

ANNUAL REPORT

2021/2022



To advance physical, mental and social well-being among members of the public and healthcare professionals by contributing to the improvement of their level of knowledge, understanding and best practices concerning lifestyle and metabolic health.

Charity Registration Number 1171887
www.phcuk.org

Annual Report and Financial Statement
for the year ended 31st March 2022

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TRUSTEES' ANNUAL REPORT

The Trustees have pleasure in presenting their report along with the financial statements for the year ended 31 March 2022. The financial statements have been prepared in accordance with current statutory requirements, the charity's governing documents, and the recommendations of the Statement of Recommended Practice "Accounting and Reporting by Charities" (SORP 2005) and complies with applicable law. We have also referred to the guidance contained in the Charity Commission's guidance on public benefit when reviewing our aims and objectives for the year.

AIMS & OBJECTIVES

To advance physical, mental and social well-being among members of the public and healthcare professionals by contributing to the improvement of their level of knowledge, understanding and best practices concerning lifestyle and metabolic health.

VISION, MISSION & VALUES

Our vision is a society where everyone can achieve their optimal health.

Our mission is to empower people to take control of their health and campaign for effective health policies.

The values by which we work are; evidence-based, practical, inclusive, courageous and compassionate.

PUBLIC BENEFIT

The trustees have referred to the guidance contained in the Charity Commission's general guidance on public benefit whilst reviewing the Public Health Collaboration's mission, vision and objectives, and in planning the future activities of the charity.



ACHIEVEMENTS & PERFORMANCE

NEW BEGINNINGS

We started off this year by revealing our new logo and launching our new website. This was the best possible way to start the year after the previous year's challenges. The process of coming up with a new logo started in February 2021 and took about a month before we settled on one that felt right. It was a difficult task for the graphic designer because we wanted it to come across as professional yet friendly as well as new yet familiar. There were several attempts where we felt like we were getting close, but we knew it wasn't quite there yet.

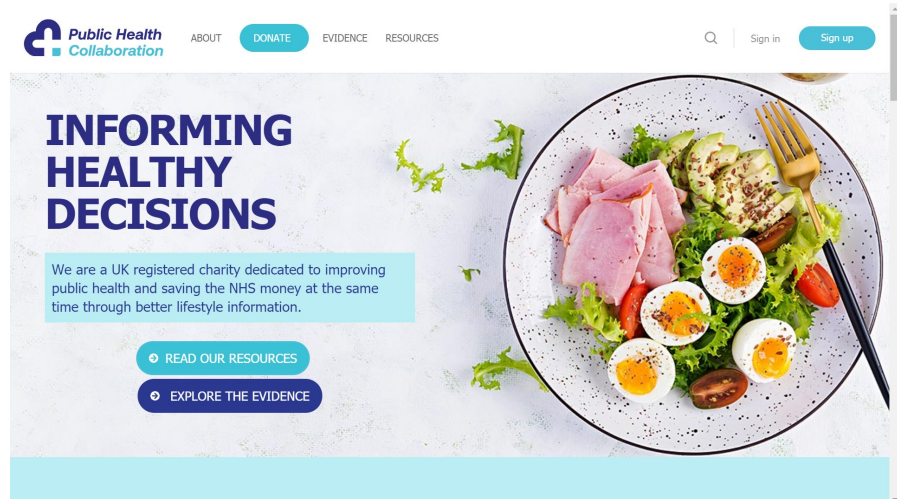


Eventually, after many back and forths with the graphic designers, they came up with the one that we felt was professional yet friendly as well as being new yet familiar. In particular, it was the icon that encapsulated what the Public Health Collaboration stands for. With both the medical cross that represents professionalism and the heart that represents passion.



Once the logo was finalised it was time to create a new website. We had been using the same website since we started in 2016, which was functional but not altogether user friendly. Again, we wanted the website to come across as professional yet friendly as well as new but familiar. We also wanted to have the ability to

create a private members website, so that we could create a space just for our members. The web designer did a fantastic job and as well as ourselves being happy, the feedback from our community has been resoundingly positive.



