

1	Chairperson's Remarks
2	Executive Summary
3	Our Mission
4	Our Journey
5	Our Work in Hospitals
6	Our Follow-up Support
7	Evidence-based Care
8	Safeguarding Young People
9	Young People's Demographics
10	Our Values and Stakeholders
11	Our Funders
12	Our Governance
13	A Case Study
14	Independent Examiner's Report
15	Statement of Financial Activities
16	Balance Sheet
17	Statement of Cash Flows
18	Trustee Responsibilities
19-27	Notes to the Financial Statements



Scan me
for a video
insight into
Emerge's work

Trustees' Annual Report: August 2024 – July 2025

Chairperson's Remarks

It continues to be a great privilege to chair the Board of Trustees of this wonderful charity as we continue to see transformation in the lives of many young people (and their families) as they go through times of great crisis. I am extremely grateful to my fellow Board Members who have given so generously of their time and considerable expertise and it has been a real pleasure to welcome onto the Board four new members who bring such depth of experience, wisdom and skill.

This has been a challenging year with enormous financial pressures coming out of the changed funding arrangements within the NHS and linked services. Emerge continues to be highly valued by those who see what we do but it has been increasingly difficult to obtain finances from centrally funded services. In response to this, we have developed a new funding model in which we seek our financial support from more diverse sources. Although initial responses have been very encouraging, it will take time to fill the gap and looking ahead to our 25-26 financial year, we anticipate needing to take difficult decisions about the services we can continue to provide, especially in Kent.

We have really appreciated the commitment and calibre of all our team but, especially this year, the core team who have carried so many of the burdens but who continue to embody our Christian faith, leading with integrity, tenacity and love. In particular, we have valued the commitment, dedication and skill of Jo Carter who has so brilliantly led our people management.

It is so encouraging to read the many tributes and expressions of appreciation that we receive from those we have been able to support, some of which are documented in this report. There continues to be increasing recognition of the benefits that Emerge brings not only to the young people but also to the hard pressed staff within the hospitals we serve.

None of this would have been possible without the commitment, dedication and vision of all our staff and volunteers. Our Project Leads continue to shoulder increasing responsibility as our projects expand and, with our core team, have been especially outstanding this year. We continue to be so grateful to God for his provision as we look forward to all the opportunities to come.

Kevin McCormac OBE
Chairperson



Trustees' Annual Report: August 2024 – July 2025

Executive Summary

This past year has been a period of strategic evolution for Emerge Advocacy, as we successfully balanced the expansion of our regional services with the launch of a bold vision for replication. While the broader economic landscape has presented challenges for the sector, our focus has remained on building a resilient, sustainable foundation that ensures our front-line impact remains unshakable for every young person who needs us.

Across Surrey, Berkshire and Kent, our teams have been a 'voice of hope' for **1120 young people** in their darkest moments. Our impact is best seen in the numbers that tell a story of stabilisation and a recovery of hope: an average 26.5% reduction in distress levels and a 70% lower re-attendance rate for those who engage with our support. This success is built on the relational safety provided by our staff and volunteers. They meet young people where they're at – not just being in A&E with them but sitting on hospital floors while the hectic hospital world buzzes above them. We are finding that a compassionate presence helps regulate nervous systems when words simply aren't enough.

This work has been honoured through several awards, including the 'Outstanding Contribution to Young People's Mental Health' award in Medway for 2025.

We remain fundamentally motivated by our Christian faith to walk (without judgement or agenda) alongside every young person who feels they have hit a dead end, helping them to see that there is always a way forward.

Thank you to our funders, our NHS partners, and especially our volunteers. You are the reason hundreds of young people this year chose hope over despair.

A handwritten signature in blue ink that reads "Joy Wright".

Joy Wright
Founder & CEO



Our Mission

"Our mission is not just to prevent a crisis today, but to help a young person 'emerge' with a toolkit of hope for tomorrow."

EMERGE
A VOICE OF HOPE

Emerge Advocacy exists to meet young people in their darkest moments of crisis. Founded on the Christian principle of loving our neighbour, we provide a consistent, non-clinical presence for those aged 10–25 who have arrived in hospital due to self-harm, overdose, or emotional distress.

The Power of Presence: As affirmed by NHS Suicide Prevention guidance, "relational safety" - the presence of a safe, consistent adult - is the strongest predictor of positive clinical outcomes. Our Youth Support Workers and volunteers offer a friendly, personal connection when young people are engaging with the mental health care system

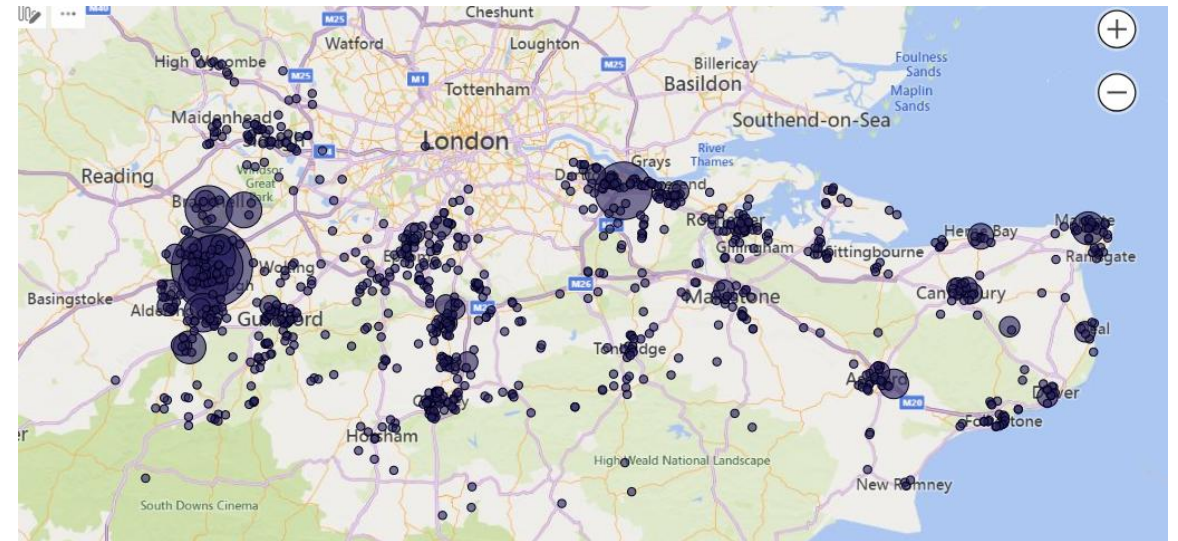
Indiscriminate Support: While we are a Christian charity, we serve young people of all faiths and none. Our support is offered without judgement or agenda, focusing entirely on the young person's immediate emotional needs.

