruments *(continued)*

Other financial instruments, including derivatives, are initially recognised at fair value, unless payment for an asset is deferred beyond normal business terms or financed at a rate of interest that is not a market rate, in which case the asset is measured at the present value of the future payments discounted at a market rate of interest for a similar debt instrument.

Other financial instruments are subsequently measured at fair value, with any changes recognised in the statement of financial activities, with the exception of hedging instruments in a designated hedging relationship.

Financial assets that are measured at cost or amortised cost are reviewed for objective evidence of impairment at the end of each reporting date. If there is objective evidence of impairment, an impairment loss is recognised under the appropriate heading in the statement of financial activities in which the initial gain was recognised.

For all equity instruments regardless of significance, and other financial assets that are individually significant, these are assessed individually for impairment. Other financial assets are either assessed individually or grouped on the basis of similar credit risk characteristics.

Any reversals of impairment are recognised immediately, to the extent that the reversal does not result in a carrying amount of the financial asset that exceeds what the carrying amount would have been had the impairment not previously been recognised.

Defined contribution plans

Contributions to defined contribution plans are recognised as an expense in the period in which the related service is provided. Prepaid contributions are recognised as an asset to the extent that the prepayment will lead to a reduction in future payments or a cash refund.

When contributions are not expected to be settled wholly within 12 months of the end of the reporting date in which the employees render the related service, the liability is measured on a discounted present value basis. The unwinding of the discount is recognised as an expense in the period in which it arises.

4. Donations and legacies

	Unrestricted Funds £	Total Funds 2023 £	Unrestricted Funds £	Total Funds 2022 £
Grants				
NYCC service grant	167,459	167,459	167,459	167,459
Other grants	8,229	8,229	17,600	17,600
MH funded project	60,000	60,000	–	–
Grants receivable	1,520	1,520	–	–
	<u>237,208</u>	<u>237,208</u>	<u>185,059</u>	<u>185,059</u>

Healthwatch North Yorkshire

Notes to the Financial Statements *(continued)*

Year ended 31 March 2023

5. Investment income

	Unrestricted Funds	Total Funds 2023	Unrestricted Funds	Total Funds 2022
	£	£	£	£
Bank interest receivable	212	212	–	–

6. Expenditure on charitable activities by fund type

	Unrestricted Funds	Total Funds 2023	Unrestricted Funds	Total Funds 2022
	£	£	£	£
Charitable activity	252,307	252,307	172,126	172,126

7. Expenditure on charitable activities by activity type

	Activities undertaken directly	Total funds 2023	Total fund 2022
	£	£	£
Charitable activity	252,307	252,307	172,126

8. Net (expenditure)/income

Net (expenditure)/income is stated after charging/(crediting):

	2023	2022
	£	£
Depreciation of tangible fixed assets	2,697	2,697

9. Independent examination fees

	2023	2022
	£	£
Fees payable to the independent examiner for: Independent examination of the financial statements	660	660

10. Staff costs

The average head count of employees during the year was 6 (2022: 5).

No employee received employee benefits of more than £60,000 during the year (2022: Nil).

11. Trustee remuneration and expenses

No remuneration or other benefits from employment with the charity or a related entity were received by the trustees.

Healthwatch North Yorkshire

Notes to the Financial Statements *(continued)*

Year ended 31 March 2023

12. Tangible fixed assets

	Equipment £	Total £
Cost		
At 1 April 2022 and 31 March 2023	<u>14,207</u>	<u>14,207</u>
Depreciation		
At 1 April 2022	11,147	11,147
Charge for the year	<u>2,697</u>	<u>2,697</u>
At 31 March 2023	<u>13,844</u>	<u>13,844</u>
Carrying amount		
At 31 March 2023	<u>363</u>	<u>363</u>
At 31 March 2022	<u>3,060</u>	<u>3,060</u>

13. Debtors

	2023 £	2022 £
Other debtors	<u>15,000</u>	<u>—</u>

14. Creditors: amounts falling due within one year

	2023 £	2022 £
Accruals and deferred income	<u>636</u>	<u>636</u>

15. Pensions and other post retirement benefits

Defined contribution plans

The amount recognised in income or expenditure as an expense in relation to defined contribution plans was £Nil (2022: £3,184).

16. Analysis of charitable funds

Unrestricted funds

	At 1 April 2022 £	Income £	Expenditure £	At 31 March 2023 £
General funds	<u>155,028</u>	<u>237,420</u>	<u>(252,307)</u>	<u>140,141</u>

	At 1 April 2021 £	Income £	Expenditure £	At 31 March 2022 £
General funds	<u>142,095</u>	<u>185,059</u>	<u>(172,126)</u>	<u>155,028</u>

Healthwatch North Yorkshire

Notes to the Financial Statements *(continued)*

Year ended 31 March 2023

17. Analysis of net assets between funds

	Unrestricted Funds	Total Funds
	£	£
Tangible fixed assets	363	363
Current assets	140,414	140,414
Creditors less than 1 year	(636)	(636)
Net assets	140,141	140,141

	Unrestricted Funds	Total Funds
	£	£
Tangible fixed assets	3,060	3,060
Current assets	152,604	152,604
Creditors less than 1 year	(636)	(636)
Net assets	155,028	155,028

Healthwatch North Yorkshire

Management Information

Year ended 31 March 2023

The following pages do not form part of the financial statements.

Healthwatch North Yorkshire
Detailed Statement of Financial Activities
Year ended 31 March 2023

	2023 £	2022 £
Income and endowments		
Donations and legacies		
NYCC service grant	167,459	167,459
Other grants	8,229	17,600
MH funded project	60,000	-
Grants receivable	1,520	-
	<u>237,208</u>	<u>185,059</u>
Investment income		
Bank interest receivable	212	-
	<u>237,420</u>	<u>185,059</u>
Total income		
	<u>237,420</u>	<u>185,059</u>
Expenditure		
Expenditure on charitable activities		
Wages and salaries	174,501	140,922
Pension costs	-	3,184
Subs & publications	3,169	1,902
Engagement budget	44,813	-
Sundry expenses	181	176
Insurance	1,583	1,503
Staff travel and expenses	8,744	3,581
Repairs and software maintenance	3,588	6,556
Volunteer and travel expenses	757	72
Legal, professional and consultancy fees	2,841	2,407
Trustees expenses	226	560
Office rent, broadband and phones	4,944	3,341
Depreciation	2,697	2,697
Bank charges	83	96
Printing, stationery & postage	-	3,306
Marketing & publicity	1,785	353
Room hire & hospitality	2,395	1,470
	<u>252,307</u>	<u>172,126</u>
Total expenditure		
	<u>252,307</u>	<u>172,126</u>
Net (expenditure)/income		
	<u>(14,887)</u>	<u>12,933</u>

Healthwatch North Yorkshire

Notes to the Detailed Statement of Financial Activities

Year ended 31 March 2023

	2023 £	2022 £
Expenditure on charitable activities		
<i>Activities undertaken directly</i>		
Wages/salaries inc fees	174,501	140,922
Pension costs	–	3,184
Subs & publications	3,169	1,902
Engagement budget	44,813	–
Sundry expenses	181	176
Insurance	1,583	1,503
Staff travel and expenses	8,744	3,581
Repairs and software maintenance	3,588	6,556
Volunteer travel expenses	757	72
Legal, professional and consultancy fees	2,841	2,407
Trustees expenses	226	560
Office rent, broadband and phone	4,944	3,341
Depreciation	2,697	2,697
Bank charges	83	96
Printing, stationery and postage	–	3,306
Marketing and publicity	1,785	353
Room hire and hospitality	2,395	1,470
	<u>252,307</u>	<u>172,126</u>
Expenditure on charitable activities	<u>252,307</u>	<u>172,126</u>

HEALTHWATCH NORTH YORKSHIRE

England & Wales - Charity number 1171152

Accounts

Championing what matters to you

Healthwatch North Yorkshire
Annual Report 2021-22



Contents

Message from our Chief Executive Officer	3
About us	4
Our year in review	5
Listening to your experiences	7
Advice and information	11
Volunteers	13
Finances and future priorities	15
Statutory statements	16

Message from our CEO

Reflecting on the last year and looking ahead to our future at Healthwatch North Yorkshire.

Firstly, I would like to thank our staff, volunteers and board members who have worked incredibly hard to make the last year an eventful year for us all. Alongside this, I would like to thank all the people across North Yorkshire who have shared their health and social care experiences with us, for example over the phone, by email, via our website, at our outdoor events or by taking part in our surveys and focus groups.

Without your insight we wouldn't have been able to make change happen and champion what matters to you.

Our relationships across health and social care have also been important to us and we have strived to continue building these across the system to ensure we play an instrumental role in bringing public insight and opinions to the forefront of decision making.

I would like to thank these colleagues for their cooperation, including those in; NHS Hospital Trusts (Acute & Mental Health), Clinical Commissioning Groups, North Yorkshire County Council, Primary Care, the Health & Care Partnerships in Humber & North Yorkshire and in West Yorkshire (including Craven), as well as those working in the Community Voluntary Sector.

I hope you enjoy reading our Annual Report for 2021-22 which provides a summary of the many things we have undertaken, achieved and will continue to champion over the coming year.

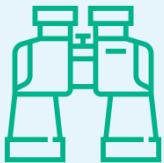


Ashley Green, Chief Executive Officer
Healthwatch North Yorkshire

About us

Your health and social care champion

Healthwatch North Yorkshire is your local health and social care champion. From Whitby to Craven and everywhere in between, we make sure NHS and social care leaders hear your voice and use your feedback to improve care. We can also help you to find reliable and trustworthy information and advice.



Our vision

A world where we can all get the health and care we need.



Our mission

To make sure people's experiences help make health and care better.



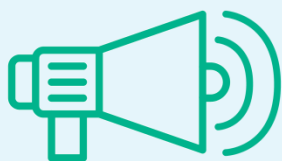
Our values

- Listening to people and making sure their voices are heard.
- Including everyone in the conversation – especially those who don't always have their voice heard.
- Analysing different people's experiences to learn how to improve care.
- Acting on feedback and driving change.
- Partnering with care providers, Government, and the voluntary sector – serving as the public's independent advocate.

Our year in review

Find out how we have engaged and supported people.

Reaching out



3,304 people

shared their experiences of health and social care services with us, helping to raise awareness of issues and improve care.

76,207 visits to our website

from people who came to us for advice and information about topics such as COVID-19 and NHS dentistry.

Making a difference to care



We published

8 reports and briefings

about people's experiences and the improvements they would like to see.

Health and care that works for you



We're lucky to have

80

outstanding volunteers, who gave up **157 days** to make care better for our community.

We're funded by our local authority. In 2021-22 we received:

£167,459

Which is the same as the previous year.

We currently employ

5 staff

who help us carry out this work.

How we've made a difference throughout the year

These are some of the projects we worked on from April 2021 to March 2022.

Spring



We worked collaboratively across the county with partner organisations in for example Selby, Scarborough and Craven to hear from local people about their health and care concerns.



We updated our website to ensure we provided clear, consistent, and engaging content and added new accessibility features to make our website more accessible and user friendly to all.

Summer



When people struggled to access an NHS dentist, we called for radical reform of dental provision in our report. We also facilitated several focus groups to hear what people would want from their NHS dental practice.



We began to hear from young people about their experiences, including working in partnership with colleges and university to help steer our future work to influence improvements in young people's health and wellbeing.

Autumn



We worked in partnership with Healthwatch York to speak with care homes to find out what they thought the impact of mandatory COVID-19 vaccinations would have on their staff and services.



We developed a network of both organisations and individuals who share feedback with us on a regular basis and keep us informed of timely local health and social care issues.

Winter



We looked at the innovative ways care homes adapted their services during the pandemic. Our report highlighted the ways care homes worked to keep their residents safe and how these changes had a positive long-term effect.



We highlighted people's experiences of GP appointments and whilst there was much positive feedback, there were still some concerns about long waiting times to book appointments and a mixed response to using digital support.

Listening to your experiences

Services can't make improvements without hearing your views. That's why over the last year we have made listening to feedback from all areas of the community a priority. This allows us to understand the full picture and provide feedback to services to help them improve. We've heard from people who have completed our surveys, participated in our focus groups, contacted us by phone, spoken to us at outdoor events and contacted us by social media.



Understanding the real-time health and care issues

We set up our networks of organisations and individuals to give people the opportunity to share their experiences of health and social care services with us by completing a regular survey focused on a set topic.

We published our COVID-19 report (Sep 2021) followed by two pulse reports, and one pulse briefing in the year. Our first pulse report (Nov 2021) focused on *Delays to Treatment* and our first pulse briefing (Dec 2021) focused on *Access to GP Appointments*.

Our second pulse report (Feb 2022) focused on public experiences of *Mental Health and Well-Being*, as mental health was raised as the biggest issue of concern in our first pulse report.



61% of respondents

told us that they had experienced mental health or well-being issues in the past 12 months.

The key issues identified in our pulse report focusing on *Mental Health and Well-Being* included:

- Around 60% of the sample had experienced mental health issues, particularly anxiety and stress, exacerbated by COVID-19.
- Most people went to their GP as their first port of call regarding mental health. However, people had a mixed experience of seeing their GP.
- 53% of the sample did not seek any support.
- Some people found the support offered useful once they managed to access it, but there were several barriers that prevented people from accessing help, including long waiting times, staff attitudes, the stigma around mental health and impersonal care.
- A supportive network of family and friends, exercise and being in nature, a positive home or work environment and routine all helped to contribute towards positive mental health and well-being.

What difference did this make

We shared the report widely with stakeholders involved in the delivery and commissioning of mental health services. An example of the feedback we received can be seen below.



“Some really helpful information here and I think information that is vital to the mental health community transformation work. I am going to raise it at the co-creation programme board and ask how we can better use this information to inform our services.”

Sally Smith, Tees, Esk and Wear Valley NHS Foundation Trust



Call for radical reform of access to NHS dentistry

Thanks to people sharing their experiences of being unable to access an NHS dentist, we produced a report to highlight the key issues people across North Yorkshire are facing.

In August 2020, we published a report reviewing all public feedback we received from May 2020 to May 2021. The report included a review of 176 pieces feedback and signposting requests.

NHS dentistry has been a major area of concern for people across North Yorkshire and this report called for major, radical reform to the way that dentistry is commissioned. The lack of access to and availability to NHS dentistry has severely effected people, and it prompted an unprecedented response.

One of the main issues we heard was the lack of access to NHS dentists across North Yorkshire, and it is unsurprising that 83.5% of feedback we received relating to NHS dentistry was negative. Two other main issues we heard were related to long waiting times and concerns for children's oral health.



“COVID-19 has had a massive impact on how we can provide services. It means more time is required between patients – we must leave the room empty between patients for a deep clean. The PPE that we wear is time-consuming to put on and take off, as well as been exhausting to work with. This report by Healthwatch North Yorkshire demonstrates the need for improvements in the number and availability of NHS dentists.”

- **Zafran Majid, Dental Practice Manager.**



What difference did this make

Due to our call for change, NHS England invited us to be a part of their procurement panel for new dental services in North Yorkshire where we have contributed to the review of public and patient engagement and accessibility to services.

The findings presented in the report contributed to the establishment of a new dental working group in the former West Yorkshire and Harrogate Health and Care Partnership, and to the work of the North Yorkshire County Council Health Scrutiny Board.

Additionally, due to our report and ongoing pressure by us and our Healthwatch colleagues in the region, we were invited to join a new Humber & North Yorkshire local dental network. Alongside this our report and public insight has helped to shape the development of a new NHS dental strategy for Yorkshire & Humber.

Three ways we have made a difference for the community

Throughout our work we gather information about health and social care by speaking to people about their experiences.

Working in partnership to hear more voices

We frequently work in partnership with other organisations to understand and amplify what is important to members of the public.



We supported North Yorkshire CCG to facilitate public events where people could have their questions answered on the provision of stroke services across the county. Alongside this we undertook a joint survey to hear from people who had experienced stroke care both at hospital and in the community to feed into the future delivery of stroke services. Additionally, we asked for public feedback on stroke services that we shared with the CCG, North Yorkshire County Council and the York & Scarborough NHS Hospitals Trust.

Getting services to involve the public



NHS England and NHS Improvement (NHSE&I) requested Healthwatch North Yorkshire's help in conducting public engagement as part of the procurement of NHS dentistry in the Scarborough and Robin Hoods Bay areas.