ANNUAL CONFERENCE 2021

We launched the new logo and website in April 2021, which was just in time for our annual conference on 8th and 9th May 2021. Due to the continually changing circumstances surrounding Covid, we decided to host the event online for the second year running. The experience from the previous year's conference was helpful because we now had a good understanding of how to host an online event smoothly.



In total, we managed to get 18 speakers from around the world to present their talks for our conference. With an additional 2 talks that were presented by multiple people. One was made by healthcare professionals who were presenting the idea of [rethinking type 1 diabetes](#). The other was presented by people who had [health success stories](#) to tell. As a result of these magnificent talks, we also managed to raise just over [£1,200 in funds](#).

Our [YouTube channel](#) remains one of our most successful places to help share our information for the public to benefit from. Over the conference weekend specifically, we gained 253 subscribers, taking us to 17,700 subscribers in total with 3,800 hours of watch time from viewers. However, over the entire year we gained just over 4,000 subscribers, taking us to just under 22,000 subscribers with 86,400 hours of watch time.

REMEMBERING DR KAILASH CHAND OBE

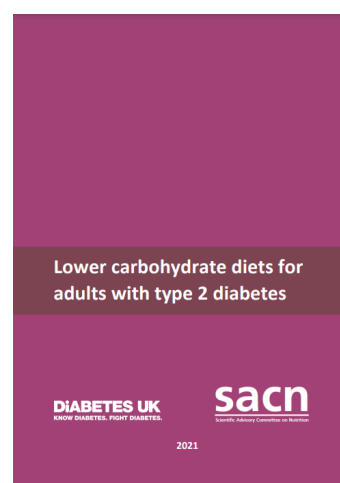
On 26th July 2021 we learnt the sad news that one of our founding members and advisory committee had passed away. Dr Kailash Chand OBE was an award-winning GP, leading NHS campaigner and one of the most influential doctors in the UK. He was also a kind and wonderful soul who will be sorely missed. Dr Chand had obituaries in many publications but three stood out; [Pulse](#), [BMA](#) and [The Guardian](#). May he rest in peace.



SPREADING THE MESSAGE

Our Ambassadors Programme remains one of the main ways we spread the message of how powerful lifestyle can be for improving health. With over 250 volunteers, our Ambassadors are located up and down the country liaising with NHS GP practices to help them set up free lifestyle support groups. The past year has been challenging for Ambassadors, but they have adapted very quickly in being able to run their groups online. However, the hope is that in the near future they will be able to return to in-person groups to help people face to face.

Last year we published a [case study book](#), which was very well received by healthcare professionals across the country. This is but part of the tools we are using to change the hearts and minds of healthcare professionals to better utilise the power of lifestyle. Although the work of the Ambassadors might not have directly influenced Public Health England (PHE), it does seem as though there is a consensus forming. On 26th May, [PHE released a report](#) from the Scientific Advisory Committee on Nutrition (SACN) and Diabetes UK, which suggests that *“a diet lower in carbohydrates is an effective option up to 6 months for adults living with type 2 diabetes and overweight or obesity.”* This acknowledgement of what we’ve been advocating for since the charity started is a big step in the right direction and we congratulate PHE, SACN and Diabetes UK in taking it.