A Bridge to the Community: Aligning with the NHS ten-year plan, we help move care from hospital to community as we walk alongside them for up to three months of community follow-up. This "bridge" is essential for reducing the isolation that often leads to crisis re-attendance.

Navigating "the Storm": This year, our mission has been tested by a changing funding landscape. We have responded with strategic pruning, focusing our resources on the front-line projects that deliver the highest impact for young people.

Empowering the Church: A major evolution of our mission this year is our focus on replication. In addition to being a direct-delivery charity, our vision is to equip local churches to launch their own Emerge projects. Our research shows that 98% of surveyed churches feel this mission aligns with their own values.

Digital Safeguarding: As the complexity of young people's needs grows—with 42% of our service users identifying as neurodivergent—our mission now includes a commitment to digital innovation. The launch of the Emerge App ensures our "relational safety" model is backed by the highest standards of real-time safeguarding data.



Addressing Health Inequalities: Our data confirms that emotional crisis does not happen in a vacuum; it is often exacerbated by the structural inequalities and financial pressures within the communities we serve. Across the Southeast, we have seen a direct correlation between area-based deprivation and the complexity of safeguarding concerns, with young people in these areas four times more likely to experience serious mental health difficulties. To address this, our follow-up support is intentionally local and accessible—frequently delivered in community spaces like coffee shops to remove the barriers of clinical environments. By meeting young people where they are, we ensure that those from the most disadvantaged backgrounds receive the same "voice of hope" as their peers, helping to break the cycle of crisis and re-attendance that disproportionately affects families in high-deprivation areas.

Systemic Influence: We are increasingly using our "lived experience" data to act as a voice for young people within the wider NHS and local government systems, advocating for safer transitions and better support for those with ASC and ADHD.

Our Journey So Far

2016-
2017

- Emerge begins in the Royal Surrey, Guildford

2017-
2018

- Our work becomes established and we form as a charity
- Our team grows

2018 -
2019

- We open a project at St Peter's Hospital, Chertsey
- We win funding to replicate our work

2019 –
2020

- We open a project in Medway, Kent
- In Covid we are busier than ever

2020-
2021

- We open projects in Frimley, Epsom, Dartford and Tunbridge Wells
- We receive the Queen's Award for Voluntary Service, the MBE for charities

2021-
2022

- We open projects in East Surrey Hospital, and Wexham Park Hospital
- We grow our infrastructure and leadership team

2022 -
2023

- We secure funding to open projects in Ashford and Margate
- We share our model and speak at national conferences and develop our training offer

2023 –
2024

- We secure funding to explore national replication
- We continue to build our teams and youth work provision, working with the NHS to meet growing needs

2024 –
2025

- We conduct a successful research project testing the waters for replication
- We respond to commissioner's request for our services to meet growing needs on Hascombe Ward at the Royal Surrey, launching a daily afternoon service easing pressure and improving outcomes for young people.

- We open new projects in East Kent at William Harvey and QEOM hospitals
- Our work is celebrated through three awards – Outstanding Charity 2024, Kent Mental Health and Wellbeing award, and the 'Outstanding Contribution to Mental Health' in Medway.

Our Work in Hospitals

Our hospital-based work is the primary "entry point" for the young people we serve. We operate at the critical intersection between a clinical crisis and the beginning of a recovery journey, providing a non-clinical, human connection in the high-pressure environment of the Emergency Department.

Unlike clinical staff, our Youth Support Workers and volunteers do not assess or diagnose. Instead, they offer relational safety—a consistent, calming presence for young people (aged 10–25) who have attended A&E due to self-harm, suicidal ideation, or emotional crisis. Our model is built on:

Immediate Presence: Being available on-site during peak crisis hours (typically evenings and weekends) to sit with young people while they wait for medical or psychiatric assessment.

Advocacy: Helping young people find their voice so they can communicate their needs to busy clinical teams.

De-escalation: Using creative tools like the "emotional thermometer" to help young people regulate their distress in the moment.

"The conversation at the hospital was extremely helpful; it really made me feel like a normal person who was understandably hurting when I was in a crisis."

This year, our hospital teams achieved remarkable reach across the Southeast:

Front-line Impact: We supported 835 young people in hospital through 1409 sessions of face-to-face support.

Strategic Expansion: We successfully launched the Hascombe Project at Royal Surrey, providing a dedicated weekday presence on the children's ward.

New Footprint: We expanded into East Kent, establishing a vital presence at William Harvey (Ashford) and QEQM (Margate) hospitals to meet soaring local demand.

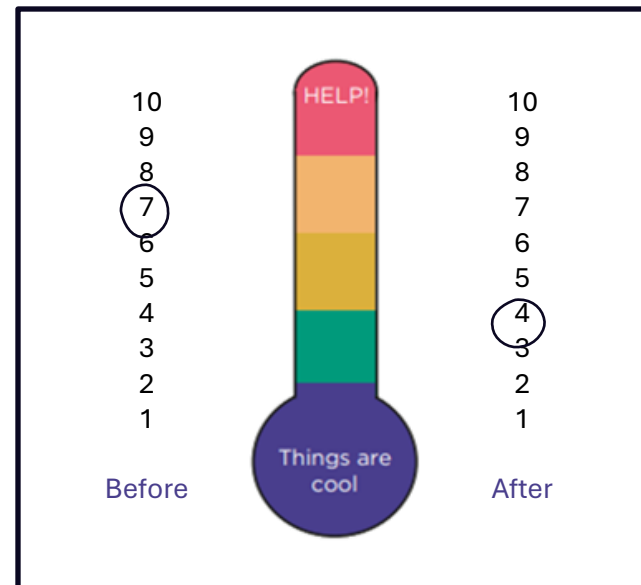
The presence of Emerge in a hospital setting has a measurable stabilising effect:

Distress Reduction: On average, young people reported a 26.5% decrease in distress following an Emerge hospital session.