Working with NHSE&I we held three focus groups and undertook two surveys to ask for members of the public in Scarborough and Robin Hoods Bay to share their views with us on accessing NHS dentistry.

We heard from over 240 people, and we used the feedback to let NHS England and NHS Improvement know what local people wanted from NHS dental services in the areas.

Improving care over time



Change takes time. We often work behind the scenes with health and care services to consistently raise issues and push for changes.

Our volunteers (including trustees) have been involved in several local NHS projects to ensure that Healthwatch and the voice of local people are included in the development of new services. These include the redevelopment of Whitby Hospital which has been undergoing rapid transformation to ensure it meets the needs of the local community. Plus, the development of Catterick Integrated Care Campus in Richmondshire to support both the MoD personal and local population.

Advice and information

Healthwatch North Yorkshire is here for you. In times of worry or stress, we can provide confidential support and free information to help you understand your options and get the help you need.

This year we helped people by:

- Providing up to date information on COVID-19 and the vaccination programme
- Signposting people to relevant organisations
- Supporting the promotion of the NHS app
- Sharing public feedback with health and care providers across North Yorkshire to ensure people in North Yorkshire were heard



Making sure service users are listened to and understood

Over the past year we have received lots of feedback from members of the public who shared their experiences of getting COVID-19 vaccine.

We frequently signposted members of the public to people they could speak with about the vaccine, and the places they could go to have the COVID-19 vaccination.

We also built connections with those people organising the roll out of the vaccination and we regularly got in touch to share feedback or ask for further advice and information.

In one instance, we raised a concern about disabled access to the *Chain Lane Vaccination* centre in Knaresborough on behalf of the Ripon Disability Forum. The issues were noted, and the NHS service committed to providing clearer accessibility information, particularly for electric wheelchair users.



Dealing with the issues at hand

We provide monthly updates to our NHS Trusts and health and care providers to ensure they receive the latest feedback and issues that we have gathered.

Our updates include all the feedback we have heard directly via people getting in touch, at engagement events, focus groups, comments on surveys and indirectly via Care Opinion (another place that captures patient feedback).

All information is anonymous and shared by location and issue.

Pleasingly, those organisations that we send our updates to all respond to let us know what actions they have or are taking as a result of the feedback. Often issues and complaints are raised with teams, and actions agreed to deal with the specific issues.



Volunteers

We're supported by a team of amazing volunteers who are the heart of Healthwatch North Yorkshire. Thanks to their efforts in the community, we're able to understand what is working and what needs improving in the NHS and social care.

This year our volunteers:

- Helped gather experiences from people across North Yorkshire which informed our COVID-19 intelligence briefings.
- Attended public engagement events and spoke with members of the public.
- Raised awareness of our work by sharing our reports with their networks.
- Facilitated our focus groups and interviewed participants – making notes, and ensuring we had rich content for our reports.
- Attended meetings for Healthwatch North Yorkshire and fed back any key information to the team.





Patrick

"If you are thinking of volunteering, I would recommend Healthwatch North Yorkshire. You can contribute as much or little as you want whilst contributing to the local communities. You will also meet brilliant health and social care professionals and have engaging debates and discussions. But more importantly, you will be able to influence change for the better."



Shaun

"I volunteer for Healthwatch North Yorkshire because I like the concept of *"taking the nation's pulse"* by talking to patients about their health and social care experiences. By talking to people and gathering these experiences we can highlight health inequalities that would only become apparent after long periods or harmful incidents."



Agnes

"I became a trustee of Healthwatch North Yorkshire because as a parent of a child with a hearing impairment we have benefited for several years from the support and care of the NHS, and I wanted to give something back. Being a trustee has allowed me to see the importance that Healthwatch has in improving local care."



Do you feel inspired?

We are always on the lookout for new volunteers, so please get in touch today.



www.healthwatchnorthyorkshire.co.uk

[01423 788 128](tel:01423788128)

admin@hwny.co.uk

Finance and future priorities

To help us carry out our work we receive funding from our local authority under the Health and Social Care Act 2012.

Income		Expenditure	
Funding received from local authority	£167,459	Staff costs	£146,160
Additional funding	£17,600	Operational costs	£12,773
		Support and administration	£11,611
Total income	£185,059	Total expenditure	£170,544

Our priorities for 2022–23

- 1. Work with partners across social care, including care homes, to listen to those people delivering & receiving care to support service improvements.** Including our enter & view programme and exploring the impact of workforce shortages on people and services.
- 2. Listen to and gather the views of younger people to ensure they help to influence the design, delivery & commissioning of services they receive.** Involving, for example younger people, mental health providers and educational colleges.
- 3. Listen to & gather the views & experiences of people to ensure they help to improve the provision & delivery of health & care services.** Prioritising work around NHS dental provision, helping people to receive the right health information for their needs, and ensuring that people have improved access and understanding of continence services.
- 4. Work with key stakeholders & organisations to support & influence improvements in health & care services.** Including working with the newly established Integrated Care Systems in Humber & North Yorkshire and West Yorkshire (includes Craven).

Next steps

The pandemic has shone a stark light on the impact of existing inequalities when using health and care services, highlighting the importance of championing the voices of those who all too often go unheard.

Over the coming years, our goal is to help reduce these inequalities by making sure your voice is heard, and decision makers reduce the barriers you face, regardless of whether that's because of where you live, income or race.

Statutory statement

About us

Healthwatch England, 2 Redman Place, Stratford, E20 1JQ.

Healthwatch North Yorkshire uses the Healthwatch Trademark when undertaking our statutory activities as covered by the licence agreement.



The way we work

Our Healthwatch board consists of 7 trustees who work on a voluntary basis to provide direction, oversight and scrutiny of our activities. Our board ensures that decisions about priority areas of work reflect the concerns and interests of our diverse local community. Through 2021/22 the board met ten times and made decisions on matters such as the recruitment of new trustees, our work with the new ICSs, and agreeing work priorities, such as working with care homes and younger people. The board also provided support and direction to the CEO and team.

We ensure wider public involvement in deciding our work priorities. This includes for example speaking with and involving our volunteers, using the feedback and issues that we have received to help shape our decisions. Listening to our partners and stakeholders in health and social care, as well as considering the opinions and concerns of those people and communities who are seldom heard or unrepresented.

Methods and systems used across the year's work to obtain people's views and experience.

We use a wide range of approaches to ensure that as many people as possible can provide us with insight about their experience of health and care services. During 2021/22 we have been available by phone, by email, provided a web-form on our website, attended virtual meetings of community groups and forums, provided our own virtual activities and engaged with the public through social media, outdoor events and community networks.

We ensure that this annual report is made available to as many members of the public and partner organisations as possible. We will publish it on our website, promote it across our engagement networks, share it on social media and with our volunteers, and promote it via our newsletters.

Responses to our reports and recommendations

We received much feedback and praise from health and social care providers, managers and commissioners about the reports and briefings that we shared with them. On the majority of occasions our findings and recommendations have been discussed and acted upon and have helped to influence service changes.

This year, due to the COVID-19 pandemic, we did not make use of our Enter and View powers. Consequently, no recommendations or other actions resulted from this area of activity. We will, however, be undertaking Enter and Views in the coming year.

Health and Wellbeing Board

Healthwatch North Yorkshire is represented on the North Yorkshire Health and Wellbeing Board by Ashley Green, Chief Executive Officer. During 2021/22 our representative has effectively carried out this role by contributing to discussions around strategic priorities and public involvement. Ashley has brought public insight and issues to the Board, including the effect that a lack of NHS dentists is having on the oral health of people in North Yorkshire.

2021-2022 Outcomes

Projects, Reports and Briefings	Impact
<p>NHS dentistry in North Yorkshire: A review of public feedback 2020 – 2021 (Aug 2021).</p>	<ol style="list-style-type: none"> 1. We received an increased media interest as a result of this report, including interviews with BBC radio York and Greatest Hits Yorkshire. 2. We were invited to join the procurement process for new NHS services. This involved joining the procurement panel, with a focus on engagement and accessibility. 3. The findings contributed to the establishment of a dental working group for West Yorkshire and Harrogate Health and Care Partnership. 4. The findings contributed to the work of North Yorkshire County Council Health Scrutiny Board. 5. We were invited to join a newly established Humber and North Yorkshire NHSE dental network.
<p>Covid-19 in North Yorkshire April – July 2021 (Sep 2021).</p>	<ol style="list-style-type: none"> 1. This report was shared with key stakeholders across the county, including the North Yorkshire County Council Covid outbreak advisory group. 2. The Vale of York CCG used the findings on GP services to contribute to their primary care development.
<p>Mandatory vaccinations in Care Homes – Briefing (Sep 2021).</p>	<ol style="list-style-type: none"> 1. This briefing was welcomed by North Yorkshire County Council and supported their ongoing work around care home provision and development. 2. We had significant media coverage and were interviewed on Yorkshire Coast News radio station.

Project / Activity Area	Impact
Public engagement in Scarborough and Robin Hood's Bay (Sep 2021).	<ol style="list-style-type: none"> 1. NHSE&I acted upon the public views we gathered on dentistry, for example in the provision of preventative dentistry for future commissioning of services.
Pulse report: public delays to treatment (Nov 2021).	<ol style="list-style-type: none"> 1. The report contributed to discussions within the Humber and North Yorkshire Health and Care partnership to improve waiting times and support people manage their health.
Pulse briefing: the public experiences of GP appointments (Dec 2021).	<ol style="list-style-type: none"> 1. This briefing led to discussions with North Yorkshire CCG and Vale of York CCG to explore wider engagement with the public around primary care provision and health professional access. 2. Our insight supported digital media campaigns by both the CCG's. 3. The briefing was shared and discussed at the Humber Coast and Vale digital inclusion partnership.
Care home's and COVID-19: lessons from an unprecedented time (Jan 2022).	<ol style="list-style-type: none"> 1. The report received praise from the North Yorkshire County Council and from the Independent Care group. 2. It was used as a tool to contribute to positive stories to attract and retrain social care staff and it was shared across the care sector to promote good practice.
Being healthy: ideas and reflections from Scarborough (Jan 2022).	<ol style="list-style-type: none"> 1. This report acted to support future work by the Healthier Communities programme in Scarborough by identifying public need and service development. 2. The report was presented and discussed at the NHS Scarborough and Ryedale Partnership Board.
Pulse report: the public experience of mental health and well-being (Feb 2022).	<ol style="list-style-type: none"> 1. We were interviewed by BBC Look North and local Greatest Hits Radio Yorkshire. 2. The report was discussed with Tees, Esk and Wear Valley NHS Foundation Trust (who deliver mental health services across the county), and the findings contributed to the community mental health transformation programme.

healthwatch

North Yorkshire

Healthwatch North Yorkshire
Jesmond House
Harrogate
HG1 5PX

t: 01423 788 128
e: www.healthwatchnorthyorkshire.co.uk
E: admin@hwny.co.uk
FREEPOST: HEALTHWATCHNORTHYORKSHIRE

 @HealthwatchNorthYorkshire

 [Facebook.com/HealthwatchNorthYorkshire](https://www.facebook.com/HealthwatchNorthYorkshire)

 HealthwatchNY

 Healthwatch North Yorkshire

CHARITY REGISTRATION NUMBER: 1171152

Healthwatch North Yorkshire
Unaudited Financial Statements
31 March 2022

IAN CRISOP ACCOUNTANCY
Chartered accountants
Unit 1, Borough House Business Centre,
5 Borough Road, Richmond,
North Yorkshire
DL10 4SX

Healthwatch North Yorkshire

Financial Statements

Year ended 31 March 2022

	Page
Trustees' annual report	1
Independent examiner's report to the trustees	4
Statement of financial activities	5
Statement of financial position	6
Notes to the financial statements	7
The following pages do not form part of the financial statements	
Detailed statement of financial activities	15
Notes to the detailed statement of financial activities	16

Healthwatch North Yorkshire

Trustees' Annual Report

Year ended 31 March 2022

The trustees present their report and the unaudited financial statements of the charity for the year ended 31 March 2022.

Reference and administrative details

Registered charity name	Healthwatch North Yorkshire
Charity registration number	1171152
Principal office	Jesmond House 33 Victoria Avenue Harrogate North Yorkshire

The trustees

J Bromfield	
R Peacock	
A F Crutchard	
P Southgate	
J Cunningham	
L Adams	(Appointed 11 February 2022)
L V Wolstenholme	(Appointed 11 February 2022)

Independent examiner	Mr R I Crisop FCA Unit 1, Borough House Business Centre, 5 Borough Road, Richmond, North Yorkshire DL10 4SX
-----------------------------	---

Structure, governance and management

The charity is a Charitable Incorporated Organisation (CIO) registered with the Charity Commission on 17th January 2017. The charity is managed by the board of trustees. Trustees are appointed for a term of 3 years.

New trustees receive an induction and briefing on their legal obligations under charitable law and the content of the constitution as well as management committee papers to familiarise themselves with their role and responsibilities.

Funding is granted through a grant from North Yorkshire County Council and earned income for time limited projects.

Healthwatch North Yorkshire

Trustees' Annual Report *(continued)*

Year ended 31 March 2022

Objectives and activities

The objects of the charity are:

- providing information and advice to the general public about local health and social care services;
- making the views and experiences of members of the general public known to health and social care providers and commissioners;
- enabling local people to have a voice in the development, delivery, improvement and equality of access to local health and care services and facilities; and
- providing training and the development of skills for volunteers and the wider community in understanding, scrutinising, reviewing and monitoring local health and care services and facilities.

Trustees have considered the Charity Commission's guidance on public benefit and believe that Healthwatch North Yorkshire meets the public benefit requirements in delivering the activities that contribute to the objects of the charity. The achievements are set out in this report detailing how we deliver our charitable objects and who the beneficiaries are.

Achievements and performance

This report highlights the key achievements of the charity in this year of operation and how it has met its charitable objectives.

Providing information and advice to the general public about local health and social care services

We engaged with a diverse wide range of voluntary organisations reaching older people, families and children, mental health users, veterans and carers. We engaged with the public via market stall events, fayres, summer shows and public sector consultation events.

Making the views and experiences of members of the general public known to health and social care providers and commissioners

Healthwatch North Yorkshire is a member of North Yorkshire Health & Wellbeing Board directly feeding back views and experiences to commissioners in health and social care. We have worked closely with local health and social care providers attending meetings at a strategic level and operational level. Our trustees, staff and volunteers attended public consultation events to hear public opinion and ensure those opinions are heard.

Enabling local people to have a voice in the development, delivery, improvement and equality of access to local health and care services and facilities

Providing training and the development of skills for volunteers and the wider community in understanding, scrutinising, reviewing and monitoring local health and care services and facilities

Healthwatch North Yorkshire

Trustees' Annual Report *(continued)*

Year ended 31 March 2022

Financial review

The trustees are satisfied with the financial position of the charity.

Reserves policy

Healthwatch North Yorkshire will work towards ensuring unrestricted funds are equivalent to 3 months running costs. This is to ensure we can provide financial stability and the means for the development of our required activities. The Board will annually review the amount of reserves that are required to ensure that they are adequate to fulfill our continuing obligations.

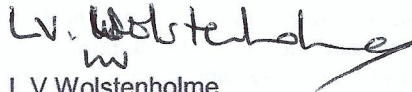
The trustees' annual report was approved on 16 January 2023 and signed on behalf of the board of trustees by:



J Bromfield
Trustee



L Adams
Trustee



L V Wolstenholme
Trustee

Healthwatch North Yorkshire

Independent Examiner's Report to the Trustees of Healthwatch North Yorkshire Year ended 31 March 2022

I report to the trustees on my examination of the financial statements of Healthwatch North Yorkshire ('the charity') for the year ended 31 March 2022.

Responsibilities and basis of report

As the trustees of the charity you are responsible for the preparation of the financial statements in accordance with the requirements of the Charities Act 2011 ('the Act').

I report in respect of my examination of the charity's financial statements carried out under section 145 of the 2011 Act and in carrying out my examination I have followed all the applicable Directions given by the Charity Commission under section 145(5)(b) of the Act.

Independent examiner's statement

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

1. accounting records were not kept in respect of the charity as required by section 130 of the Act; or
2. the financial statements do not accord with those records; or
3. the financial statements do not comply with the applicable requirements concerning the form and content of accounts set out in the Charities (Accounts and Reports) Regulations 2008 other than any requirement that the accounts give a 'true and fair' view which is not a matter considered as part of an independent examination.