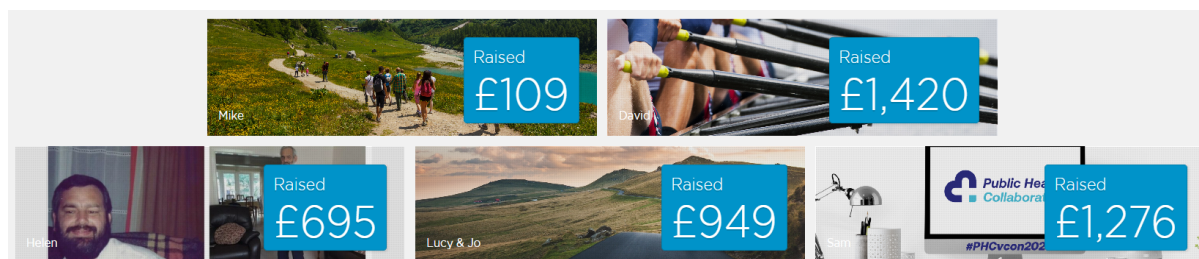
Following this on 29th July, five of our scientific advisory committee members published a peer-reviewed paper in the [Journal of Human Nutrition and Dietetics](#). The paper was titled “*Dietary strategies for remission of type 2 diabetes: A narrative review*” and was co-authored with representatives from the British Dietetic Association (BDA) and Diabetes UK. One of the major findings from the paper was that “*low carbohydrate diets have been demonstrated as being effective in facilitating weight loss and remission of T2DM*”. This acknowledgment of the growing evidence that we have been championing is most welcome and we look forward to further collaborations with the BDA and Diabetes UK in the near future.

Our library of [sugar infographics from Dr David Unwin](#) continues to grow, which are now available in 18 different languages. In addition to the sugar infographics being translated we also received an [Arabic translation of our Healthy Eating Guidelines](#) report from Dr Arwa Amin. She has translated several of the sugar infographics as well, and so we wanted to give her a special thank you for all of her hard work.



FUNDRAISING

In addition to this year’s virtual conference raising extra funds for the charity, our members and volunteers have gone above and beyond, to do their bit. Starting off with Fitness Trainer, Lucy and Chiropractor, Jo who rode 100 miles of the South Downs Way to [raise £949](#). Then there was Mike, who is part of a lifestyle support group in Bognor Regis. Mike’s group challenged themselves to 200,000 steps each over the period of a month, which they managed to do as well as [raising £109](#) for the charity.



After that, we received the saddening news that one of our most passionate ambassadors, John Collyer, passed away. John was a very kind man and superb advocate for our work. So, it was such an honour that in lieu of flowers his wife asked for donations to the PHC, which [raised £695](#). To find out more about John, you can watch his conference talk from 2020 on our [YouTube channel](#). The last fundraiser of this year was from another ambassador, David Sogan, who rowed 60km the day after his 60th birthday in memory of his father and a friend, who sadly passed away 3 years prior from leukaemia. The sponsored row gave us the best boost of the year, [raising £1,420](#).

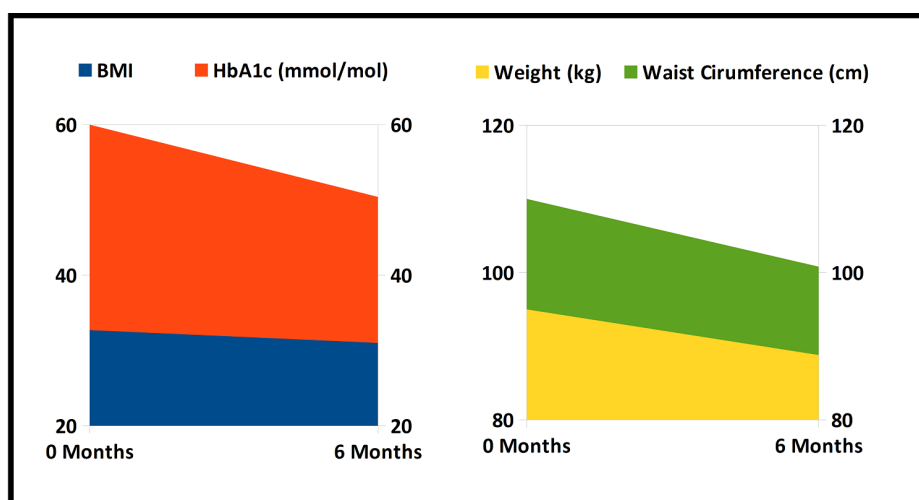
THE LIFESTYLE CLUB

In last year's report we announced that we were in the early stages of a new service for people living with prediabetes and type 2 diabetes called [The Lifestyle Club](#) (TLC). With that in mind, it's with pleasure to share that over the past year we have completed a pilot study for TLC as well as having run two further rounds of courses for the service in collaboration with several NHS GP practices.