System Efficiency: Our "cake diplomacy" and relational approach have been praised by NHS staff for reducing the agitation often seen in crowded waiting areas, allowing clinical teams to focus on medical care.

Safe Transitions: By meeting young people at the point of crisis, we ensure a seamless transition into our community follow-up programme, significantly reducing the likelihood of a "revolving door" return to A&E, reducing readmissions by 70%.

"Thank you for your support ... it brought real relief to a very stressful night and made a big difference."



Follow Up Support

While our hospital intervention provides immediate stabilisation, our Community Follow-Up programme is where the long-term work of building resilience begins. By walking alongside a young person for up to three months after discharge, we provide the consistent relational bridge that prevents a "revolving door" return to A&E.

Meeting Young People Where They Are

Our follow-up support is intentionally non-clinical and highly accessible. We move away from hospital wards and into the heart of the community:

Accessible Spaces: This year, 57% of our community sessions were held in local coffee shops, with others taking place in schools, colleges, or via digital platforms.

Personalised Goals: Support is led by the young person's needs, focusing on practical coping strategies, school reintegration, and building confidence in social settings.

Relational Safety: The same trust built at the hospital bedside is carried into the community, providing a rare sense of continuity in a fragmented mental health system.

Key Deliverables

The demand for community-based support saw exceptional growth this year:

Operational Volume: Our teams supported 415 young people through 2,400 hours of face-to-face follow-up care across 2,292 individual sessions.

Surrey Growth: In Surrey alone, we provided 1,479 hours of support, representing a significant year-on-year increase as we scaled to meet post-pandemic pressures.

Kent Expansion: Despite being a newer territory, Kent teams delivered 921 hours of follow-up, successfully establishing a presence across the whole county.

Impact and Outcomes

The impact of this sustained support is visible in both clinical data and personal milestones:

Reduced Readmissions: In Kent, our follow-up care resulted in only 2 crisis readmissions for those engaged with the service, demonstrating its power as a preventative tool.

Emotional Progress: Young people in follow-up reported a consistent improvement in their "emotional wellbeing, rating it as 'awful' or 'poor' prior to meeting Emerge and 'okay' or 'good' as a result of our support.

Complexity Managed: We successfully supported a high proportion of neurodivergent young people (42% identifying as ASC/ADHD), using creative tools like the "Shopping Bag" exercise to help them navigate school and social anxiety.

"Having someone to meet me in a coffee shop made everything feel less 'medical' and more human. It gave me the confidence to start going back to school again."



2,292
Follow-up
sessions

"Thank you, if it wasn't for you and your hard work and dedication, I wouldn't be here ... let alone in my current situation. In my eyes, the sky is the limit now and that's all thanks to you and what you have taught me. Mostly you brought my smile back."

Evidence Based Care

Emerge's work is deeply rooted in the i-THRIVE framework and the Lundy model, moving beyond clinical intervention to provide person-centred, rights-based support. By positioning ourselves in the 'Getting Help' and 'Getting More Help' quadrants of i-THRIVE, we provide an essential bridge for young people who may not meet the threshold for specialist mental health services but require urgent emotional regulation.

Alignment with the Lundy model ensures that participation is meaningful rather than tokenistic: we create the Space for young people to express themselves in high-pressure hospital environments; provide the Voice through creative tools when words fail; and act as the Audience and Influence by advocating for their views during clinical discharge meetings and through our Emerge Insight workshops. This ensures that the young person's perspective directly shapes their own care pathway and our charity's governance.

Our approach is fundamentally trauma-informed, moving the focus from "What is wrong with you?" to "What happened to you?" to avoid re-traumatisation in clinical settings. Central to this is the practice of co-regulation, where our staff and volunteers use their own calm, consistent presence to help a young person stabilise their overtaxed nervous system. By offering a "listening ear" and sensory tools—such as clay or the emotional thermometer—we provide the external regulation a young person needs before they are able to access their own internal coping strategies. This culture of trustworthiness and transparency ensures that young people have agency over their support, allowing them to regulate at their own pace without being forced to recount difficult memories or retell their story if they would prefer not to.



Safeguarding Young People

Safeguarding remains the cornerstone of Emerge Advocacy's clinical and community work. This year, we moved from a reactive model to a proactive, digitally-enabled infrastructure designed to protect both the young people we serve and our front-line staff.

Key Trends and Complexity

Data from our quarterly reports highlights a rising trend in the complexity of needs among young people:

- **Primary Risk Factors:** "Risk to self" remains the most frequent reason for safeguarding escalation across all regions.
- **Neurodiversity and Vulnerability:** Approximately 42% of our service users identify as neurodivergent (ASC/ADHD). Reports indicate these young people often face higher risks of emotional abuse, neglect, and "problems at school".
- **Regional Spikes:** While "risk to self" is consistent, we noted seasonal spikes in exploitation concerns and sexual abuse, requiring targeted training for our regional teams.

Strengthening Backstop

To support our teams working late-night hospital shifts (often until 11pm), we appointed a dedicated Backstop Lead coordinating our immediate safeguarding and emotional supervision for our Youth Support Workers during often intense interactions.

Professional Integration

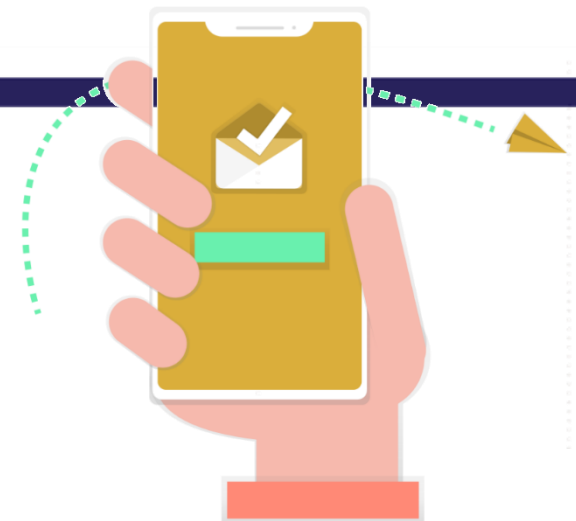
Emerge's safeguarding rigour has earned the trust of our NHS partners. Our teams now utilize the SBAR (Situation, Background, Assessment, Recommendation) format for documenting concerns, aligning our reporting with NHS clinical standards. This has resulted in Emerge being invited to lead safeguarding inductions for new nursing staff in several trusts.