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



Mr R I Crisop FCA
Independent Examiner

Unit 1, Borough House Business Centre,
5 Borough Road, Richmond,
North Yorkshire
DL10 4SX

16 January 2023

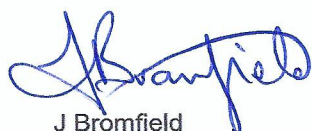
Healthwatch North Yorkshire

Statement of Financial Position

31 March 2022


	Note	2022 £	£	2021 £
Fixed assets				
Tangible fixed assets	11		3,060	5,757
Current assets				
Debtors	12	-		1,167
Cash at bank and in hand		<u>152,604</u>		<u>135,807</u>
		<u>152,604</u>		<u>136,974</u>
Creditors: amounts falling due within one year	13	<u>636</u>		<u>636</u>
Net current assets			<u>151,968</u>	<u>136,338</u>
Total assets less current liabilities			<u>155,028</u>	<u>142,095</u>
Net assets			<u>155,028</u>	<u>142,095</u>
Funds of the charity				
Unrestricted funds			<u>155,028</u>	<u>142,095</u>
Total charity funds	15		<u>155,028</u>	<u>142,095</u>

These financial statements were approved by the board of trustees and authorised for issue on 16 January 2023, and are signed on behalf of the board by:



J Bromfield
Trustee

L Adams
Trustee



L V Wolstenholme
Trustee

The notes on pages 7 to 13 form part of these financial statements.

Healthwatch North Yorkshire

Statement of Financial Activities

Year ended 31 March 2022

		2022		2021
	Note	Unrestricted funds £	Total funds £	Total funds £
Income and endowments				
Donations and legacies	4	185,059	185,059	167,459
Total income		<u>185,059</u>	<u>185,059</u>	<u>167,459</u>
Expenditure				
Expenditure on charitable activities	5,6	172,126	172,126	135,004
Total expenditure		<u>172,126</u>	<u>172,126</u>	<u>135,004</u>
Net income and net movement in funds		<u>12,933</u>	<u>12,933</u>	<u>32,455</u>
Reconciliation of funds				
Total funds brought forward		142,095	142,095	109,640
Total funds carried forward		<u>155,028</u>	<u>155,028</u>	<u>142,095</u>

The statement of financial activities includes all gains and losses recognised in the year. All income and expenditure derive from continuing activities.

The notes on pages 7 to 13 form part of these financial statements.

Healthwatch North Yorkshire

Notes to the Financial Statements

Year ended 31 March 2022

1. General information

The charity is a public benefit entity and a registered charity in England and Wales and is unincorporated. The address of the principal office is Jesmond House, 33 Victoria Avenue, Harrogate North Yorkshire, HG1 5QE.

2. Statement of compliance

These financial statements have been prepared in compliance with FRS 102, 'The Financial Reporting Standard applicable in the UK and the Republic of Ireland', the 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) (Charities SORP (FRS 102)) and the Charities Act 2011.

3. Accounting policies

Basis of preparation

The financial statements have been prepared on the historical cost basis, as modified by the revaluation of certain financial assets and liabilities and investment properties measured at fair value through income or expenditure.

The financial statements are prepared in sterling, which is the functional currency of the entity.

Going concern

There are no material uncertainties about the charity's ability to continue.

Judgements and key sources of estimation uncertainty

The preparation of the financial statements requires management to make judgements, estimates and assumptions that affect the amounts reported. These estimates and judgements are continually reviewed and are based on experience and other factors, including expectations of future events that are believed to be reasonable under the circumstances.

Fund accounting

Unrestricted funds are available for use at the discretion of the trustees to further any of the charity's purposes.

Designated funds are unrestricted funds earmarked by the trustees for particular future project or commitment.

Restricted funds are subjected to restrictions on their expenditure declared by the donor or through the terms of an appeal, and fall into one of two sub-classes: restricted income funds or endowment funds.

Healthwatch North Yorkshire

Notes to the Financial Statements *(continued)*

Year ended 31 March 2022

3. Accounting policies *(continued)*

Incoming resources

All incoming resources are included in the statement of financial activities when entitlement has passed to the charity; it is probable that the economic benefits associated with the transaction will flow to the charity and the amount can be reliably measured. The following specific policies are applied to particular categories of income:

- income from donations or grants is recognised when there is evidence of entitlement to the gift, receipt is probable and its amount can be measured reliably.
- legacy income is recognised when receipt is probable and entitlement is established.
- income from donated goods is measured at the fair value of the goods unless this is impractical to measure reliably, in which case the value is derived from the cost to the donor or the estimated resale value. Donated facilities and services are recognised in the accounts when received if the value can be reliably measured. No amounts are included for the contribution of general volunteers.
- income from contracts for the supply of services is recognised with the delivery of the contracted service. This is classified as unrestricted funds unless there is a contractual requirement for it to be spent on a particular purpose and returned if unspent, in which case it may be regarded as restricted.

Resources expended

Expenditure is recognised on an accruals basis as a liability is incurred. Expenditure includes any VAT which cannot be fully recovered, and is classified under headings of the statement of financial activities to which it relates:

- expenditure on raising funds includes the costs of all fundraising activities, events, non-charitable trading activities, and the sale of donated goods.
- expenditure on charitable activities includes all costs incurred by a charity in undertaking activities that further its charitable aims for the benefit of its beneficiaries, including those support costs and costs relating to the governance of the charity apportioned to charitable activities.
- other expenditure includes all expenditure that is neither related to raising funds for the charity nor part of its expenditure on charitable activities.

All costs are allocated to expenditure categories reflecting the use of the resource. Direct costs attributable to a single activity are allocated directly to that activity. Shared costs are apportioned between the activities they contribute to on a reasonable, justifiable and consistent basis.

Tangible assets

Tangible assets are initially recorded at cost, and subsequently stated at cost less any accumulated depreciation and impairment losses. Any tangible assets carried at revalued amounts are recorded at the fair value at the date of revaluation less any subsequent accumulated depreciation and subsequent accumulated impairment losses.

Healthwatch North Yorkshire

Notes to the Financial Statements *(continued)*

Year ended 31 March 2022

3. Accounting policies *(continued)*

Tangible assets *(continued)*

An increase in the carrying amount of an asset as a result of a revaluation, is recognised in other recognised gains and losses, unless it reverses a charge for impairment that has previously been recognised as expenditure within the statement of financial activities. A decrease in the carrying amount of an asset as a result of revaluation, is recognised in other recognised gains and losses, except to which it offsets any previous revaluation gain, in which case the loss is shown within other recognised gains and losses on the statement of financial activities.

Depreciation

Depreciation is calculated so as to write off the cost or valuation of an asset, less its residual value, over the useful economic life of that asset as follows:

Fixtures, equipment etc. - 20% straight line

Impairment of fixed assets

A review for indicators of impairment is carried out at each reporting date, with the recoverable amount being estimated where such indicators exist. Where the carrying value exceeds the recoverable amount, the asset is impaired accordingly. Prior impairments are also reviewed for possible reversal at each reporting date.

For the purposes of impairment testing, when it is not possible to estimate the recoverable amount of an individual asset, an estimate is made of the recoverable amount of the cash-generating unit to which the asset belongs. The cash-generating unit is the smallest identifiable group of assets that includes the asset and generates cash inflows that largely independent of the cash inflows from other assets or groups of assets.

For impairment testing of goodwill, the goodwill acquired in a business combination is, from the acquisition date, allocated to each of the cash-generating units that are expected to benefit from the synergies of the combination, irrespective of whether other assets or liabilities of the charity are assigned to those units.

Financial instruments

A financial asset or a financial liability is recognised only when the charity becomes a party to the contractual provisions of the instrument.

Basic financial instruments are initially recognised at the amount receivable or payable including any related transaction costs.

Current assets and current liabilities are subsequently measured at the cash or other consideration expected to be paid or received and not discounted.

Debt instruments are subsequently measured at amortised cost.

Where investments in shares are publicly traded or their fair value can otherwise be measured reliably, the investment is subsequently measured at fair value with changes in fair value recognised in income and expenditure. All other such investments are subsequently measured at cost less impairment.

Healthwatch North Yorkshire

Notes to the Financial Statements *(continued)*

Year ended 31 March 2022

3. Accounting policies *(continued)*

Financial instruments *(continued)*

Other financial instruments, including derivatives, are initially recognised at fair value, unless payment for an asset is deferred beyond normal business terms or financed at a rate of interest that is not a market rate, in which case the asset is measured at the present value of the future payments discounted at a market rate of interest for a similar debt instrument.

Other financial instruments are subsequently measured at fair value, with any changes recognised in the statement of financial activities, with the exception of hedging instruments in a designated hedging relationship.

Financial assets that are measured at cost or amortised cost are reviewed for objective evidence of impairment at the end of each reporting date. If there is objective evidence of impairment, an impairment loss is recognised under the appropriate heading in the statement of financial activities in which the initial gain was recognised.

For all equity instruments regardless of significance, and other financial assets that are individually significant, these are assessed individually for impairment. Other financial assets are either assessed individually or grouped on the basis of similar credit risk characteristics.

Any reversals of impairment are recognised immediately, to the extent that the reversal does not result in a carrying amount of the financial asset that exceeds what the carrying amount would have been had the impairment not previously been recognised.

Defined contribution plans

Contributions to defined contribution plans are recognised as an expense in the period in which the related service is provided. Prepaid contributions are recognised as an asset to the extent that the prepayment will lead to a reduction in future payments or a cash refund.

When contributions are not expected to be settled wholly within 12 months of the end of the reporting date in which the employees render the related service, the liability is measured on a discounted present value basis. The unwinding of the discount is recognised as an expense in the period in which it arises.

4. Donations and legacies

	Unrestricted Funds £	Total Funds 2022 £	Unrestricted Funds £	Total Funds 2021 £
Grants				
NYCC service grant	167,459	167,459	167,459	167,459
Other grants	17,600	17,600	—	—
	<u>185,059</u>	<u>185,059</u>	<u>167,459</u>	<u>167,459</u>

5. Expenditure on charitable activities by fund type

	Unrestricted Funds £	Total Funds 2022 £	Unrestricted Funds £	Total Funds 2021 £
Charitable activity	<u>172,126</u>	<u>172,126</u>	<u>135,004</u>	<u>135,004</u>

Healthwatch North Yorkshire

Notes to the Financial Statements *(continued)*

Year ended 31 March 2022

6. Expenditure on charitable activities by activity type

	Activities undertaken directly £	Total funds 2022 £	Total fund 2021 £
Charitable activity	<u>172,126</u>	<u>172,126</u>	<u>135,004</u>

7. Net income

Net income is stated after charging/(crediting):

	2022 £	2021 £
Depreciation of tangible fixed assets	<u>2,697</u>	<u>2,697</u>

8. Independent examination fees

	2022 £	2021 £
Fees payable to the independent examiner for: Independent examination of the financial statements	<u>660</u>	<u>636</u>

9. Staff costs

The average head count of employees during the year was 5 (2021: 5).

No employee received employee benefits of more than £60,000 during the year (2021: Nil).

10. Trustee remuneration and expenses

No remuneration or other benefits from employment with the charity or a related entity were received by the trustees.

11. Tangible fixed assets

	Equipment £	Total £
Cost		
At 1 April 2021 and 31 March 2022	<u>14,207</u>	<u>14,207</u>
Depreciation		
At 1 April 2021	8,450	8,450
Charge for the year	2,697	2,697
At 31 March 2022	<u>11,147</u>	<u>11,147</u>
Carrying amount		
At 31 March 2022	<u>3,060</u>	<u>3,060</u>
At 31 March 2021	<u>5,757</u>	<u>5,757</u>

Healthwatch North Yorkshire

Notes to the Financial Statements *(continued)*

Year ended 31 March 2022

12. Debtors

	2022	2021
	£	£
Prepayments and accrued income	—	<u>1,167</u>

13. Creditors: amounts falling due within one year

	2022	2021
	£	£
Accruals and deferred income	<u>636</u>	<u>636</u>

14. Pensions and other post retirement benefits

Defined contribution plans

The amount recognised in income or expenditure as an expense in relation to defined contribution plans was £3,184 (2021: £1,854).

15. Analysis of charitable funds

Unrestricted funds

	At 1 April 2021	Income £	Expenditure £	At 31 March 2022
	£	£	£	£
General funds	<u>142,095</u>	<u>185,059</u>	<u>(172,126)</u>	<u>155,028</u>

	At 1 April 2020	Income £	Expenditure £	At 31 March 2021
	£	£	£	£
General funds	<u>109,640</u>	<u>167,459</u>	<u>(135,004)</u>	<u>142,095</u>

Healthwatch North Yorkshire

Notes to the Financial Statements *(continued)*

Year ended 31 March 2022

16. Analysis of net assets between funds

	Unrestricted Funds	Total Funds
	£	£
Tangible fixed assets	3,060	3,060
Current assets	152,604	152,604
Creditors less than 1 year	(636)	(636)
Net assets	<u>155,028</u>	<u>155,028</u>

	Unrestricted Funds	Total Funds
	£	£
Tangible fixed assets	5,757	5,757
Current assets	136,974	136,974
Creditors less than 1 year	(636)	(636)
Net assets	<u>142,095</u>	<u>142,095</u>

Healthwatch North Yorkshire

Management Information

Year ended 31 March 2022

The following pages do not form part of the financial statements.

Healthwatch North Yorkshire

Detailed Statement of Financial Activities

Year ended 31 March 2022

	2022 £	2021 £
Income and endowments		
Donations and legacies		
NYCC service grant	167,459	167,459
Other grants	17,600	—
	<u>185,059</u>	<u>167,459</u>
Total income	<u>185,059</u>	<u>167,459</u>
Expenditure		
Expenditure on charitable activities		
Wages/salaries inc fees	140,922	113,915
Pension costs	3,184	1,854
Subs & publications	1,902	643
Sundry expenses	176	150
Insurance	1,503	1,067
Staff travel and expenses	3,581	2,279
Repairs and software maintenance	6,556	3,718
Volunteer travel expenses	72	73
Legal, professional and consultancy fees	2,407	5,271
Trustees expenses	560	436
Office rent, broadband and phone	3,341	1,687
Depreciation	2,697	2,697
Bank charges	96	69
Printing, stationery and postage	3,306	317
Marketing and publicity	353	165
Room hire and hospitality	1,470	663
	<u>172,126</u>	<u>135,004</u>
Total expenditure	<u>172,126</u>	<u>135,004</u>
Net income	<u>12,933</u>	<u>32,455</u>

Healthwatch North Yorkshire

Notes to the Detailed Statement of Financial Activities

Year ended 31 March 2022

	2022	2021
	£	£
Expenditure on charitable activities		
Activity type 1		
<i>Activities undertaken directly</i>		
Wages/salaries inc fees	140,922	113,915
Pension costs	3,184	1,854
Subs & publications	1,902	643
Sundry expenses	176	150
Insurance	1,503	1,067
Staff travel and expenses	3,581	2,279
Repairs and software maintenance	6,556	3,718
Volunteer travel expenses	72	73
Legal, professional and consultancy fees	2,407	5,271
Trustees expenses	560	436
Office rent, broadband and phone	3,341	1,687
Depreciation	2,697	2,697
Bank charges	96	69
Printing, stationery and postage	3,306	317
Marketing and publicity	353	165
Room hire and hospitality	1,470	663
	<u>172,126</u>	<u>135,004</u>
Expenditure on charitable activities	<u><u>172,126</u></u>	<u><u>135,004</u></u>

CHARITY REGISTRATION NUMBER: 1171152

Healthwatch North Yorkshire
Unaudited Financial Statements
31 March 2022

IAN CRISOP ACCOUNTANCY
Chartered accountants
Unit 1, Borough House Business Centre,
5 Borough Road, Richmond,
North Yorkshire
DL10 4SX

Healthwatch North Yorkshire

Financial Statements

Year ended 31 March 2022

	Page
Trustees' annual report	1
Independent examiner's report to the trustees	4
Statement of financial activities	5
Statement of financial position	6
Notes to the financial statements	7
The following pages do not form part of the financial statements	
Detailed statement of financial activities	15
Notes to the detailed statement of financial activities	16

Healthwatch North Yorkshire

Trustees' Annual Report

Year ended 31 March 2022

The trustees present their report and the unaudited financial statements of the charity for the year ended 31 March 2022.