To give a brief overview, TLC initially guides people in groups of 6-12 participants through an 8 week course, facilitated by a health coach via video conferencing. Alongside the sessions, participants are sent a 100 page printed handbook to refer to during in and outside of sessions. Once they've completed the 8 week course, they are invited to monthly drop-in sessions with other TLC participants from around the country as part of the ongoing support that's on offer.



Over the past year, we have had almost 300 people complete the initial course through 41 individually run courses by our 4 health coaches. After 6 months the results showed a weight reduction of 6.2kg, a waist circumference reduction of 9.2cm and an HbA1c reduction of 9.8mmol/mol. Also, 86.4% of participants either reduced or entirely stopped their medication for type 2 diabetes.



The plan for next year is to train 4 more health coaches, to help with the increasing demand for the service. We also plan to employ someone full-time to be responsible for the day to day running of TLC as well as helping to develop it into a scalable service that could effectively help support the NHS.

FINANCIAL REVIEW

- Total incoming resources for the year to 31 March 2022 amounted to £87,758 (year ended 05 April 2021 £120,128).
- Total resources expended for the year to 31 March 2022 amounted to £123,620 (year ended 05 April 2021 £33,044).
- The Charity had £94,910 (year ended 05 April 2021 £130,772) in its general fund at the year ended 31 March 2022.
- As at 31 March 2022, cash at bank and in hand held by the charity was £137,652 (05 April 2021 £130,772), with a healthy net current assets figure of £94,910 (05 April 2021 £130,772).
- The purposes of the different types of funds are explained in the accounting policies as shown in the financial statements.
- Notes 13 and 14 to the financial statements provide further explanation.

RESERVES POLICIES

Reserves Policy

Unrestricted reserves are one fund that covers the day-to-day operations of the charity.

Restricted funds are those for a pre-agreed purpose where the donor has imposed conditions on the use of the funds. The policy for such funds is to adhere to the relevant conditions; temporary timing differences for income received may occur at the reporting date and is the reason for negative balances on some funds.

Designated reserves are built up of surplus unrestricted reserves assigned for specific purposes and are explained in more detail below. The trustees have decided that setting aside funds in this way is an effective financial discipline which helps the charity make the best use of its resources. These are reported as follows:

- General Reserve - to cover 3-6 months running costs and any potential wind-up costs of the charity.

Fundraising Statement

The Public Health Collaboration does conduct fundraising activities. Fundraising is primarily from donations through the website, and, to a lesser extent, delivers fundraising through sponsored events and direct marketing appeals. The charity takes its responsibilities under the Data Protection Act and GDPR very seriously and ensures all activities are conducted in line with best practice guidance issued by the Institute of Fundraising and the Fundraising Regulator.

Risk Management

The Trustees have assessed the major risks to which the Charity is exposed, in particular those relating to the operations and finances of the Charity and are satisfied that systems are in place to mitigate the risks.

Risks considered relate to the current economic climate, external pressures and future fundraising opportunities. The Trustees have identified that the current risks facing the Public Health Collaboration are:

- Large food companies resisting attempts to change current dietary guidelines including reversing the sugar tax.
- Pharmaceutical companies resisting attempts to change current health guidelines on treating Type 2 Diabetes and other metabolic diseases.
- Rising fuel and energy prices, inflationary pressures and economic recession and their impact on the Charity.
- Securing long term funding for the future.