Digital Innovation: The Emerge App

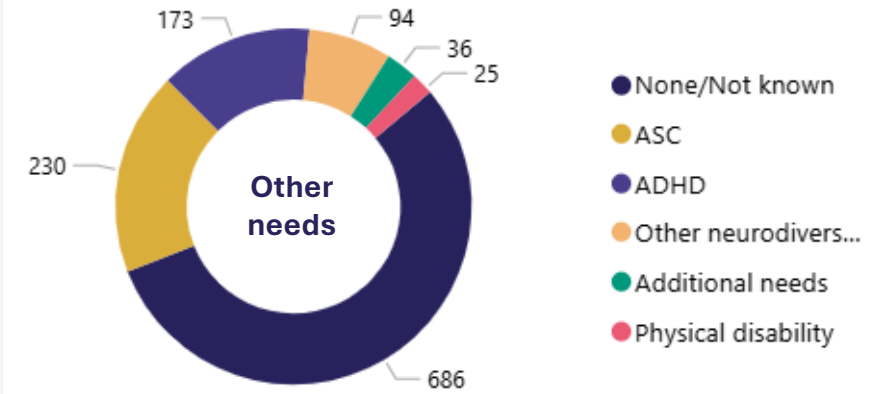
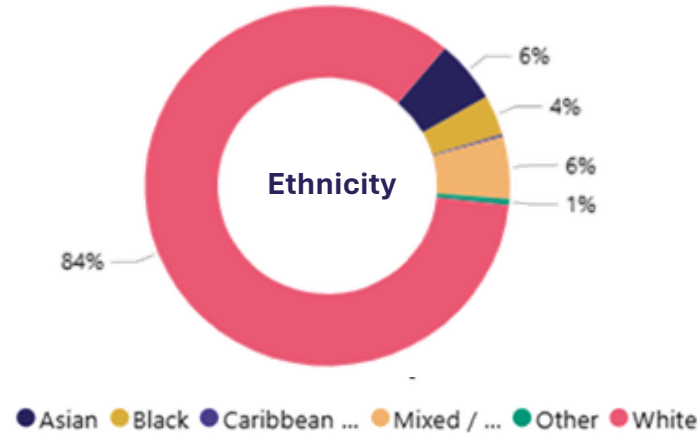
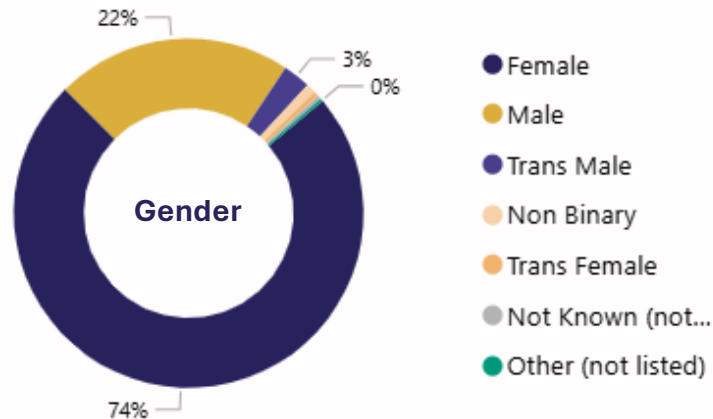
A significant milestone this year was the launch of automated safeguarding reporting through the Emerge App. This technology ensures:

- **Real-time Notifications:** Safeguarding concerns flagged during a session are instantly transmitted to Emerge managers and hospital safeguarding leads.
- **Audit Trails:** Automated summaries provide a precise, time-stamped record of every intervention, ensuring no young person "falls through the gaps" during a hospital-to-community transition.

Risk to self
Physical abuse
Sexual Abuse
Escalation of mental health issues
Emotional Abuse
Risk to others
Neglect
Exploitation
Mistreatment by a professional



Young People's Demographics



Emerge's support is open to all young people and we ensure that everyone who might need our support hears about it through banners and posters displayed in Emergency Departments and available for nurses to give to patients.

Across our projects, the young people who we most commonly support are white females, which is representative of the demographic of young people most commonly presenting to hospital in crisis. Young people from all walks of life find themselves in crisis, and our teams support all, from the most to the least affluent and young people of a variety of nationalities. Those who tend to be more vulnerable are those where there are social care issues or neurodiversity and those from cultural backgrounds where mental health issues are less understood and accepted.

We have noticed an increase in the numbers of young people who have, or are seeking, a diagnosis for a form of neuro-diversity, particularly ASC (Autistic Spectrum Condition) or ADHD (Attention Deficit Hyperactivity Disorder). These young people make up 42% of those we see in hospital in crisis, which is disproportionately more than the average population, where it is estimated that 15% - 20% of people are neuro-diverse. Therefore, it appears that this is a contributing factor to crisis in young people.

Our Values and Community Stakeholders

As a Christian charity, we are motivated by our faith which is our source of hope and strength which we draw upon in our day-to-day work with young people. We exist to support young people of all faiths and none, providing care and compassion indiscriminately.

We always empower young people to guide conversations and have no agenda to bring except to enable young people to know that they are not alone and that their lives and futures matter, that hope is real. This perspective makes us ideally placed to offer sincere, compassionate and hope-filled support to young people where we meet them at the point of crisis yet see them as a whole person and help them reconnect with a sense of hope and purpose for their futures.

It is important to us that our identity as a Christian charity adds to the overall positive experience for the young people we support and so have asked them for their thoughts about this in anonymous feedback. These are some of the comments we received this year, in answer to the question:

What difference (if any) did it make to you that Emerge is a Christian faith-based charity?

“I enjoyed asking about Christianity and church, but it was nice that it was only brought up when I asked because I think the stereotype would be that it is pushed on to you but that was not the case at all.”

“I felt a lot safer”

“None, I am just happy there are people willing to listen to and talk to. They made me feel like I was worthy.”

“There was no conversation about Christianity involved in the process which was a relief. When I first heard it was a Christian charity, I was a little bit deterred but after my first session I saw the benefits.”

Our values and identity as a charity gives us a natural link into communities surrounding the hospitals where we operate, through local church networks where we find a pool of people with pastoral experience and caring attitudes who make great volunteers. Many churches give towards our work with young people either regularly or through special events like Christmas concerts or coffee mornings during the year.