Reference and administrative details

Registered charity name	Healthwatch North Yorkshire
Charity registration number	1171152
Principal office	Jesmond House 33 Victoria Avenue Harrogate North Yorkshire

The trustees

J Bromfield	
R Peacock	
A F Crutchard	
P Southgate	
J Cunningham	
L Adams	(Appointed 11 February 2022)
L V Wolstenholme	(Appointed 11 February 2022)

Independent examiner	Mr R I Crisop FCA Unit 1, Borough House Business Centre, 5 Borough Road, Richmond, North Yorkshire DL10 4SX
-----------------------------	---

Structure, governance and management

The charity is a Charitable Incorporated Organisation (CIO) registered with the Charity Commission on 17th January 2017. The charity is managed by the board of trustees. Trustees are appointed for a term of 3 years.

New trustees receive an induction and briefing on their legal obligations under charitable law and the content of the constitution as well as management committee papers to familiarise themselves with their role and responsibilities.

Funding is granted through a grant from North Yorkshire County Council and earned income for time limited projects.

Healthwatch North Yorkshire

Trustees' Annual Report *(continued)*

Year ended 31 March 2022

Objectives and activities

The objects of the charity are:

- providing information and advice to the general public about local health and social care services;
- making the views and experiences of members of the general public known to health and social care providers and commissioners;
- enabling local people to have a voice in the development, delivery, improvement and equality of access to local health and care services and facilities; and
- providing training and the development of skills for volunteers and the wider community in understanding, scrutinising, reviewing and monitoring local health and care services and facilities.

Trustees have considered the Charity Commission's guidance on public benefit and believe that Healthwatch North Yorkshire meets the public benefit requirements in delivering the activities that contribute to the objects of the charity. The achievements are set out in this report detailing how we deliver our charitable objects and who the beneficiaries are.

Achievements and performance

This report highlights the key achievements of the charity in this year of operation and how it has met its charitable objectives.

Providing information and advice to the general public about local health and social care services

We engaged with a diverse wide range of voluntary organisations reaching older people, families and children, mental health users, veterans and carers. We engaged with the public via market stall events, fayres, summer shows and public sector consultation events.

Making the views and experiences of members of the general public known to health and social care providers and commissioners

Healthwatch North Yorkshire is a member of North Yorkshire Health & Wellbeing Board directly feeding back views and experiences to commissioners in health and social care. We have worked closely with local health and social care providers attending meetings at a strategic level and operational level. Our trustees, staff and volunteers attended public consultation events to hear public opinion and ensure those opinions are heard.

Enabling local people to have a voice in the development, delivery, improvement and equality of access to local health and care services and facilities

Providing training and the development of skills for volunteers and the wider community in understanding, scrutinising, reviewing and monitoring local health and care services and facilities

Healthwatch North Yorkshire

Trustees' Annual Report *(continued)*

Year ended 31 March 2022

Financial review

The trustees are satisfied with the financial position of the charity.

Reserves policy

Healthwatch North Yorkshire will work towards ensuring unrestricted funds are equivalent to 3 months running costs. This is to ensure we can provide financial stability and the means for the development of our required activities. The Board will annually review the amount of reserves that are required to ensure that they are adequate to fulfill our continuing obligations.

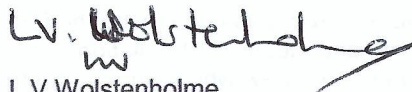
The trustees' annual report was approved on 16 January 2023 and signed on behalf of the board of trustees by:



J Bromfield
Trustee



L Adams
Trustee



L V Wolstenholme
Trustee

Healthwatch North Yorkshire

Independent Examiner's Report to the Trustees of Healthwatch North Yorkshire Year ended 31 March 2022

I report to the trustees on my examination of the financial statements of Healthwatch North Yorkshire ('the charity') for the year ended 31 March 2022.

Responsibilities and basis of report

As the trustees of the charity you are responsible for the preparation of the financial statements in accordance with the requirements of the Charities Act 2011 ('the Act').

I report in respect of my examination of the charity's financial statements carried out under section 145 of the 2011 Act and in carrying out my examination I have followed all the applicable Directions given by the Charity Commission under section 145(5)(b) of the Act.

Independent examiner's statement

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

1. accounting records were not kept in respect of the charity as required by section 130 of the Act; or
2. the financial statements do not accord with those records; or
3. the financial statements do not comply with the applicable requirements concerning the form and content of accounts set out in the Charities (Accounts and Reports) Regulations 2008 other than any requirement that the accounts give a 'true and fair' view which is not a matter considered as part of an independent examination.

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



Mr R I Crisop FCA
Independent Examiner

Unit 1, Borough House Business Centre,
5 Borough Road, Richmond,
North Yorkshire
DL10 4SX

16 January 2023

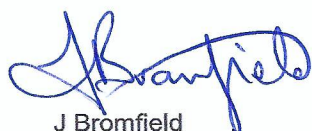
Healthwatch North Yorkshire

Statement of Financial Position

31 March 2022

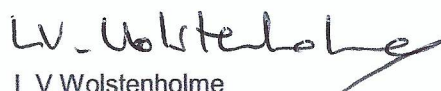
	Note	2022 £	£	2021 £
Fixed assets				
Tangible fixed assets	11		3,060	5,757
Current assets				
Debtors	12	-		1,167
Cash at bank and in hand		<u>152,604</u>		<u>135,807</u>
		<u>152,604</u>		<u>136,974</u>
Creditors: amounts falling due within one year	13	<u>636</u>		<u>636</u>
Net current assets			<u>151,968</u>	<u>136,338</u>
Total assets less current liabilities			<u>155,028</u>	<u>142,095</u>
Net assets			<u>155,028</u>	<u>142,095</u>
Funds of the charity				
Unrestricted funds			<u>155,028</u>	<u>142,095</u>
Total charity funds	15		<u>155,028</u>	<u>142,095</u>

These financial statements were approved by the board of trustees and authorised for issue on 16 January 2023, and are signed on behalf of the board by:



J Bromfield
Trustee

L Adams
Trustee



L V Wolstenholme
Trustee

The notes on pages 7 to 13 form part of these financial statements.

Healthwatch North Yorkshire

Statement of Financial Activities

Year ended 31 March 2022

		2022		2021
	Note	Unrestricted funds £	Total funds £	Total funds £
Income and endowments				
Donations and legacies	4	185,059	185,059	167,459
Total income		<u>185,059</u>	<u>185,059</u>	<u>167,459</u>
Expenditure				
Expenditure on charitable activities	5,6	172,126	172,126	135,004
Total expenditure		<u>172,126</u>	<u>172,126</u>	<u>135,004</u>
Net income and net movement in funds		<u>12,933</u>	<u>12,933</u>	<u>32,455</u>
Reconciliation of funds				
Total funds brought forward		142,095	142,095	109,640
Total funds carried forward		<u>155,028</u>	<u>155,028</u>	<u>142,095</u>

The statement of financial activities includes all gains and losses recognised in the year. All income and expenditure derive from continuing activities.

The notes on pages 7 to 13 form part of these financial statements.

Healthwatch North Yorkshire

Notes to the Financial Statements

Year ended 31 March 2022

1. General information

The charity is a public benefit entity and a registered charity in England and Wales and is unincorporated. The address of the principal office is Jesmond House, 33 Victoria Avenue, Harrogate North Yorkshire, HG1 5QE.

2. Statement of compliance

These financial statements have been prepared in compliance with FRS 102, 'The Financial Reporting Standard applicable in the UK and the Republic of Ireland', the 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) (Charities SORP (FRS 102)) and the Charities Act 2011.

3. Accounting policies

Basis of preparation

The financial statements have been prepared on the historical cost basis, as modified by the revaluation of certain financial assets and liabilities and investment properties measured at fair value through income or expenditure.

The financial statements are prepared in sterling, which is the functional currency of the entity.

Going concern

There are no material uncertainties about the charity's ability to continue.

Judgements and key sources of estimation uncertainty

The preparation of the financial statements requires management to make judgements, estimates and assumptions that affect the amounts reported. These estimates and judgements are continually reviewed and are based on experience and other factors, including expectations of future events that are believed to be reasonable under the circumstances.

Fund accounting

Unrestricted funds are available for use at the discretion of the trustees to further any of the charity's purposes.

Designated funds are unrestricted funds earmarked by the trustees for particular future project or commitment.

Restricted funds are subjected to restrictions on their expenditure declared by the donor or through the terms of an appeal, and fall into one of two sub-classes: restricted income funds or endowment funds.

Healthwatch North Yorkshire

Notes to the Financial Statements *(continued)*

Year ended 31 March 2022

3. Accounting policies *(continued)*

Incoming resources

All incoming resources are included in the statement of financial activities when entitlement has passed to the charity; it is probable that the economic benefits associated with the transaction will flow to the charity and the amount can be reliably measured. The following specific policies are applied to particular categories of income:

- income from donations or grants is recognised when there is evidence of entitlement to the gift, receipt is probable and its amount can be measured reliably.
- legacy income is recognised when receipt is probable and entitlement is established.
- income from donated goods is measured at the fair value of the goods unless this is impractical to measure reliably, in which case the value is derived from the cost to the donor or the estimated resale value. Donated facilities and services are recognised in the accounts when received if the value can be reliably measured. No amounts are included for the contribution of general volunteers.
- income from contracts for the supply of services is recognised with the delivery of the contracted service. This is classified as unrestricted funds unless there is a contractual requirement for it to be spent on a particular purpose and returned if unspent, in which case it may be regarded as restricted.

Resources expended

Expenditure is recognised on an accruals basis as a liability is incurred. Expenditure includes any VAT which cannot be fully recovered, and is classified under headings of the statement of financial activities to which it relates:

- expenditure on raising funds includes the costs of all fundraising activities, events, non-charitable trading activities, and the sale of donated goods.
- expenditure on charitable activities includes all costs incurred by a charity in undertaking activities that further its charitable aims for the benefit of its beneficiaries, including those support costs and costs relating to the governance of the charity apportioned to charitable activities.
- other expenditure includes all expenditure that is neither related to raising funds for the charity nor part of its expenditure on charitable activities.

All costs are allocated to expenditure categories reflecting the use of the resource. Direct costs attributable to a single activity are allocated directly to that activity. Shared costs are apportioned between the activities they contribute to on a reasonable, justifiable and consistent basis.

Tangible assets

Tangible assets are initially recorded at cost, and subsequently stated at cost less any accumulated depreciation and impairment losses. Any tangible assets carried at revalued amounts are recorded at the fair value at the date of revaluation less any subsequent accumulated depreciation and subsequent accumulated impairment losses.

Healthwatch North Yorkshire

Notes to the Financial Statements *(continued)*

Year ended 31 March 2022

3. Accounting policies *(continued)*

Tangible assets *(continued)*

An increase in the carrying amount of an asset as a result of a revaluation, is recognised in other recognised gains and losses, unless it reverses a charge for impairment that has previously been recognised as expenditure within the statement of financial activities. A decrease in the carrying amount of an asset as a result of revaluation, is recognised in other recognised gains and losses, except to which it offsets any previous revaluation gain, in which case the loss is shown within other recognised gains and losses on the statement of financial activities.

Depreciation

Depreciation is calculated so as to write off the cost or valuation of an asset, less its residual value, over the useful economic life of that asset as follows:

Fixtures, equipment etc. - 20% straight line

Impairment of fixed assets

A review for indicators of impairment is carried out at each reporting date, with the recoverable amount being estimated where such indicators exist. Where the carrying value exceeds the recoverable amount, the asset is impaired accordingly. Prior impairments are also reviewed for possible reversal at each reporting date.

For the purposes of impairment testing, when it is not possible to estimate the recoverable amount of an individual asset, an estimate is made of the recoverable amount of the cash-generating unit to which the asset belongs. The cash-generating unit is the smallest identifiable group of assets that includes the asset and generates cash inflows that largely independent of the cash inflows from other assets or groups of assets.

For impairment testing of goodwill, the goodwill acquired in a business combination is, from the acquisition date, allocated to each of the cash-generating units that are expected to benefit from the synergies of the combination, irrespective of whether other assets or liabilities of the charity are assigned to those units.

Financial instruments

A financial asset or a financial liability is recognised only when the charity becomes a party to the contractual provisions of the instrument.

Basic financial instruments are initially recognised at the amount receivable or payable including any related transaction costs.

Current assets and current liabilities are subsequently measured at the cash or other consideration expected to be paid or received and not discounted.

Debt instruments are subsequently measured at amortised cost.

Where investments in shares are publicly traded or their fair value can otherwise be measured reliably, the investment is subsequently measured at fair value with changes in fair value recognised in income and expenditure. All other such investments are subsequently measured at cost less impairment.

Healthwatch North Yorkshire

Notes to the Financial Statements *(continued)*

Year ended 31 March 2022

3. Accounting policies *(continued)*

Financial instruments *(continued)*

Other financial instruments, including derivatives, are initially recognised at fair value, unless payment for an asset is deferred beyond normal business terms or financed at a rate of interest that is not a market rate, in which case the asset is measured at the present value of the future payments discounted at a market rate of interest for a similar debt instrument.

Other financial instruments are subsequently measured at fair value, with any changes recognised in the statement of financial activities, with the exception of hedging instruments in a designated hedging relationship.

Financial assets that are measured at cost or amortised cost are reviewed for objective evidence of impairment at the end of each reporting date. If there is objective evidence of impairment, an impairment loss is recognised under the appropriate heading in the statement of financial activities in which the initial gain was recognised.

For all equity instruments regardless of significance, and other financial assets that are individually significant, these are assessed individually for impairment. Other financial assets are either assessed individually or grouped on the basis of similar credit risk characteristics.

Any reversals of impairment are recognised immediately, to the extent that the reversal does not result in a carrying amount of the financial asset that exceeds what the carrying amount would have been had the impairment not previously been recognised.

Defined contribution plans

Contributions to defined contribution plans are recognised as an expense in the period in which the related service is provided. Prepaid contributions are recognised as an asset to the extent that the prepayment will lead to a reduction in future payments or a cash refund.

When contributions are not expected to be settled wholly within 12 months of the end of the reporting date in which the employees render the related service, the liability is measured on a discounted present value basis. The unwinding of the discount is recognised as an expense in the period in which it arises.

4. Donations and legacies

	Unrestricted Funds £	Total Funds 2022 £	Unrestricted Funds £	Total Funds 2021 £
Grants				
NYCC service grant	167,459	167,459	167,459	167,459
Other grants	17,600	17,600	–	–
	<u>185,059</u>	<u>185,059</u>	<u>167,459</u>	<u>167,459</u>

5. Expenditure on charitable activities by fund type

	Unrestricted Funds £	Total Funds 2022 £	Unrestricted Funds £	Total Funds 2021 £
Charitable activity	<u>172,126</u>	<u>172,126</u>	<u>135,004</u>	<u>135,004</u>

Healthwatch North Yorkshire

Notes to the Financial Statements *(continued)*

Year ended 31 March 2022

6. Expenditure on charitable activities by activity type

	Activities undertaken directly £	Total funds 2022 £	Total fund 2021 £
Charitable activity	<u>172,126</u>	<u>172,126</u>	<u>135,004</u>

7. Net income

Net income is stated after charging/(crediting):

	2022 £	2021 £
Depreciation of tangible fixed assets	<u>2,697</u>	<u>2,697</u>

8. Independent examination fees

	2022 £	2021 £
Fees payable to the independent examiner for: Independent examination of the financial statements	<u>660</u>	<u>636</u>

9. Staff costs

The average head count of employees during the year was 5 (2021: 5).

No employee received employee benefits of more than £60,000 during the year (2021: Nil).

10. Trustee remuneration and expenses

No remuneration or other benefits from employment with the charity or a related entity were received by the trustees.

11. Tangible fixed assets

	Equipment £	Total £
Cost		
At 1 April 2021 and 31 March 2022	<u>14,207</u>	<u>14,207</u>
Depreciation		
At 1 April 2021	8,450	8,450
Charge for the year	2,697	2,697
At 31 March 2022	<u>11,147</u>	<u>11,147</u>
Carrying amount		
At 31 March 2022	<u>3,060</u>	<u>3,060</u>
At 31 March 2021	<u>5,757</u>	<u>5,757</u>

Healthwatch North Yorkshire

Notes to the Financial Statements *(continued)*

Year ended 31 March 2022

12. Debtors

	2022	2021
	£	£
Prepayments and accrued income	—	<u>1,167</u>

13. Creditors: amounts falling due within one year

	2022	2021
	£	£
Accruals and deferred income	<u>636</u>	<u>636</u>

14. Pensions and other post retirement benefits

Defined contribution plans

The amount recognised in income or expenditure as an expense in relation to defined contribution plans was £3,184 (2021: £1,854).

15. Analysis of charitable funds

Unrestricted funds

	At 1 April 2021	Income £	Expenditure £	At 31 March 2022
	£	£	£	£
General funds	<u>142,095</u>	<u>185,059</u>	<u>(172,126)</u>	<u>155,028</u>

	At 1 April 2020	Income £	Expenditure £	At 31 March 2021
	£	£	£	£
General funds	<u>109,640</u>	<u>167,459</u>	<u>(135,004)</u>	<u>142,095</u>

Healthwatch North Yorkshire

Notes to the Financial Statements *(continued)*

Year ended 31 March 2022

16. Analysis of net assets between funds

	Unrestricted Funds	Total Funds
	£	£
Tangible fixed assets	3,060	3,060
Current assets	152,604	152,604
Creditors less than 1 year	(636)	(636)
Net assets	<u>155,028</u>	<u>155,028</u>

	Unrestricted Funds	Total Funds
	£	£
Tangible fixed assets	5,757	5,757
Current assets	136,974	136,974
Creditors less than 1 year	(636)	(636)
Net assets	<u>142,095</u>	<u>142,095</u>

Healthwatch North Yorkshire

Management Information

Year ended 31 March 2022

The following pages do not form part of the financial statements.

Healthwatch North Yorkshire

Detailed Statement of Financial Activities

Year ended 31 March 2022

	2022 £	2021 £
Income and endowments		
Donations and legacies		
NYCC service grant	167,459	167,459
Other grants	17,600	—
	<u>185,059</u>	<u>167,459</u>
Total income	<u>185,059</u>	<u>167,459</u>
Expenditure		
Expenditure on charitable activities		
Wages/salaries inc fees	140,922	113,915
Pension costs	3,184	1,854
Subs & publications	1,902	643
Sundry expenses	176	150
Insurance	1,503	1,067
Staff travel and expenses	3,581	2,279
Repairs and software maintenance	6,556	3,718
Volunteer travel expenses	72	73
Legal, professional and consultancy fees	2,407	5,271
Trustees expenses	560	436
Office rent, broadband and phone	3,341	1,687
Depreciation	2,697	2,697
Bank charges	96	69
Printing, stationery and postage	3,306	317
Marketing and publicity	353	165
Room hire and hospitality	1,470	663
	<u>172,126</u>	<u>135,004</u>
Total expenditure	<u>172,126</u>	<u>135,004</u>
Net income	<u>12,933</u>	<u>32,455</u>

Healthwatch North Yorkshire

Notes to the Detailed Statement of Financial Activities

Year ended 31 March 2022

	2022	2021
	£	£
Expenditure on charitable activities		
Activity type 1		
<i>Activities undertaken directly</i>		
Wages/salaries inc fees	140,922	113,915
Pension costs	3,184	1,854
Subs & publications	1,902	643
Sundry expenses	176	150
Insurance	1,503	1,067
Staff travel and expenses	3,581	2,279
Repairs and software maintenance	6,556	3,718
Volunteer travel expenses	72	73
Legal, professional and consultancy fees	2,407	5,271
Trustees expenses	560	436
Office rent, broadband and phone	3,341	1,687
Depreciation	2,697	2,697
Bank charges	96	69
Printing, stationery and postage	3,306	317
Marketing and publicity	353	165
Room hire and hospitality	1,470	663
	<u>172,126</u>	<u>135,004</u>
Expenditure on charitable activities	<u><u>172,126</u></u>	<u><u>135,004</u></u>

HEALTHWATCH NORTH YORKSHIRE

England & Wales - Charity number 1171152

Accounts



Facing the challenges together

Putting the public voice first

Contents

Message from our Chair	3
About us	4
Highlights from our year	5
Dentistry: Putting the patient first	6
Accessing Services	8
Responding to COVID-19	10
Volunteers	12
Finances	14
Next steps & thank you	15

Message from our Chair

Following our re-structure, we have had an incredibly challenging, yet remarkably successful year.

Our priorities have included connecting with people about their experiences during COVID-19, and with those who are not always included in discussions about their health and social care needs.

We have greatly improved our output when compared to previous years; from the people we have engaged with, to the quality and number of reports we have produced.

The input and commitment from our volunteers have been crucial in achieving these improvements. Also, the hard work and dedication from our staff who have remained positive during an incredibly difficult year. We would like to say a big thank you to everyone who has been involved with Healthwatch North Yorkshire over the past year.



“With an almost entirely new staff team, more volunteers and Trustees and with strong and growing partnerships we are optimistic and looking forward with renewed energy to representing and influencing health and social care matters that affect the people of North Yorkshire.”

Top successes:

The increase in our website and social media traffic has been significant and we have provided quality information and advice to the public. We have produced three COVID reports detailing the issues and challenges and have identified potential improvements.

We have produced reports on accessing GPs, hospital appointments, GP websites, dental and social care. We have shared these with health and social care providers and commissioners and have also initiated discussions around improvements to service provision.

We have undertaken collaborative work with CCGs, NHS Trusts and the community and voluntary sector, and intend to build upon these relationships in the coming year. One example is our partnership with West Yorkshire & Harrogate Health & Care Partnership, supported by our volunteer network, to produce an Engagement & Consultation Mapping report.



Chris Brackley
Chair of Board of Trustees.



About us

Here to make health and care better

We are the independent champion for people who use health and social care services in North Yorkshire. We are here to find out what matters to people and help make sure your views shape the support you need, by sharing these views with those who have the power to make change happen.

Helping you to find the information you need

We help people find the information they need about services in their area. This has been vital during the pandemic with the ever-changing environment and restrictions limiting people’s access to health and social care services.

Our goals



1 Supporting you to have your say

We want more people to get the information they need to take control of their health and care, make informed decisions and shape the services that support them.



2 Providing a high quality service

We want everyone who shares their experience or seeks advice from us to get a high quality service and to understand the difference their views make.



3 Ensuring your views help improve health & care

We want more services to use your views to shape the health and care support you need today and in the future.



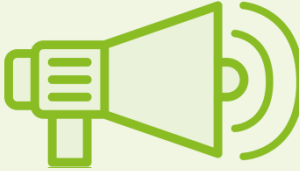
“Over the coming year our priorities will remain on gathering the public’s views on how we all recover from the pandemic (people and services). We will continue to work with healthcare organisations, the voluntary sector and the public to help improve the lives and wellbeing of communities who aren’t always listened to or involved in discussions about their health or social care.”

Ashley Green, Chief Executive Officer at Healthwatch North Yorkshire.

Highlights from our year

Find out about our resources and how we have engaged and supported people in 2020-21.

Reaching out



We heard from

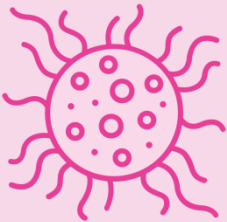
1,018 people

this year about their experiences of health and social care.

74,128 people

visited our website this year, 139% more people than the previous year.

Responding to the pandemic



We engaged with and signposted

393

people during the COVID-19 pandemic this year.

Making a difference to care



We produced

8 reports

about the improvements people would like to see to health and social care services. This included access to services in rural communities, GP website access and the inclusion of the LGBTQ+ in health and social care.

4 intelligence briefings

about the improvements people would like to see to health and social care services. Including dentistry, test-and-trace and the COVID-19 vaccine.

Health and care that works for you



88 volunteers

helped us to carry out our work. In total, they contributed to 50 days across the year to support our work.

We employ 5 members of staff

and 4 out of 5 members of the team joined Healthwatch North Yorkshire in the last year.

We received

£167,625 in funding

from our local authority in 2020-21, 16% more than the previous year.



Dentistry: Putting the patient first



Access to NHS dental services

Thanks to people sharing their experiences of dentistry we have been in frequent conversation with NHS dental commissioners for Yorkshire and the Humber over the past year.

Prior to the COVID-19 outbreak, we were hearing on a regular basis from many people who were struggling to find a dental surgery taking on new NHS patients in North Yorkshire. This situation was undoubtedly exacerbated by the pandemic. In our July 2020 COVID-19 report we found that patients wanted better access to accurate information on their dental services. We heard from patients who were unsure if their appointments were going ahead and from patients who had repeatedly had their routine appointments cancelled.

In October 2020 we undertook a 12-month review of all the dentistry feedback in preparation for a meeting with NHS dental commissioners in Yorkshire and Humber. We heard from patients who could still not access a dentist after two, six and in one case – ten years. The long waiting times was particularly alarming, but also, some patients were having to travel hundreds of miles to access a dentist.

In addition to the many people unable to register with an NHS dentist, the closure of Bondgate Dental Practice in Helmsley in September left people who had been registered as NHS patients without a local surgery. Following representations made to the regional dental commissioner by Healthwatch North Yorkshire on this issue, NHS England wrote to former Bondgate patients informing them that three local practices were now providing additional appointments solely for those who had been registered with the closed practice.



Now: Ongoing dentistry issues

Thanks to patients sharing their experience of dentistry during the pandemic, we have been able to keep making the argument for greater provision and improvements in services.

Between February 2020 – February 2021 we received 89 pieces of feedback regarding dentistry. Increasing from 7.38% to 11.27% of contacts on the rolling 12 months' basis since our last review in October.

The main issues included:

- Lack of access to an NHS dentist.
- Frustrations at being pushed towards private appointments.
- Concern about children's oral health.

A significant proportion of our calls regarding a lack of available dentists were from people seeking help in finding a dentist. People told us of the negative financial and emotional strain this situation put on them. One person told us how they had contacted 40 dental practices with no luck.



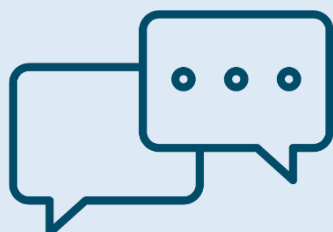
"We are a family of four and all our appointments have been moved only to be cancelled on several occasions. Now we have been put on a waiting list. My employer goes to the same dental practice, has the same dental surgeon but pays into a private plan and none of his appointments have been cancelled."

The closure of several dental practices in North Yorkshire is one of the issues that members of the public have told us about over the past few months. When combined with the increased waiting times for routine appointments for those fortunate enough to be NHS dental patients, this is a very troubling direction of travel in terms of dentistry provision across the county.

Unfortunately, part of the problem is funding. The funding contract run by NHS England had not been revisited for over a decade, and simply there was not enough funding available to meet the requirements of the population. However, the contract has recently been revisited and dentists are currently expected to fulfil 60% of their NHS contracts and must continue to prioritise emergency appointments. This policy will run until the end of August 2021.

We encourage members of the public to keep getting in touch with us about dentistry to enable us to keep making the argument for greater provision and improvements of services.

Share your views with us



If you have a query about a health and social care service, or need help with where you can go to access further support, get in touch. Don't struggle alone. Healthwatch North Yorkshire is here for you.

 www.healthwatch.org/northyorkshire

 **01904 552 687**

 **admin@hwny.co.uk**



Accessing services: Putting the patient first



Accessing services during the pandemic

Making sure that patients have access to correct and up-to-date information and advice has been a priority for Healthwatch North Yorkshire since the start of the pandemic.

Access to information is a key theme that emerged in the feedback we were receiving at the start of 2020, and with the pandemic evolving rapidly it was important that we acted quickly.

As a result of the feedback from the public we produced three COVID-19 reports to highlight the common themes that we were hearing about. These included:

1. Accessing NHS services and appointments.
2. Living with a long-term condition, such as diabetes or a lung condition.
3. Challenges around seeing a loved one in a care home.
4. Accessing dental care.

These are just some of the many challenges people faced due to the COVID-19 pandemic. It became clear, early-on in the pandemic that accessing services was a huge issue for many people across North Yorkshire. We have shared the reports with those responsible for commissioning and delivering services in North Yorkshire.



Accessing GP services during the pandemic

Over the last 12 months we have witnessed huge changes across the health and social care system in North Yorkshire as a result of the COVID-19 pandemic.

Patient feedback that we have gathered since the start of the pandemic has demonstrated the importance of GP practices — with appointments and access being main areas of concern for members of the public in North Yorkshire. The pandemic has changed the way we have accessed health and social care information, placing a larger reliance on the internet and technology at home. Many people have welcomed this new way of receiving information and support, whilst others have found it a challenge.



“Doctors not seeing you in surgeries even now lockdown has almost lifted. Only doing phone consultations is not helpful, as my problem was mobility and because of not being able to go outside I could hardly walk. Needed help with pain relief and it wasn't forthcoming.”

In our report '*GP Website Check-up*', our volunteers examined what information was being provided to the public, and how accessible the information was. We looked at whether the information fulfilled the public needs and if GP websites provided up-to-date COVID-19 information.

We found many great examples of GP websites providing crucial information for members of the public in North Yorkshire, but also examples of areas in need of improvement. For example, 87% of GP websites provided links to official NHS COVID-19 information. The majority of GP websites (93%) provided clear and helpful information about self-care and local support organisations. However, 16% of GP websites did not make it clear how to book an appointment, and less than half of the GP websites provided up-to-date information about their Patient Participant Group (PPG).

As a result of our report, Vale of York CCG have started to undertake their own audit to look at the clarity of information that is available on GP websites across York and North Yorkshire. They will use our recommendations to find where gaps are and create a 'website standard'.

Bradford and Craven PCCC (Primary Care Commissioning Committee) endorsed our recommendations and highlighted the inclusion of diversity. They are currently considering the use of easy read facilities on the websites, and taking up a number of our recommendations.

North Yorkshire CCG have told us they found the report very informative and relevant. They will be working with their Primary Care Network's (PCN) to support GP practices to make the necessary changes to their websites, where relevant.



To find out more >>>
healthwatchnorthyorkshire.co.uk/news-and-reports



Responding to COVID-19

Healthwatch plays an important role in helping people to get the information they need, especially through the pandemic. The insight we collect is shared with both Healthwatch England and local partners to ensure services are operating as best as possible during the pandemic.

This year we helped 393 people by:

- Providing the current advice on the COVID-19 response locally
- Linking people to reliable and up-to-date information
- Sharing relevant news and information about the vaccination programme
- Supporting the community volunteer response
- Helping people to access the services they need

Top four areas that people have contacted us about:



25% on GP services



21.2% on Dentistry



15.8% on Hospital Care



10.8% on Social Care

Case Study



Early in the pandemic, we heard from over 150 people about their experiences and the information they require during the COVID-19 pandemic. Our role became much more focused on providing people with clear, consistent and concise advice and information through articles on our website and social media to help address people’s concerns.

The key topics people were telling us about included:

1. Mental health
2. Access to services and information
3. Phone/online appointments
4. Patient transport



Contact us to get the information you need

If you have a query about a health and social care service, or need help with where you can go to access further support, get in touch. Don’t struggle alone. Healthwatch is here for you.



www.healthwatch.org/northyorkshire

01904 552 687

admin@hwny.co.uk



Volunteers

At Healthwatch North Yorkshire we are supported by 88 volunteers who help us find out what people think is working, and what improvements people would like to make to health and social care services.

This year our volunteers:

- Supported us in collecting feedback and signposting members of the public to the relevant services.
- Over the year our volunteers have helped us with several projects, this includes 37 days to produce our West Yorkshire and Harrogate Engagement Mapping project and 3 days for the GP website analysis.
- Translated health information into the Arabic language.
- Attended a variety of meetings to influence health and social care services, for example Whitby hospital.
- During lockdown they gathered experiences which helped us publish our COVID-19 briefings.



Volunteer – Beverley.

“I decided to become a volunteer as I believe the work Healthwatch North Yorkshire does is so important in improving health and social care services. My volunteering allows me to make a positive difference working on projects I find meaningful, whilst also giving me opportunities to develop my own personal and professional skills.”



Trustee – Pat.

“Having worked in the NHS for over forty years as a nurse, I was really pleased to join the Board of Healthwatch North Yorkshire in November 2019. Previously I worked as a Community Public Health nurse, where I worked with families and communities to help improve their health and wellbeing, and I’m particularly interested in work and projects that focus on reducing the health inequalities of different populations.”



Volunteer – Linda.

“I became a Healthwatch volunteer in October 2019, as I wanted to use the knowledge/skills developed over many years working within the NHS to help others - whilst also keeping myself up to date and involved with health and care services. Since then, I have undertaken a variety of volunteer roles and I can honestly say that, although they have been quite different, I have enjoyed every one of these and I have learned a lot.”