Further embedding our work with local churches continues to be a key objective to enable us to reach more young people through equipping others and strengthening our work with young people in local communities.



Our Statutory Stakeholders and Grant Funders

The impact achieved this year would not have been possible without the strategic support of our funding partners. Their investment has been the bedrock of our resilience, allowing us to maintain front-line services during a challenging economic "storm" and providing the seed capital for our future growth.

National Strategic Support: We are deeply grateful to the William Wates Memorial Trust, whose dedicated funding enabled us to complete our Replication Research. This work has laid the foundation for the development of our work beyond the Southeast.

Regional Health & Care Partnerships: Our core delivery in Surrey has been sustained through our continued collaboration with Surrey County Council (Mental Health Investment Fund) and Surrey Wellbeing Partnership. In Kent, the NHS Charities Together funding has been instrumental in embedding our presence across the county's Emergency Departments and expanding into East Kent.

Community Foundations & Local Giving: Significant grants from the Community Foundation for Surrey, Dorothy Kerin, Lauderdale, and Colyer Fergusson and provided the stability needed to grow our Youth Support teams. We also extend our thanks to local groups like the Royal Tunbridge Wells Round Table, whose community donations funded essential resources for our young people.

"Emerge is a responsive partner doing innovative work, playing a crucial part in the safety and wellbeing of some of our most vulnerable."

- Funder



In order to ensure cash flow, and provide security for our staff, we follow the charity commission's recommendation of holding a proportionate reserve to ensure stability and continuity (refer to note five in finance section for details). For some prospective funders, this can appear to indicate that we are not in immediate need of additional funds but, by nature, our reserves are not to be touched except in emergencies or when winding up a project.

Along with all charities, we have unfortunately noticed a decrease in success rates with grant funding during 2025, due to the national funding climate. This is something we are monitoring closely as we look towards our next financial year.

Our Governance and Leadership

This financial year has seen Emerge increase in terms of staff team, volunteers and finance. We came into the year in a good position thanks to careful stewardship of these resources and, following ongoing support from funders, donors and commissioners, we have ended the year in a strong position, with funding allocated to key areas of development and need.

Our board of trustees has received excellent leadership from our Chairperson, Kevin McCormac OBE, MA (Oxon) and Emerge's board boasts much experience and expertise including safeguarding, legal, grant-making and philanthropy, hospital management, youth work project management, franchise, and volunteering experience within Emerge. Our trustee training requirements are reviewed annually and new trustees undergo a comprehensive induction as they begin their role. Our Trustees during this reporting period have been:

Name	Role	Dates
Kevin McCormac	Trustee / Chairperson	14 th Dec 2021 - present
Peter Watts	Trustee / Vice Chair	27 th June 2018 - present
Joy Wright	Trustee	12 th June 2019 – 25 th July 2025
David Welch	Trustee	4 th Dec 2019 – 14 th Mar 2025
Sarah Kendall	Trustee	4 th Dec 2019 – 13 th June 2025
Nicola Broadhurst	Trustee	25 th Nov 2020 - present
Hugh Stafford-Smith	Trustee	25 th Nov 2020 - present
Dr Martin Brunet	Trustee	19 th Sept 2025 – present
Sarah-Louise Morton	Trustee	19 th Sept 2025 – present
Elizabeth Read	Trustee	19 th Jan 2026 - present
Richard King	Trustee	19 th Jan 2026 – present

Kevin continues to stand as acting treasurer and we are exploring the role with an individual at the time of writing.

In the leadership of Emerge and the direction of its resources and energies, the charity trustees have at all times worked to the best interests of the public benefit, striving to give all we can for the young people we serve.



Emily

When we first met 'Emily', she was in hospital and struggling with, anxiety which was seriously affecting her eating. She felt hopeless, stuck and isolated and told us that the emotional side of her experience wasn't being understood, the focus was all on what she was or wasn't eating.



Emily looked forward to Emerge visits in hospital and she told us that “everything began to feel a little lighter” in them. The team brought laughter, positivity and a sense of normalcy to an otherwise difficult time. They did practical emotional regulation exercises with Emily, as well as playing games and chatting about her feelings.

Looking back on her time in hospital, Emily says that the Emerge visits weren't just a distraction but offered genuine support, coping tools and human connection. She says that they helped her build resilience and gave her the motivation to keep moving forward.

After her time with Emerge and specialist further support, Emily has been able to return to school and is making steps of progress after crisis.



Emily says that she often reflects on the support Emerge gave her – the practical strategies, uplifting conversations and most importantly, the encouragement to believe in herself. She says, one of her biggest takeaways was learning how to advocate for herself and this skill continues to empower her to move forward with strength.

Independent Examiner's Report on the Accounts

Independent examiner's report to the trustees of Emerge Advocacy

I report to the trustees of Emerge Advocacy on my examination of the charity's accounts for the year ended 31st July 2025 as set out on pages 15 to 27.

Responsibilities and basis of report

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

I report in respect of my examination for the charity's accounts carried out under Section 145 of the Act and in carrying out my examination I have followed all 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 listed body. I can confirm that I am qualified to undertake the examination because I am a member of the Association of Chartered Certified Accountants, 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 accounts do not accord with those records; or
3. the accounts 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.

Lance Redman FCA FCCA
Shaw Gibbs Limited
Wey Court West
Union Road
Farnham
GU9 7PT

Signed: *Lance Redman*

Date: 21/05/2026

	Notes	Unrestricted Funds £	Restricted Funds £	TOTAL 2024/25 £	TOTAL 2023/24 £
INCOMING RESOURCES					
Incoming Resources from Generated Funds					
Donations, Legacies and Similar Income	3a	38,324	384,605	422,929	147,660
Charitable Activities	3b	78,550	227,465	306,015	540,697
Other Trading Activities	3c	8,263	0	8,263	0
Investment Income	3d	4,393	0	4,393	2,413
		129,530	612,070	741,600	690,769
RESOURCES EXPENDED					
Cost of Generating Funds					
Raising Funds	4a	8,441	0	8,441	5,353
Charitable Activities	4b	73,712	713,385	787,097	597,630
Other	4c	2,737	0	2,737	1,740
		84,890	713,385	798,275	604,723
NET INCOMING (OUTGOING) RESOURCES		44,640	(101,315)	(56,675)	86,046
Total Funds Brought Forward		175,268	76,188	251,457	165,411
Transfer between Funds		(48,545)	48,545	0	0
TOTAL FUNDS CARRIED FORWARD		171,363	23,418	194,782	251,457

Movements on all reserves and all recognised gains and losses are shown below. All the charity's operations are classed as continuing. The notes on pages 19 to 27 form part of these financial statements.