Volunteer with us

Are you feeling inspired? We are always on the lookout for new volunteers. If you are interested in volunteering, please get in touch with Lada Rotshtein at Lada.Rotshtein@hwny.co.uk



www.healthwatch.org/northyorkshire

01904 552 687

admin@hwny.co.uk

Finances

To help us carry out our work we receive funding from our local authority under the Health and Social Care Act 2012.

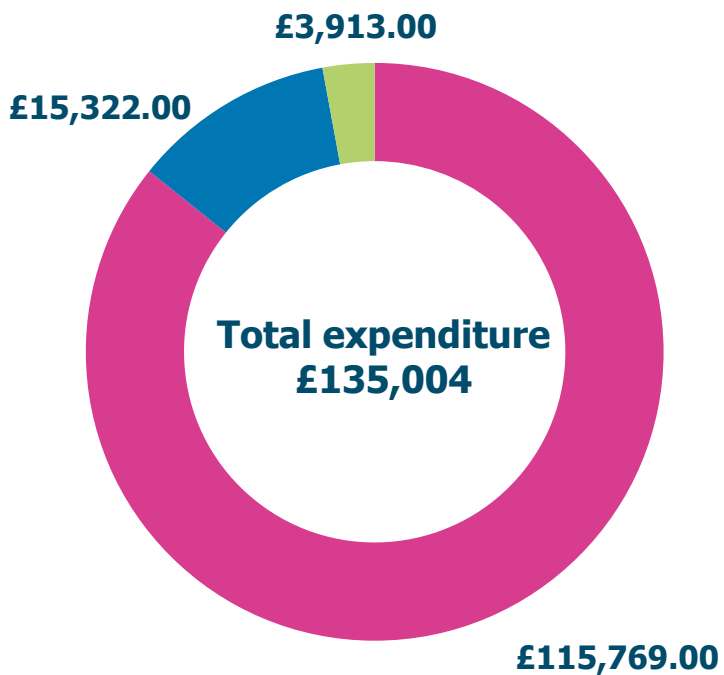
Income

- Funding received from local authority



Expenditure

- Staff costs
- Operational costs
- Support and administration



Next steps & thank you

Top three priorities for 2021-22

- Gather views from the public on COVID-19 recovery to support and influence service changes that will help improve patient experience and outcomes
- Focus our work in areas of health inequalities (such as Scarborough and Selby) to ensure the public's views are represented and effect positive change
- Improve our awareness and reach across North Yorkshire to ensure people know of us, contact us for advice and share their experiences with us

Next steps

The pandemic has greatly affected how we have all worked, and it has been a challenge for us at Healthwatch North Yorkshire to meet with and hear from all communities across the county. Most of our conversations have been by phone or video call, and whilst this has been important in ensuring that we continue to hear from people, we hope that as we move away from national COVID-19 restrictions we will be able to meet and speak with more people through community groups, networks etc.

We will continue to work with health and social care providers and commissioners to ensure that the work we undertook last year, such as our GP Website Check-up report and our Rural Communities micro-study, is continued and our recommendations are acted upon, where appropriate. Some of our future priorities, which the public have told us are important to them, include working with care homes to understand the changes made during the pandemic to ensure residents are supported, access to NHS dentistry and how we can help to improve this.

It is also important to us that we hear from those people who aren't always listened to or involved in discussions about their health or social care, so we will be re-doubling our efforts to ensure we reach out and listen to those communities, and particularly in areas of health inequalities. Our LGBTQ+ report that focused on people's experiences of using health and social care, published in June 2020, had a real impact on shining a light on issues that hadn't previously been heard, so we are keen to continue to help those communities who are seldom heard.



“We want to ensure that we hear from all members of the public in North Yorkshire – and a group we don't always hear from is younger people. So we will be doubling our efforts in the coming months to work with young people to hear their experiences and stories of how the NHS and social care supports them, and what improvements they would like to see.”



Statutory statements

About us

Healthwatch England, 2 Redman Place, Stratford, E20 1JQ.

Healthwatch North Yorkshire uses the Healthwatch Trademark when undertaking our statutory activities as covered by the licence agreement.

The way we work

Involvement of volunteers and lay people in our governance and decision-making.

Our Healthwatch board consists of 7 members who work on a voluntary basis to provide direction, oversight and scrutiny to our activities. Our board ensures that decisions about priority areas of work reflect the concerns and interests of our diverse local community. Through 2020/21 the board met regularly and made decisions on matters such as the work we have been undertaking around care homes and gathering public feedback on COVID-19 (plus staff recruitment, including a new Chief Executive Officer).

We ensure wider public involvement in deciding our work priorities. We use insight from information and signposting enquiries and intelligence gathered through direct contact with members of the public when thinking about and deciding our priorities.

Methods and systems used across the year’s work to obtain people’s views and experience.

We use a wide range of approaches to ensure that as many people as possible have the opportunity to provide us with insight about their experience of health and care services. During 2020/21 we have been available by phone, by email, provided a webform on our website, provided a feedback centre/rate and review system, attended virtual meetings of community groups and forums, provided our own virtual activities and engaged with the public through social media.

We are committed to taking additional steps to ensure we obtain the views of people from diverse backgrounds who are often not heard by health and care decision makers. In 2020, North Yorkshire County Council requested a piece of research to increase the understanding of experiences and needs of the LGBTQ+ community when accessing mental health support. This led to us publishing our report *‘LGBTQ+ People’s Experiences of Using Health and Social Care Services in North Yorkshire.’*

We will ensure that this annual report is made available to as many members of the public and partner organisations as possible. We will publish it on our website and share it with Healthwatch England.

2020-21 priorities

Examples of our 2020-21 priorities and how we achieved these, are included below:

Priority areas	Output & impact
Expand information and advice services to the public to support their needs	Reached over 700 monthly subscribers with our e-newsletter providing up to-date service information. Extended our social media followers to just under 2,500 people who we regularly provide information to. Our volunteer network had over 2,500 conversations with the public where they provided signposting advise.
Gather public views on their health & social care experiences during COVID-19	Produced 3 reports over the year that detailed the experiences of people receiving and accessing services during the pandemic, that were shared with and helped to influence conversations and decisions about services in North Yorkshire.
Monitor and contribute the patient voice to service developments and improvements	Worked with seldom heard communities in Scarborough to contribute to discussions around future paediatric services at Scarborough Hospital, and our volunteers were involved in the future design and plans for Whitby Hospital. Worked with the LGBTQ+ communities around the county to understand why this community experiences health inequalities.



Healthwatch North Yorkshire
The Centre @ Burnholme
Mossdale Avenue
York
YO31 0HA.

www.healthwatchnorthyorkshire.co.uk

t: 01904 552 687

e: admin@hwny.co.uk

 @HealthwatchNY

 Facebook.com/HealthwatchNY

 HealthwatchNY

 Healthwatch North Yorkshire

CHARITY REGISTRATION NUMBER: 1171152

Healthwatch North Yorkshire
Unaudited Financial Statements
31 March 2021

IAN CRISOP ACCOUNTANCY

Chartered accountants
Unit 1, Borough House Business Centre,
5 Borough Road, Richmond,
North Yorkshire
DL10 4SX

Healthwatch North Yorkshire

Financial Statements

Year ended 31 March 2021

	Page
Trustees' annual report	1
Independent examiner's report to the trustees	4
Statement of financial activities	5
Statement of financial position	6
Notes to the financial statements	7
The following pages do not form part of the financial statements	
Detailed statement of financial activities	15
Notes to the detailed statement of financial activities	16

Healthwatch North Yorkshire

Trustees' Annual Report

Year ended 31 March 2021

The trustees present their report and the unaudited financial statements of the charity for the year ended 31 March 2021.

Reference and administrative details

Registered charity name	Healthwatch North Yorkshire	
Charity registration number	1171152	
Principal office	The Centre @ Burnholme Mossdale Avenue York YO31 0HA	
The trustees	J Bromfield A Calvert R Peacock C G Brackley P Southgate J Cunningham A F Crutchard B A Proctor	(Retired 5 July 2020) (Appointed 28 February 2020) (Appointed 26 October 2020)
Independent examiner	Mr R I Crisop FCA Unit 1, Borough House Business Centre, 5 Borough Road, Richmond, North Yorkshire DL10 4SX	

Structure, governance and management

The charity is a Charitable Incorporated Organisation (CIO) registered with the Charity Commission on 17th January 2017. The charity is managed by the board of trustees. Trustees are appointed for a term of 3 years.

New trustees receive an induction and briefing on their legal obligations under charitable law and the content of the constitution as well as management committee papers to familiarise themselves with their role and responsibilities.

Funding is granted through a grant from North Yorkshire County Council and earned income for time limited projects.

Healthwatch North Yorkshire

Trustees' Annual Report *(continued)*

Year ended 31 March 2021

Objectives and activities

The objects of the charity are:

- providing information and advice to the general public about local health and social care services:
- making the views and experiences of members of the general public known to health and social care providers and commissioners;
- enabling local people to have a voice in the development, delivery, improvement and equality of access to local health and care services and facilities; and
- providing training and the development of skills for volunteers and the wider community in understanding, scrutinising, reviewing and monitoring local health and care services and facilities.

Trustees have considered the Charity Commission's guidance on public benefit and believe that Healthwatch North Yorkshire meets the public benefit requirements in delivering the activities that contribute to the objects of the charity. The achievements are set out in this report detailing how we deliver our charitable objects and who the beneficiaries are.

Achievements and performance

This report highlights the key achievements of the charity in this year of operation and how it has met its charitable objectives.

Providing information and advice to the general public about local health and social care services

We engaged with a diverse wide range of voluntary organisations reaching older people, families and children, mental health users, veterans and carers. We engaged with the public via market stall events, fayres, summer shows and public sector consultation events.

Making the views and experiences of members of the general public known to health and social care providers and commissioners

Healthwatch North Yorkshire is a member of North Yorkshire Health & Wellbeing Board directly feeding back views and experiences to commissioners in health and social care. We have worked closely with local health and social care providers attending meetings at a strategic level and operational level. Our trustees, staff and volunteers attended public consultation events to hear public opinion and ensure those opinions are heard.

Enabling local people to have a voice in the development, delivery, improvement and equality of access to local health and care services and facilities

Providing training and the development of skills for volunteers and the wider community in understanding, scrutinising, reviewing and monitoring local health and care services and facilities

We recruited 35 volunteers in this year making a total of 55 volunteers who supported and helped us to carry out our activities in this year.

Healthwatch North Yorkshire

Trustees' Annual Report *(continued)*

Year ended 31 March 2021

Financial review

The trustees are satisfied with the financial position of the charity.

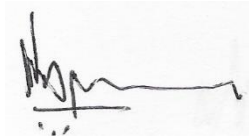
Reserves policy

Healthwatch North Yorkshire will work towards ensuring unrestricted funds are equivalent to 3 months running costs. This is to ensure we can provide financial stability and the means for the development of our required activities. The Board will annually review the amount of reserves that are required to ensure that they are adequate to fulfill our continuing obligations.

The trustees' annual report was approved on 5 July 2021 and signed on behalf of the board of trustees by:



J Bromfield
Trustee



C G Brackley
Trustee

Healthwatch North Yorkshire

Independent Examiner's Report to the Trustees of Healthwatch North Yorkshire Year ended 31 March 2021

I report to the trustees on my examination of the financial statements of Healthwatch North Yorkshire ('the charity') for the year ended 31 March 2021.

Responsibilities and basis of report

As the trustees of the charity you are responsible for the preparation of the financial statements in accordance with the requirements of the Charities Act 2011 ('the Act').

I report in respect of my examination of the charity's financial statements carried out under section 145 of the 2011 Act and in carrying out my examination I have followed all the applicable Directions given by the Charity Commission under section 145(5)(b) of the Act.

Independent examiner's statement

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

1. accounting records were not kept in respect of the charity as required by section 130 of the Act; or
2. the financial statements do not accord with those records; or
3. the financial statements do not comply with the applicable requirements concerning the form and content of accounts set out in the Charities (Accounts and Reports) Regulations 2008 other than any requirement that the accounts give a 'true and fair' view which is not a matter considered as part of an independent examination.

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



Mr R I Crisop FCA
Independent Examiner

Unit 1, Borough House Business Centre,
5 Borough Road, Richmond,
North Yorkshire
DL10 4SX

Healthwatch North Yorkshire

Statement of Financial Activities

Year ended 31 March 2021

		2021		2020
	Note	Unrestricted funds £	Total funds £	Total funds £
Income and endowments				
Donations and legacies	4	<u>167,459</u>	<u>167,459</u>	142,459
Charitable activities	5	<u>—</u>	<u>—</u>	18,265
Total income		<u>167,459</u>	<u>167,459</u>	<u>160,724</u>
Expenditure				
Expenditure on charitable activities	6,7	<u>135,004</u>	<u>135,004</u>	170,234
Total expenditure		<u>135,004</u>	<u>135,004</u>	<u>170,234</u>
Net income/(expenditure) and net movement in funds		<u>32,455</u>	<u>32,455</u>	<u>(9,510)</u>
Reconciliation of funds				
Total funds brought forward		<u>109,640</u>	<u>109,640</u>	119,150
Total funds carried forward		<u>142,095</u>	<u>142,095</u>	<u>109,640</u>

The statement of financial activities includes all gains and losses recognised in the year. All income and expenditure derive from continuing activities.

The notes on pages 7 to 13 form part of these financial statements.

Healthwatch North Yorkshire

Statement of Financial Position

31 March 2021

	Note	2021 £	£	2020 £
Fixed assets				
Tangible fixed assets	12		5,757	8,454
Current assets				
Debtors	13	1,167		–
Cash at bank and in hand		<u>135,807</u>		<u>105,517</u>
		136,974		105,517
Creditors: amounts falling due within one year	14	636		4,331
Net current assets			<u>136,338</u>	<u>101,186</u>
Total assets less current liabilities			<u>142,095</u>	<u>109,640</u>
Net assets			<u>142,095</u>	<u>109,640</u>
Funds of the charity				
Unrestricted funds			<u>142,095</u>	<u>109,640</u>
Total charity funds	16		<u>142,095</u>	<u>109,640</u>

These financial statements were approved by the board of trustees and authorised for issue on 5 July 2021, and are signed on behalf of the board by:

J Bromfield
Trustee

C G Brackley
Trustee

The notes on pages 7 to 13 form part of these financial statements.

Healthwatch North Yorkshire

Notes to the Financial Statements

Year ended 31 March 2021

1. General information

The charity is a public benefit entity and a registered charity in England and Wales and is unincorporated. The address of the principal office is The Centre @ Burnholme, Mossdale Avenue, York, YO31 0HA.

2. Statement of compliance

These financial statements have been prepared in compliance with FRS 102, 'The Financial Reporting Standard applicable in the UK and the Republic of Ireland', the 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) (Charities SORP (FRS 102)) and the Charities Act 2011.

3. Accounting policies

Basis of preparation

The financial statements have been prepared on the historical cost basis, as modified by the revaluation of certain financial assets and liabilities and investment properties measured at fair value through income or expenditure.

The financial statements are prepared in sterling, which is the functional currency of the entity.

Going concern

There are no material uncertainties about the charity's ability to continue.

Judgements and key sources of estimation uncertainty

The preparation of the financial statements requires management to make judgements, estimates and assumptions that affect the amounts reported. These estimates and judgements are continually reviewed and are based on experience and other factors, including expectations of future events that are believed to be reasonable under the circumstances.

Fund accounting

Unrestricted funds are available for use at the discretion of the trustees to further any of the charity's purposes.

Designated funds are unrestricted funds earmarked by the trustees for particular future project or commitment.

Restricted funds are subjected to restrictions on their expenditure declared by the donor or through the terms of an appeal, and fall into one of two sub-classes: restricted income funds or endowment funds.

Healthwatch North Yorkshire

Notes to the Financial Statements *(continued)*

Year ended 31 March 2021

3. Accounting policies *(continued)*

Incoming resources

All incoming resources are included in the statement of financial activities when entitlement has passed to the charity; it is probable that the economic benefits associated with the transaction will flow to the charity and the amount can be reliably measured. The following specific policies are applied to particular categories of income:

- income from donations or grants is recognised when there is evidence of entitlement to the gift, receipt is probable and its amount can be measured reliably.
- legacy income is recognised when receipt is probable and entitlement is established.
- income from donated goods is measured at the fair value of the goods unless this is impractical to measure reliably, in which case the value is derived from the cost to the donor or the estimated resale value. Donated facilities and services are recognised in the accounts when received if the value can be reliably measured. No amounts are included for the contribution of general volunteers.
- income from contracts for the supply of services is recognised with the delivery of the contracted service. This is classified as unrestricted funds unless there is a contractual requirement for it to be spent on a particular purpose and returned if unspent, in which case it may be regarded as restricted.