Balance Sheet

As at 31st July 2025



	Note	Unrestricted Funds £	Restricted Funds £	31/07/25 Total £	31/07/24Total £
Fixed Assets					
Tangible assets	2	0	0	0	0
Current Assets					
Debtors & Prepayments	7	29,508	22,598	52,106	87,359
Cash at Bank and in hand	6	174,125	148,505	322,630	353,436
Total Current Assets		203,633	171,103	374,736	440,796
Creditors: due within one year	8	32,270	147,684	179,954	189,339
NET CURRENT ASSETS		171,363	23,419	194,782	251,457
TOTAL ASSETS less current liabilities		171,363	23,419	194,782	251,457
NET ASSETS		171,363	23,419	194,782	251,457
Funds of the Charity					
General Funds	5	1,363	0	1,363	5,269
Designated Funds		170,000	0	170,000	170,000
Restricted Funds		0	23,419	23,419	76,188
		171,363	23,419	194,782	251,457



Statement of Cash Flows

As at 31st July 2025



	2024/25 £	2023/24 £
Cash Flows from operating activities		
Net income / (expenditure) for the year	(56,676)	86,046
Interest Receivable	(4,393)	(2,413)
Adjustments for non-cash items and working capital:		
Decrease / (Increase) in debtors	35,254	(35,454)
(Decrease) / Increase in creditors (excluding deferred income)	(6,011)	12,168
(Decrease) / Increase in deferred income	(3,374)	37,877
Total Adjustments	25,869	14,591
Net cash provided by operating activities	(35,199)	98,224
Cash flows from investing activities		
Interest Received	4,393	2,413
Net cash provided by / (used in) investing activities	4,393	2,413
Net (decrease) / increase in cash and cash equivalents	(30,806)	100,637
Cash and cash equivalents at beginning of year	353,436	252,799
Cash and cash equivalents at end of year	322,630	353,436

The charity has not presented an analysis of changes in net debt as it has no borrowings or finance lease obligations during the year.

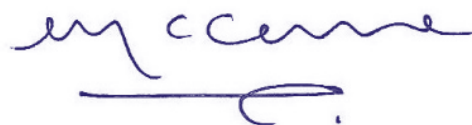
For the period ended 31st July 2025, in accordance with section 145 of the Charities Act 2011, the trustees have elected for the accounts to be examined by an Independent Examiner whose report appears on page 14.

The trustees acknowledge their responsibility for ensuring that the charity keeps proper accounting records which comply with the Charity Commission's guidance and give a true and fair view of the state of affairs of the charity as at the end of the financial year and of its profit and loss for the financial year.

The trustees are aware of the revised Charities SORP (FRS 102) effective for periods beginning on or after 1 January 2026; however, as the changes do not apply to this reporting period and are not expected to materially affect the charity's financial statements, they have not been adopted early.

Approved by the Trustees on the: 21/05/2026

Signed on their behalf by Trustee:

A handwritten signature in blue ink, appearing to read 'Kevin McCormac', with a horizontal line underneath.

Print Name: **Kevin McCormac**

1. ACCOUNTING POLICIES

Basis of Preparation & Assessment of Going Concern

Basis of Preparation

The financial statements have been prepared under the historical cost convention with items recognised at cost or transaction value unless otherwise stated in the relevant notes. The financial statements have been prepared in accordance with the Statement of Recommended Practice: Accounting and Reporting by Charities preparing their accounts in accordance with the Financial Reporting Standard applicable in the UK and Republic of Ireland (FRS102) (effective 1 January 2015) - (Charities SORP - FRS102) and the Charities Act 2011.

The Charity meets the definition of a public benefit entity under FRS102. Assets and liabilities are initially recognised at historical cost unless otherwise stated in the relevant accounting policy notes.

Assessment of Going Concern

Preparation of the accounts is on a going concern basis. The trustees consider that there are no material uncertainties about the Charity's ability to continue as a going concern.

Incoming Resources

Recognition of Incoming Resources

These are included in the Statement of Financial Activities (SOFA) when:

- the charity becomes entitled to the resources;
- the trustees are virtually certain they will receive the resources; and
- the monetary value can be measured with sufficient reliability

Where incoming resources have related expenditure (as with fundraising or contract income) the incoming resource and related expenditure are reported gross in the SOFA.

Grants and Donations

Grants and Donations are only included in the SOFA when the charity has unconditional entitlement to the resources.

Tax Reclaims on Donations and Gifts

Incoming resources from tax reclaims are included in the SOFA at the same time as the gift to which they relate.

Contractual Income and Performance Related Grants

This is only included in the SOFA once the related goods or services has been delivered.

Gifts in Kind

Gifts in kind are accounted for at a reasonable estimate of their value to the charity or the amount actually realised. Gifts in kind for sale or distribution are included in the accounts as gifts only when sold or distributed by the charity. Gifts in kind for use by the charity are included in the SOFA as incoming resources when receivable.

Donated Services and Facilities

These are only included in incoming resources (with an equivalent amount in resources expended) where the benefit to the charity is reasonably quantifiable, measurable and material. The value placed on these resources is the estimated value to the charity of the service or facility received.

Volunteer Help

The value of any voluntary help received is not included in the accounts but is described in the trustees' annual report.

Investment Income

This is included in the accounts when receivable.

Investment Gains and Losses

This included any gain or loss on the sale of investments and any gain or loss resulting from revaluing investments to market value at the end of the year.

Expenditure and Liabilities

Liability Recognition

Liabilities are recognised as soon as there is a legal or constructive obligation committing the charity to pay out resources.

Governance Costs

Include costs of the preparation and examination of statutory accounts, the costs of the trustees' meetings and cost of any legal advice to trustees on governance or constitutional matters.

Grants with Performance Conditions

Where the charity gives a grant with conditions for its payment being a specific level of service or output to be provided, such grants are only recognised in the SOFA once the recipient of the grant has provided the specified service or output.

These are only recognised in the accounts when a commitment has been made and there are no conditions to be met relating to a grant which remain in control of the charity.

Support Costs

Support costs include central functions and have been allocated to activity cost categories on a basis consistent with the use of the resources, eg allocating property costs by floor areas, or per capital, staff costs by the time spent and other costs by their usage.

Fixed Assets

Tangible fixed assets for use by the charity, are capitalised if they can be used for more than one year, and cost at least £1,000. They are valued at cost or, if gifted, at the value to the charity on receipt.

Investments

Investments quoted on a recognised stock exchange are valued at market value at the year end. Other investment assets are included at trustees' best estimate of market value.

There has been no change to the accounting policies (Valuation rules and methods of accounting) since last year.

Depreciation

Depreciation has been calculated on a reducing balance basis. The rates applied per annum are as follows:

Fixtures and Fittings 25%

Equipment 25%

Computer Equipment 25%

2. TANGIBLE FIXED ASSETS

				Total
		Unrestricted Equipment	Restricted Equipment	2024/25
		£	£	£
Cost	01-Aug-24	0	0	0
Additions		0	0	0
Cost at	31-Jul-25	0	0	0
Depreciation	01-Aug-24	0	0	0
Charge		0	0	0
Depreciation at	31-Jul-25	0	0	0
Net Book Value	31-Jul-24	0	0	0
Net Book Value	31-Jul-25	0	0	0

The annual commitments under non-cancelling operating leases, capital commitments, and contingent liabilities are as follows:

31st July 2024:	None
31st July 2025:	None

3. INCOMING RESOURCES

	Note	Unrestricted Funds £	Restricted Funds £	TOTAL 2024/25 £	TOTAL 2023/24 £
a) Donations, Legacies and Similar Income					
Churches & Organisations		12,734	6,284	19,018	12,534
Gift Aid Refunds		1,605	0	1,605	1,517
Gifts from Individuals		19,604	199	19,803	11,857
Grants received		4,381	378,122	382,503	121,753
		38,324	384,605	422,929	147,660
b) Charitable Activities					
Training		1,043	0	1,043	255
Service Contracts		77,507	227,465	304,972	540,442
		78,550	227,465	306,015	540,697
c) Other Trading					
Fundraising		8,263	0	8,263	0
		8,263	0	8,263	0
d) Investment Income					
Interest		4,393	0	4,393	2,413
		4,393	0	4,393	2,413

		Unrestricted Funds	Restricted Funds	TOTAL 2024/25	TOTAL 2023/24
	Note	£	£	£	£
4. RESOURCES EXPENDED					
a) Expenditure on Raising Funds					
Fundraising Activities		8,441	0	8,441	5,353
		8,441	0	8,441	5,353

		Charitable Activities	Support Costs	TOTAL 2024/25	TOTAL 2023/24
	Note	£	£	£	£
b) Cost of Charitable Activities					
Young People's Activities		573,080	171,661	744,742	597,630
Replication		32,835	9,521	42,355	0
		605,915	181,182	787,097	597,630

Comparative figures relating to the classification of staff costs associated with fundraising activities have been reclassified to ensure consistency with the current year presentation.

There is no impact on total expenditure or net movement in funds.

c) Governance Costs

Legal & Professional Fees	847	0	847	0
Accountancy Fees	1,890	0	1,890	1,740
	2,737	0	2,737	1,740

5. FUNDS	Note	Balance			Balance	
		01/08/24 £	Income £	Expenditure £	Transfers	31/07/25 £
General Funds		5,269	129,530	84,890	(48,545)	1,363
Designated Funds						
Designated Reserve Fund		170,000	0	0	0	170,000
		175,269	129,530	84,890	(48,545)	171,363
Restricted Funds						
Medway		19,649	56,000	67,396	0	8,254
Darent Valley		17,644	50,888	65,367	0	3,165
Tunbridge Wells		4,000	47,193	47,193	0	4,000
Maidstone		8,000	42,885	42,885	0	8,000
Kent Management		0	46,601	46,601	0	0
QEQM		0	15,224	15,224	0	0
William Harvey		0	27,468	35,913	8,445	0
Canterbury		0	11,762	11,792	0	0
Wexham		0	26,752	39,690	12,937	0
RSCH		0	76,016	82,772	6,759	0
East Surrey		10,003	51,774	67,637	5,860	0
Epsom		2,776	55,389	64,920	6,756	0
St Heliers Epsom		0	12,903	12,903	0	0
Frimley		14,116	52,997	74,904	7,791	0
Replication		0	38,217	38,217	0	0
		76,188	612,070	713,385	48,545	23,419
		251,457	741,600	798,275	0	194,782

As the charity does not have endowment funds or other significant capital on which to draw, the trustees have designated a discretionary reserve to support the effective management of financial risk.

The purpose of this reserve is to enable an orderly wind-down of projects should they become significantly unfunded. In determining the appropriate level of the reserve, the trustees have considered the potential costs that could arise at the point a project becomes unfunded, including:

- statutory redundancy payments;
- contractual notice periods for employees;
- essential operating costs during any wind-down period, including ensuring that young people already engaged with Emerge can complete their normal period of support; and
- unavoidable contractual commitments with fixed terms or notice periods (for example, IT or telephone contracts).

The level of the designated reserve is reviewed regularly in line with the charity's reserves policy and operational footprint.

Designated funds remain part of unrestricted funds and may be redesignated by the trustees if circumstances change.

Restricted funds are represented by the charity's cash reserves and arise from funding that was to be expended only for the projects as specified above. Some funding is also restricted as to use (e.g. staff costs only).

Medway project was funded by Medway Council Shared Prosperity Fund, The Dorothy Kerin trust, Department of Health and Social Care - National Suicide Prevention Fund, NHS Charities Together, The Lauderdale Trust and Kent Community Foundation.

Darent Valley project was funded by the National Suicide Prevention Fund, The Dorothy Kerin Trust, The Lauderdale Trust, Henry Smith and NHS Charities Together.

Tunbridge Wells and Maidstone projects were funded by Colyer Fergusson, the Maidstone and Tunbridge Wells NHS Trust - Health Inequalities Fund, Department of Health and Social Care - National Suicide Prevention Fund and NHS Charities Together.