Resources expended

Expenditure is recognised on an accruals basis as a liability is incurred. Expenditure includes any VAT which cannot be fully recovered, and is classified under headings of the statement of financial activities to which it relates:

- expenditure on raising funds includes the costs of all fundraising activities, events, non-charitable trading activities, and the sale of donated goods.
- expenditure on charitable activities includes all costs incurred by a charity in undertaking activities that further its charitable aims for the benefit of its beneficiaries, including those support costs and costs relating to the governance of the charity apportioned to charitable activities.
- other expenditure includes all expenditure that is neither related to raising funds for the charity nor part of its expenditure on charitable activities.

All costs are allocated to expenditure categories reflecting the use of the resource. Direct costs attributable to a single activity are allocated directly to that activity. Shared costs are apportioned between the activities they contribute to on a reasonable, justifiable and consistent basis.

Tangible assets

Tangible assets are initially recorded at cost, and subsequently stated at cost less any accumulated depreciation and impairment losses. Any tangible assets carried at revalued amounts are recorded at the fair value at the date of revaluation less any subsequent accumulated depreciation and subsequent accumulated impairment losses.

Healthwatch North Yorkshire

Notes to the Financial Statements *(continued)*

Year ended 31 March 2021

3. Accounting policies *(continued)*

Tangible assets *(continued)*

An increase in the carrying amount of an asset as a result of a revaluation, is recognised in other recognised gains and losses, unless it reverses a charge for impairment that has previously been recognised as expenditure within the statement of financial activities. A decrease in the carrying amount of an asset as a result of revaluation, is recognised in other recognised gains and losses, except to which it offsets any previous revaluation gain, in which case the loss is shown within other recognised gains and losses on the statement of financial activities.

Depreciation

Depreciation is calculated so as to write off the cost or valuation of an asset, less its residual value, over the useful economic life of that asset as follows:

Fixtures, equipment etc. - 20% straight line

Impairment of fixed assets

A review for indicators of impairment is carried out at each reporting date, with the recoverable amount being estimated where such indicators exist. Where the carrying value exceeds the recoverable amount, the asset is impaired accordingly. Prior impairments are also reviewed for possible reversal at each reporting date.

For the purposes of impairment testing, when it is not possible to estimate the recoverable amount of an individual asset, an estimate is made of the recoverable amount of the cash-generating unit to which the asset belongs. The cash-generating unit is the smallest identifiable group of assets that includes the asset and generates cash inflows that largely independent of the cash inflows from other assets or groups of assets.

For impairment testing of goodwill, the goodwill acquired in a business combination is, from the acquisition date, allocated to each of the cash-generating units that are expected to benefit from the synergies of the combination, irrespective of whether other assets or liabilities of the charity are assigned to those units.

Financial instruments

A financial asset or a financial liability is recognised only when the charity becomes a party to the contractual provisions of the instrument.

Basic financial instruments are initially recognised at the amount receivable or payable including any related transaction costs.

Current assets and current liabilities are subsequently measured at the cash or other consideration expected to be paid or received and not discounted.

Debt instruments are subsequently measured at amortised cost.

Where investments in shares are publicly traded or their fair value can otherwise be measured reliably, the investment is subsequently measured at fair value with changes in fair value recognised in income and expenditure. All other such investments are subsequently measured at cost less impairment.

Healthwatch North Yorkshire

Notes to the Financial Statements *(continued)*

Year ended 31 March 2021

3. Accounting policies *(continued)*

Financial instruments *(continued)*

Other financial instruments, including derivatives, are initially recognised at fair value, unless payment for an asset is deferred beyond normal business terms or financed at a rate of interest that is not a market rate, in which case the asset is measured at the present value of the future payments discounted at a market rate of interest for a similar debt instrument.

Other financial instruments are subsequently measured at fair value, with any changes recognised in the statement of financial activities, with the exception of hedging instruments in a designated hedging relationship.

Financial assets that are measured at cost or amortised cost are reviewed for objective evidence of impairment at the end of each reporting date. If there is objective evidence of impairment, an impairment loss is recognised under the appropriate heading in the statement of financial activities in which the initial gain was recognised.

For all equity instruments regardless of significance, and other financial assets that are individually significant, these are assessed individually for impairment. Other financial assets are either assessed individually or grouped on the basis of similar credit risk characteristics.

Any reversals of impairment are recognised immediately, to the extent that the reversal does not result in a carrying amount of the financial asset that exceeds what the carrying amount would have been had the impairment not previously been recognised.

Defined contribution plans

Contributions to defined contribution plans are recognised as an expense in the period in which the related service is provided. Prepaid contributions are recognised as an asset to the extent that the prepayment will lead to a reduction in future payments or a cash refund.

When contributions are not expected to be settled wholly within 12 months of the end of the reporting date in which the employees render the related service, the liability is measured on a discounted present value basis. The unwinding of the discount is recognised as an expense in the period in which it arises.

4. Donations and legacies

	Unrestricted Funds £	Total Funds 2021 £	Unrestricted Funds £	Total Funds 2020 £
Grants				
NYCC service grant	<u>167,459</u>	<u>167,459</u>	<u>142,459</u>	<u>142,459</u>

5. Charitable activities

	Unrestricted Funds £	Total Funds 2021 £	Unrestricted Funds £	Total Funds 2020 £
Consultancy fees	<u>==</u>	<u>==</u>	<u>18,265</u>	<u>18,265</u>

Healthwatch North Yorkshire

Notes to the Financial Statements *(continued)*

Year ended 31 March 2021

6. Expenditure on charitable activities by fund type

	Unrestricted Funds £	Total Funds 2021 £	Unrestricted Funds £	Total Funds 2020 £
Charitable activity	<u>135,004</u>	<u>135,004</u>	<u>170,234</u>	<u>170,234</u>

7. Expenditure on charitable activities by activity type

	Activities undertaken directly £	Total funds 2021 £	Total fund 2020 £
Charitable activity	<u>135,004</u>	<u>135,004</u>	<u>170,234</u>

8. Net income/(expenditure)

Net income/(expenditure) is stated after charging/(crediting):

	2021 £	2020 £
Depreciation of tangible fixed assets	<u>2,697</u>	<u>2,697</u>

9. Independent examination fees

	2021 £	2020 £
Fees payable to the independent examiner for: Independent examination of the financial statements	<u>636</u>	<u>-</u>

10. Staff costs

The total staff costs and employee benefits for the reporting period are analysed as follows:

	2021 £	2020 £
Wages and salaries	113,915	102,976
Employer contributions to pension plans	<u>1,854</u>	<u>6,114</u>
	<u>115,769</u>	<u>109,090</u>

The average head count of employees during the year was 5 (2020: 6).

No employee received employee benefits of more than £60,000 during the year (2020: Nil).

11. Trustee remuneration and expenses

No remuneration or other benefits from employment with the charity or a related entity were received by the trustees.

Healthwatch North Yorkshire

Notes to the Financial Statements *(continued)*

Year ended 31 March 2021

12. Tangible fixed assets

	Equipment £	Total £
Cost		
At 1 April 2020 and 31 March 2021	<u>14,207</u>	<u>14,207</u>
Depreciation		
At 1 April 2020	5,753	5,753
Charge for the year	<u>2,697</u>	<u>2,697</u>
At 31 March 2021	<u>8,450</u>	<u>8,450</u>
Carrying amount		
At 31 March 2021	<u>5,757</u>	<u>5,757</u>
At 31 March 2020	<u>8,454</u>	<u>8,454</u>

13. Debtors

	2021 £	2020 £
Prepayments and accrued income	<u>1,167</u>	<u>—</u>

14. Creditors: amounts falling due within one year

	2021 £	2020 £
Accruals and deferred income	636	1,256
Other creditors	—	3,075
	<u>636</u>	<u>4,331</u>

15. Pensions and other post retirement benefits

Defined contribution plans

The amount recognised in income or expenditure as an expense in relation to defined contribution plans was £1,854 (2020: £6,114).

16. Analysis of charitable funds

Unrestricted funds

	At 1 April 2020 £	Income £	Expenditure £	At 31 March 2021 £
General funds	<u>109,640</u>	<u>167,459</u>	<u>(135,004)</u>	<u>142,095</u>

	At 1 April 2019 £	Income £	Expenditure £	At 31 March 2020 £
General funds	<u>119,150</u>	<u>160,724</u>	<u>(170,234)</u>	<u>109,640</u>

Healthwatch North Yorkshire

Notes to the Financial Statements *(continued)*

Year ended 31 March 2021

17. Analysis of net assets between funds

	Unrestricted Funds £	Total Funds 2021 £
Tangible fixed assets	5,757	5,757
Current assets	136,974	136,974
Creditors less than 1 year	(636)	(636)
Net assets	<u>142,095</u>	<u>142,095</u>

	Unrestricted Funds £	Total Funds 2020 £
Tangible fixed assets	8,454	8,454
Current assets	105,517	105,517
Creditors less than 1 year	(4,331)	(4,331)
Net assets	<u>109,640</u>	<u>109,640</u>

Healthwatch North Yorkshire

Management Information

Year ended 31 March 2021

The following pages do not form part of the financial statements.

Healthwatch North Yorkshire
Detailed Statement of Financial Activities
Year ended 31 March 2021

	2021 £	2020 £
Income and endowments		
Donations and legacies		
NYCC service grant	<u>167,459</u>	<u>142,459</u>
Charitable activities		
Consultancy fees	<u>—</u>	<u>18,265</u>
Total income	<u>167,459</u>	<u>160,724</u>
Expenditure		
Expenditure on charitable activities		
Wages/salaries inc fees	113,915	102,976
Pension costs	1,854	6,114
Subs and publications	643	112
Petty cash	—	230
Sundry expenses	150	581
Insurance	1,067	1,897
Staff travel and expenses	2,279	11,602
Repairs and software maintenance	3,718	4,913
Volunteer travel expenses	73	308
Legal, professional and consultancy fees	5,271	22,133
Trustees expenses	436	1,631
Office rent, broadband and phone	1,687	10,944
Depreciation	2,697	2,697
Bank charges	69	60
Printing, stationery and postage	317	870
Marketing and publicity	165	2,151
Room hire and hospitality	663	1,015
	<u>135,004</u>	<u>170,234</u>
Total expenditure	<u>135,004</u>	<u>170,234</u>
Net income/(expenditure)	<u>32,455</u>	<u>(9,510)</u>

Healthwatch North Yorkshire

Notes to the Detailed Statement of Financial Activities

Year ended 31 March 2021

	2021 £	2020 £
Expenditure on charitable activities		
Activity type 1		
Activities undertaken directly		
Wages/salaries inc fees	113,915	102,976
Pension costs	1,854	6,114
Subs & publications	643	112
Petty cash	-	230
Sundry expenses	150	581
Insurance	1,067	1,897
Staff travel and expenses	2,279	11,602
Repairs and software maintenance	3,718	4,913
Volunteer travel expenses	73	308
Legal, professional and consultancy fees	5,271	22,133
Trustees expenses	436	1,631
Office rent, broadband and phone	1,687	10,944
Depreciation	2,697	2,697
Bank charges	69	60
Printing, stationery and postage	317	870
Marketing and publicity	165	2,151
Room hire and hospitality	663	1,015
	<u>135,004</u>	<u>170,234</u>
Expenditure on charitable activities	<u>135,004</u>	<u>170,234</u>

CHARITY REGISTRATION NUMBER: 1171152

Healthwatch North Yorkshire
Unaudited Financial Statements
31 March 2021

IAN CRISOP ACCOUNTANCY

Chartered accountants
Unit 1, Borough House Business Centre,
5 Borough Road, Richmond,
North Yorkshire
DL10 4SX

Healthwatch North Yorkshire

Financial Statements

Year ended 31 March 2021

	Page
Trustees' annual report	1
Independent examiner's report to the trustees	4
Statement of financial activities	5
Statement of financial position	6
Notes to the financial statements	7
The following pages do not form part of the financial statements	
Detailed statement of financial activities	15
Notes to the detailed statement of financial activities	16

Healthwatch North Yorkshire

Trustees' Annual Report

Year ended 31 March 2021

The trustees present their report and the unaudited financial statements of the charity for the year ended 31 March 2021.

Reference and administrative details

Registered charity name	Healthwatch North Yorkshire	
Charity registration number	1171152	
Principal office	The Centre @ Burnholme Mossdale Avenue York YO31 0HA	
The trustees	J Bromfield A Calvert R Peacock C G Brackley P Southgate J Cunningham A F Crutchard B A Proctor	(Retired 5 July 2020) (Appointed 28 February 2020) (Appointed 26 October 2020)
Independent examiner	Mr R I Crisop FCA Unit 1, Borough House Business Centre, 5 Borough Road, Richmond, North Yorkshire DL10 4SX	

Structure, governance and management

The charity is a Charitable Incorporated Organisation (CIO) registered with the Charity Commission on 17th January 2017. The charity is managed by the board of trustees. Trustees are appointed for a term of 3 years.

New trustees receive an induction and briefing on their legal obligations under charitable law and the content of the constitution as well as management committee papers to familiarise themselves with their role and responsibilities.

Funding is granted through a grant from North Yorkshire County Council and earned income for time limited projects.

Healthwatch North Yorkshire

Trustees' Annual Report *(continued)*

Year ended 31 March 2021

Objectives and activities

The objects of the charity are:

- providing information and advice to the general public about local health and social care services:
- making the views and experiences of members of the general public known to health and social care providers and commissioners;
- enabling local people to have a voice in the development, delivery, improvement and equality of access to local health and care services and facilities; and
- providing training and the development of skills for volunteers and the wider community in understanding, scrutinising, reviewing and monitoring local health and care services and facilities.

Trustees have considered the Charity Commission's guidance on public benefit and believe that Healthwatch North Yorkshire meets the public benefit requirements in delivering the activities that contribute to the objects of the charity. The achievements are set out in this report detailing how we deliver our charitable objects and who the beneficiaries are.

Achievements and performance

This report highlights the key achievements of the charity in this year of operation and how it has met its charitable objectives.

Providing information and advice to the general public about local health and social care services

We engaged with a diverse wide range of voluntary organisations reaching older people, families and children, mental health users, veterans and carers. We engaged with the public via market stall events, fayres, summer shows and public sector consultation events.

Making the views and experiences of members of the general public known to health and social care providers and commissioners

Healthwatch North Yorkshire is a member of North Yorkshire Health & Wellbeing Board directly feeding back views and experiences to commissioners in health and social care. We have worked closely with local health and social care providers attending meetings at a strategic level and operational level. Our trustees, staff and volunteers attended public consultation events to hear public opinion and ensure those opinions are heard.

Enabling local people to have a voice in the development, delivery, improvement and equality of access to local health and care services and facilities

Providing training and the development of skills for volunteers and the wider community in understanding, scrutinising, reviewing and monitoring local health and care services and facilities

We recruited 35 volunteers in this year making a total of 55 volunteers who supported and helped us to carry out our activities in this year.

Healthwatch North Yorkshire

Trustees' Annual Report *(continued)*

Year ended 31 March 2021

Financial review

The trustees are satisfied with the financial position of the charity.

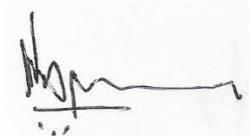
Reserves policy

Healthwatch North Yorkshire will work towards ensuring unrestricted funds are equivalent to 3 months running costs. This is to ensure we can provide financial stability and the means for the development of our required activities. The Board will annually review the amount of reserves that are required to ensure that they are adequate to fulfill our continuing obligations.

The trustees' annual report was approved on 5 July 2021 and signed on behalf of the board of trustees by:



J Bromfield
Trustee



C G Brackley
Trustee

Healthwatch North Yorkshire

Independent Examiner's Report to the Trustees of Healthwatch North Yorkshire Year ended 31 March 2021

I report to the trustees on my examination of the financial statements of Healthwatch North Yorkshire ('the charity') for the year ended 31 March 2021.

Responsibilities and basis of report

As the trustees of the charity you are responsible for the preparation of the financial statements in accordance with the requirements of the Charities Act 2011 ('the Act').

I report in respect of my examination of the charity's financial statements carried out under section 145 of the 2011 Act and in carrying out my examination I have followed all the applicable Directions given by the Charity Commission under section 145(5)(b) of the Act.

Independent examiner's statement

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

1. accounting records were not kept in respect of the charity as required by section 130 of the Act; or
2. the financial statements do not accord with those records; or
3. the financial statements do not comply with the applicable requirements concerning the form and content of accounts set out in the Charities (Accounts and Reports) Regulations 2008 other than any requirement that the accounts give a 'true and fair' view which is not a matter considered as part of an independent examination.

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



Mr R I Crisop FCA
Independent Examiner

Unit 1, Borough House Business Centre,
5 Borough Road, Richmond,
North Yorkshire
DL10 4SX

Healthwatch North Yorkshire

Statement of Financial Activities

Year ended 31 March 2021

		2021		2020
	Note	Unrestricted funds £	Total funds £	Total funds £
Income and endowments				
Donations and legacies	4	<u>167,459</u>	<u>167,459</u>	142,459
Charitable activities	5	<u>—</u>	<u>—</u>	18,265
Total income		<u>167,459</u>	<u>167,459</u>	<u>160,724</u>
Expenditure				
Expenditure on charitable activities	6,7	<u>135,004</u>	<u>135,004</u>	170,234
Total expenditure		<u>135,004</u>	<u>135,004</u>	<u>170,234</u>
Net income/(expenditure) and net movement in funds		<u>32,455</u>	<u>32,455</u>	<u>(9,510)</u>
Reconciliation of funds				
Total funds brought forward		<u>109,640</u>	<u>109,640</u>	119,150
Total funds carried forward		<u>142,095</u>	<u>142,095</u>	<u>109,640</u>

The statement of financial activities includes all gains and losses recognised in the year. All income and expenditure derive from continuing activities.

The notes on pages 7 to 13 form part of these financial statements.

Healthwatch North Yorkshire

Statement of Financial Position

31 March 2021

	Note	2021 £	£	2020 £
Fixed assets				
Tangible fixed assets	12		5,757	8,454
Current assets				
Debtors	13	1,167		–
Cash at bank and in hand		<u>135,807</u>		<u>105,517</u>
		136,974		105,517
Creditors: amounts falling due within one year	14	636		4,331
Net current assets			<u>136,338</u>	<u>101,186</u>
Total assets less current liabilities			<u>142,095</u>	<u>109,640</u>
Net assets			<u>142,095</u>	<u>109,640</u>
Funds of the charity				
Unrestricted funds			<u>142,095</u>	<u>109,640</u>
Total charity funds	16		<u>142,095</u>	<u>109,640</u>

These financial statements were approved by the board of trustees and authorised for issue on 5 July 2021, and are signed on behalf of the board by:

J Bromfield
Trustee

C G Brackley
Trustee

The notes on pages 7 to 13 form part of these financial statements.

Healthwatch North Yorkshire

Notes to the Financial Statements

Year ended 31 March 2021

1. General information

The charity is a public benefit entity and a registered charity in England and Wales and is unincorporated. The address of the principal office is The Centre @ Burnholme, Mossdale Avenue, York, YO31 0HA.

2. Statement of compliance

These financial statements have been prepared in compliance with FRS 102, 'The Financial Reporting Standard applicable in the UK and the Republic of Ireland', the 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) (Charities SORP (FRS 102)) and the Charities Act 2011.

3. Accounting policies

Basis of preparation

The financial statements have been prepared on the historical cost basis, as modified by the revaluation of certain financial assets and liabilities and investment properties measured at fair value through income or expenditure.

The financial statements are prepared in sterling, which is the functional currency of the entity.

Going concern

There are no material uncertainties about the charity's ability to continue.

Judgements and key sources of estimation uncertainty

The preparation of the financial statements requires management to make judgements, estimates and assumptions that affect the amounts reported. These estimates and judgements are continually reviewed and are based on experience and other factors, including expectations of future events that are believed to be reasonable under the circumstances.

Fund accounting

Unrestricted funds are available for use at the discretion of the trustees to further any of the charity's purposes.

Designated funds are unrestricted funds earmarked by the trustees for particular future project or commitment.

Restricted funds are subjected to restrictions on their expenditure declared by the donor or through the terms of an appeal, and fall into one of two sub-classes: restricted income funds or endowment funds.

Healthwatch North Yorkshire

Notes to the Financial Statements *(continued)*

Year ended 31 March 2021

3. Accounting policies *(continued)*

Incoming resources

All incoming resources are included in the statement of financial activities when entitlement has passed to the charity; it is probable that the economic benefits associated with the transaction will flow to the charity and the amount can be reliably measured. The following specific policies are applied to particular categories of income:

- income from donations or grants is recognised when there is evidence of entitlement to the gift, receipt is probable and its amount can be measured reliably.
- legacy income is recognised when receipt is probable and entitlement is established.
- income from donated goods is measured at the fair value of the goods unless this is impractical to measure reliably, in which case the value is derived from the cost to the donor or the estimated resale value. Donated facilities and services are recognised in the accounts when received if the value can be reliably measured. No amounts are included for the contribution of general volunteers.
- income from contracts for the supply of services is recognised with the delivery of the contracted service. This is classified as unrestricted funds unless there is a contractual requirement for it to be spent on a particular purpose and returned if unspent, in which case it may be regarded as restricted.

Resources expended

Expenditure is recognised on an accruals basis as a liability is incurred. Expenditure includes any VAT which cannot be fully recovered, and is classified under headings of the statement of financial activities to which it relates:

- expenditure on raising funds includes the costs of all fundraising activities, events, non-charitable trading activities, and the sale of donated goods.
- expenditure on charitable activities includes all costs incurred by a charity in undertaking activities that further its charitable aims for the benefit of its beneficiaries, including those support costs and costs relating to the governance of the charity apportioned to charitable activities.
- other expenditure includes all expenditure that is neither related to raising funds for the charity nor part of its expenditure on charitable activities.

All costs are allocated to expenditure categories reflecting the use of the resource. Direct costs attributable to a single activity are allocated directly to that activity. Shared costs are apportioned between the activities they contribute to on a reasonable, justifiable and consistent basis.

Tangible assets

Tangible assets are initially recorded at cost, and subsequently stated at cost less any accumulated depreciation and impairment losses. Any tangible assets carried at revalued amounts are recorded at the fair value at the date of revaluation less any subsequent accumulated depreciation and subsequent accumulated impairment losses.

Healthwatch North Yorkshire

Notes to the Financial Statements *(continued)*

Year ended 31 March 2021

3. Accounting policies *(continued)*

Tangible assets *(continued)*

An increase in the carrying amount of an asset as a result of a revaluation, is recognised in other recognised gains and losses, unless it reverses a charge for impairment that has previously been recognised as expenditure within the statement of financial activities. A decrease in the carrying amount of an asset as a result of revaluation, is recognised in other recognised gains and losses, except to which it offsets any previous revaluation gain, in which case the loss is shown within other recognised gains and losses on the statement of financial activities.

Depreciation

Depreciation is calculated so as to write off the cost or valuation of an asset, less its residual value, over the useful economic life of that asset as follows:

Fixtures, equipment etc. - 20% straight line

Impairment of fixed assets

A review for indicators of impairment is carried out at each reporting date, with the recoverable amount being estimated where such indicators exist. Where the carrying value exceeds the recoverable amount, the asset is impaired accordingly. Prior impairments are also reviewed for possible reversal at each reporting date.

For the purposes of impairment testing, when it is not possible to estimate the recoverable amount of an individual asset, an estimate is made of the recoverable amount of the cash-generating unit to which the asset belongs. The cash-generating unit is the smallest identifiable group of assets that includes the asset and generates cash inflows that largely independent of the cash inflows from other assets or groups of assets.

For impairment testing of goodwill, the goodwill acquired in a business combination is, from the acquisition date, allocated to each of the cash-generating units that are expected to benefit from the synergies of the combination, irrespective of whether other assets or liabilities of the charity are assigned to those units.

Financial instruments

A financial asset or a financial liability is recognised only when the charity becomes a party to the contractual provisions of the instrument.

Basic financial instruments are initially recognised at the amount receivable or payable including any related transaction costs.

Current assets and current liabilities are subsequently measured at the cash or other consideration expected to be paid or received and not discounted.

Debt instruments are subsequently measured at amortised cost.

Where investments in shares are publicly traded or their fair value can otherwise be measured reliably, the investment is subsequently measured at fair value with changes in fair value recognised in income and expenditure. All other such investments are subsequently measured at cost less impairment.

Healthwatch North Yorkshire

Notes to the Financial Statements *(continued)*

Year ended 31 March 2021

3. Accounting policies *(continued)*

Financial instruments *(continued)*

Other financial instruments, including derivatives, are initially recognised at fair value, unless payment for an asset is deferred beyond normal business terms or financed at a rate of interest that is not a market rate, in which case the asset is measured at the present value of the future payments discounted at a market rate of interest for a similar debt instrument.

Other financial instruments are subsequently measured at fair value, with any changes recognised in the statement of financial activities, with the exception of hedging instruments in a designated hedging relationship.

Financial assets that are measured at cost or amortised cost are reviewed for objective evidence of impairment at the end of each reporting date. If there is objective evidence of impairment, an impairment loss is recognised under the appropriate heading in the statement of financial activities in which the initial gain was recognised.

For all equity instruments regardless of significance, and other financial assets that are individually significant, these are assessed individually for impairment. Other financial assets are either assessed individually or grouped on the basis of similar credit risk characteristics.

Any reversals of impairment are recognised immediately, to the extent that the reversal does not result in a carrying amount of the financial asset that exceeds what the carrying amount would have been had the impairment not previously been recognised.

Defined contribution plans

Contributions to defined contribution plans are recognised as an expense in the period in which the related service is provided. Prepaid contributions are recognised as an asset to the extent that the prepayment will lead to a reduction in future payments or a cash refund.

When contributions are not expected to be settled wholly within 12 months of the end of the reporting date in which the employees render the related service, the liability is measured on a discounted present value basis. The unwinding of the discount is recognised as an expense in the period in which it arises.

4. Donations and legacies

	Unrestricted Funds £	Total Funds 2021 £	Unrestricted Funds £	Total Funds 2020 £
Grants				
NYCC service grant	<u>167,459</u>	<u>167,459</u>	<u>142,459</u>	<u>142,459</u>

5. Charitable activities

	Unrestricted Funds £	Total Funds 2021 £	Unrestricted Funds £	Total Funds 2020 £
Consultancy fees	<u>==</u>	<u>==</u>	<u>18,265</u>	<u>18,265</u>

Healthwatch North Yorkshire

Notes to the Financial Statements *(continued)*

Year ended 31 March 2021

6. Expenditure on charitable activities by fund type

	Unrestricted Funds £	Total Funds 2021 £	Unrestricted Funds £	Total Funds 2020 £
Charitable activity	<u>135,004</u>	<u>135,004</u>	<u>170,234</u>	<u>170,234</u>

7. Expenditure on charitable activities by activity type

	Activities undertaken directly £	Total funds 2021 £	Total fund 2020 £
Charitable activity	<u>135,004</u>	<u>135,004</u>	<u>170,234</u>

8. Net income/(expenditure)

Net income/(expenditure) is stated after charging/(crediting):

	2021 £	2020 £
Depreciation of tangible fixed assets	<u>2,697</u>	<u>2,697</u>

9. Independent examination fees

	2021 £	2020 £
Fees payable to the independent examiner for: Independent examination of the financial statements	<u>636</u>	<u>-</u>

10. Staff costs

The total staff costs and employee benefits for the reporting period are analysed as follows:

	2021 £	2020 £
Wages and salaries	113,915	102,976
Employer contributions to pension plans	<u>1,854</u>	<u>6,114</u>
	<u>115,769</u>	<u>109,090</u>

The average head count of employees during the year was 5 (2020: 6).

No employee received employee benefits of more than £60,000 during the year (2020: Nil).

11. Trustee remuneration and expenses

No remuneration or other benefits from employment with the charity or a related entity were received by the trustees.

Healthwatch North Yorkshire

Notes to the Financial Statements *(continued)*

Year ended 31 March 2021

12. Tangible fixed assets

	Equipment £	Total £
Cost		
At 1 April 2020 and 31 March 2021	<u>14,207</u>	<u>14,207</u>
Depreciation		
At 1 April 2020	5,753	5,753
Charge for the year	<u>2,697</u>	<u>2,697</u>
At 31 March 2021	<u>8,450</u>	<u>8,450</u>
Carrying amount		
At 31 March 2021	<u>5,757</u>	<u>5,757</u>
At 31 March 2020	<u>8,454</u>	<u>8,454</u>

13. Debtors

	2021 £	2020 £
Prepayments and accrued income	<u>1,167</u>	<u>—</u>

14. Creditors: amounts falling due within one year

	2021 £	2020 £
Accruals and deferred income	636	1,256
Other creditors	—	3,075
	<u>636</u>	<u>4,331</u>

15. Pensions and other post retirement benefits

Defined contribution plans

The amount recognised in income or expenditure as an expense in relation to defined contribution plans was £1,854 (2020: £6,114).

16. Analysis of charitable funds

Unrestricted funds

	At 1 April 2020 £	Income £	Expenditure £	At 31 March 2021 £
General funds	<u>109,640</u>	<u>167,459</u>	<u>(135,004)</u>	<u>142,095</u>

	At 1 April 2019 £	Income £	Expenditure £	At 31 March 2020 £
General funds	<u>119,150</u>	<u>160,724</u>	<u>(170,234)</u>	<u>109,640</u>

Healthwatch North Yorkshire

Notes to the Financial Statements *(continued)*

Year ended 31 March 2021

17. Analysis of net assets between funds

	Unrestricted Funds £	Total Funds 2021 £
Tangible fixed assets	5,757	5,757
Current assets	136,974	136,974
Creditors less than 1 year	(636)	(636)
Net assets	<u>142,095</u>	<u>142,095</u>

	Unrestricted Funds £	Total Funds 2020 £
Tangible fixed assets	8,454	8,454
Current assets	105,517	105,517
Creditors less than 1 year	(4,331)	(4,331)
Net assets	<u>109,640</u>	<u>109,640</u>

Healthwatch North Yorkshire

Management Information

Year ended 31 March 2021

The following pages do not form part of the financial statements.

Healthwatch North Yorkshire
Detailed Statement of Financial Activities
Year ended 31 March 2021

	2021 £	2020 £
Income and endowments		
Donations and legacies		
NYCC service grant	<u>167,459</u>	<u>142,459</u>
Charitable activities		
Consultancy fees	—	<u>18,265</u>
Total income	<u>167,459</u>	<u>160,724</u>
Expenditure		
Expenditure on charitable activities		
Wages/salaries inc fees	113,915	102,976
Pension costs	1,854	6,114
Subs and publications	643	112
Petty cash	—	230
Sundry expenses	150	581
Insurance	1,067	1,897
Staff travel and expenses	2,279	11,602
Repairs and software maintenance	3,718	4,913
Volunteer travel expenses	73	308
Legal, professional and consultancy fees	5,271	22,133
Trustees expenses	436	1,631
Office rent, broadband and phone	1,687	10,944
Depreciation	2,697	2,697
Bank charges	69	60
Printing, stationery and postage	317	870
Marketing and publicity	165	2,151
Room hire and hospitality	663	1,015
	<u>135,004</u>	<u>170,234</u>
Total expenditure	<u>135,004</u>	<u>170,234</u>
Net income/(expenditure)	<u>32,455</u>	<u>(9,510)</u>

Healthwatch North Yorkshire

Notes to the Detailed Statement of Financial Activities

Year ended 31 March 2021

	2021 £	2020 £
Expenditure on charitable activities		
Activity type 1		
<i>Activities undertaken directly</i>		
Wages/salaries inc fees	113,915	102,976
Pension costs	1,854	6,114
Subs & publications	643	112
Petty cash	-	230
Sundry expenses	150	581
Insurance	1,067	1,897
Staff travel and expenses	2,279	11,602
Repairs and software maintenance	3,718	4,913
Volunteer travel expenses	73	308
Legal, professional and consultancy fees	5,271	22,133
Trustees expenses	436	1,631
Office rent, broadband and phone	1,687	10,944
Depreciation	2,697	2,697
Bank charges	69	60
Printing, stationery and postage	317	870
Marketing and publicity	165	2,151
Room hire and hospitality	663	1,015
	<u>135,004</u>	<u>170,234</u>
Expenditure on charitable activities	<u>135,004</u>	<u>170,234</u>