Kent Management, QEOM, Canterbury and William Harvey projects were funded by NHS Charities Together.

Wexham project was funded by Department of Health and Social Care - National Suicide Prevention Fund, Wexham Youth Activities, Berkshire Community Foundation and The Lauderdale Trust.

RSCH, East Surrey, Epsom and Frimley projects have benefited from contracts from Surrey County Council - Mental Health Investment Fund, Surrey Wellbeing Partnership and grants from Department of Health and Social Care - National Suicide Prevention funds. The RSCH has also received funding from Guildford Poyle Charities, and both RSCH and Epsom have received grants from The High Sheriff Youth Awards.

St Helier project is funded by a grant from the St Kilda Trust.

Hascombe is funded by Surrey County Council - Mental Health Investment Fund.

The **Replication project** is being funded by William Wates Memorial Trust.

6. CASH AT BANK AND IN HAND

	Unrestricted Fund £	Restricted Fund £	Total 31/07/2025 £	Total 31/07/2024 £
TSB	4,007	26,906	30,913	116,399
Equals Cards	0	3,596	3,596	954
Savings	170,000	112,538	282,538	228,145
Metro	0	5,465	5,465	7,623
PayPal	118	0	118	316
	174,125	148,505	322,630	353,436

7. DEBTORS

	Unrestricted Fund £	Restricted Fund £	Total 31/07/2025 £	Total 31/07/2024 £
Gift Aid due	3,424	0	3,424	1,517
Sundry Debtors	0	45,196	45,196	85,426
Prepayments	3,486	0	3,486	417
	6,910	45,196	52,106	87,359

8. CREDITORS: AMOUNTS FALLING DUE WITHIN ONE YEAR

	Unrestricted Fund £	Restricted Fund £	Total 31/07/2025 £	Total 31/07/2024 £
Salaries and NI	4,548	0	4,548	13,900
Sundry Creditors	5,539	2,324	7,864	4,523
Deferred Income	22,183	145,360	167,542	170,916
	32,270	147,684	179,954	189,339

Deferred income represents funds received in advance for future projects or for contracts spanning the financial year, recognised as income when the related activity is delivered.

9. STAFF COSTS AND NUMBERS

	2024/25 £	2023/24 £
Gross Wages and Salaries	632,972	477,372
Employer's NI Costs	40,037	28,896
Pension Contributions	24,916	23,210
	697,924	529,478

Employees who were engaged in each of the following activities:

	2024/25 TOTAL	2023/24 TOTAL
Activities in furtherance of organisation's objects:		
Total number of full-time and part-time employees	35	31
Equivalent number of full-time employees	16.8	14.1

The charity operates a PAYE scheme to pay all employed members of staff, and no employees received emoluments above £60,000 (2023/24 None). The total employee benefits of the key management personnel were £83,553 (2023/24 £88,463).

10. RECONCILIATION OF MOVEMENT IN CAPITAL AND RESERVES

The Charity is a Charitable Incorporated Organisation, registered with the Charity Commission, number 1171851. The Charity does not have a Share capital and has no income subject to Corporation Tax.

	2024/25	2023/24
	£	£
Surplus/Deficit for the financial year	(56,676)	86,046
	(56,676)	86,046
Balance brought forward	251,457	165,411
Transfer of Restricted funds	0	0
Closing Funds at 31st July	194,782	251,457

11. PAYMENTS TO DIRECTORS AND RELATED PARTIES

During the financial year Trustee Mrs Joy Wright received £32,760 in remuneration (salary and expenses) in her capacity as CEO.

Kevin McCormac claimed £176 in expenses relating to his role as chair as trustees.

12. RISK ASSESSMENT

The Trustees undertake a continuous and comprehensive review of the key strategic, operational and financial risks facing the charity. This review is informed by regular monitoring of performance against budget, project delivery, fundraising pipelines, staffing indicators, and compliance requirements. The Trustees are satisfied that appropriate systems and controls are in place to mitigate identified risks.

Funding Risk

A significant risk to the charity remains the ability to secure sufficient and sustainable income to support both ongoing operations and future development. Much of the charity's work is dependent on time-limited grants and service contracts, which are subject to fluctuations in funding cycles. To mitigate this risk, the charity seeks to maintain a diversified fundraising strategy across grant-making bodies, statutory partners, charitable trusts, community fundraising and individual donors.

The charity monitors its funding pipeline closely, proactively engages with funders well in advance of contract or grant expiry, and prepares multiple applications to reduce reliance on any single funding source. The Trustees also maintain a designated reserve to support financial resilience in the event of unexpected reductions in income.

Staff Recruitment and Retention Risk

Delivering the charity's services effectively relies on retaining skilled, experienced and empathetic staff. The charity operates in a sector where recruitment and retention can be challenging due to demand for specialist roles, rising employment costs and the emotional nature of the work. The Trustees recognise this as a key organisational risk. Mitigation measures include maintaining competitive pay structures within financial constraints, investment in supervision and pastoral support, training and professional development, and structured performance management. The charity also seeks to maintain a positive working culture, monitor turnover trends, and plan staffing levels to ensure continuity of service delivery.

Operational, Governance and Compliance Risks

The Trustees also review risks relating to safeguarding, data protection, IT systems, financial controls, and governance processes. Policies and procedures are reviewed regularly, and staff receive mandatory training. The Board receives regular risk reports and updates on any emerging issues. The Trustees believe that the combination of ongoing monitoring, financial reserves, and proactive risk management ensures the charity remains well-positioned to continue delivering public benefit, even during adverse conditions.

13. RESERVES POLICY

The charity recognises the propriety of not building up funds for which there are no clear expenditure plans. The charity's policy is to target a level of reserves that would permit any projects that become unfunded to be wound up in an orderly manner. Refer to note 5 for more on the obligations taken into account in forecasting this level. Reserves may only exceed this policy level in order to be able to respond to specific new opportunities. This situation is actively monitored to ensure that reserves do not build up unnecessarily.

14. PUBLIC BENEFIT

The charity acknowledges its requirement to demonstrate clearly that it must have charitable purposes or 'aims' that are for the public benefit. Details of how the charity has achieved this are provided in the Trustees' report. The Trustees confirm that they have paid due regard to the Charity Commission guidance on public benefit before deciding which activities the charity should undertake.