PLANS FOR THE FUTURE

Looking at the year ahead, we are planning to host our 7th annual conference in-person at the University of Bristol. We had booked this for our 2020 conference but the University has been very kind in holding our deposit until we are able to hold the event. The speakers that we had originally booked for the 2020 conference have also been very understanding in agreeing to shift their participation to 2022. We're very excited to have well renowned speakers from all over the world as well as many UK-based professionals, who are doing some incredible work.



In addition, to our usual annual conference Dr Jen Unwin from our Scientific Advisory Board has organised the first International Food Addiction conference. We plan to explore this field in greater detail over the next year and beyond.

Lastly, for the past 6 years we have been operating with three terrific trustees, but it is becoming apparent that as the charity grows, we need more people with a wider base of skills and expertise. With that in mind, we have begun the process of recruiting new members for the Board of Trustees. After widely promoting the [recruitment pack](#), we have received applications from 25 interesting individuals. We are now in the midst of the interview process and plan to appoint new trustees in the coming weeks. Although it's going to be a lot of hard work, 2022 is sure to be a very exciting year that we hope will bring about more improvements in public health.



STRUCTURE, GOVERNANCE & MANAGEMENT

Public Health Collaboration is a Charitable Incorporated Organisation, number 1171887.

The charity has a Board of Trustees, who are responsible for the overall governance of the charity and a Scientific Advisory Committee, who ensure that the charity is giving accurate and evidence-based advice, based on the latest scientific research.

The charity recruits new trustees to the board by advertising nationally, interviewing potential candidates and then appointing. Successful candidates are formally welcomed at the next trustees meeting, following their appointment. Each newly appointed trustee chooses how long they wish to stand for, 2 - 4 years, and can stand for another term.

Following a formal recruitment process a number of new trustees joined the board during 2022. These trustees meet the gaps in skills and experience of the 2020/2021 board and have all undergone a formal induction process.

Strategic decisions are made by the Board of Trustees, with the day-to-day management of the charity delegated to the Director, Sam Feltham.

The charity recruits new members to the Scientific Advisory Committee by identifying gaps in the knowledgebase and asking the current Committee members to recommend relevant professionals. The potential candidates are approached, interviewed and then appointed.

REFERENCE & ADMINISTRATION DETAILS

Patrons

Steve Bennett
Hannah Sutter
Giancarlo and Katie Caldesi
Rosemary Wellman

Trustees

Dr Joanne McCormack (Chair)
Dr David Jehring (Vice Chair from June 2022) (from April 2022)
Dr Ian Lake (Vice Chair to June 2022)
Giles Corby FCA (Treasurer) (from April 2022)
Ellen Calteau RD (from April 2022)
James Capon (from April 2022)
Yvonne Lane (from April to October 2022)
Graham Phillips FRPharmS (from April 2022)
Benjamin Rubin (from April 2022)
Paul Whittle (from April 2022)
Olivia Khwaja (from April 2022)
Lesley Adams (from April 2022)

Scientific Advisory Committee

Dr Aseem Malhotra (President)
Dr David Unwin (Vice President)
Dr Joanne McCormack (PHC Board representative)
Dr Ian Lake (PHC Board representative)
Dr Jen Unwin
Dr Ayan Panja (to May 2022)
Dr Trudi Deakin
Dr Campbell Murdoch
Dr Katharine Morrison
Dr Tamsin Lewis (to July 2022)
Dr Bob Gill (from Nov 2022)
Isabella Cooper (from Nov 2022)
Dr Ali Ibrahim (from Nov 2022)
Dr Abbi Lulseged (from Nov 2022)

Director

Sam Feltham

Registered Charity Number

1171887

Registered Address

C/o Reed Smith, The Broadgate Tower, 20 Primrose Street, London, EC2A 2RS

Bankers

HSBC Bank PLC, 23/24 Paddington House, Festival Place, Basingstoke, Hants, RG21 1LJ

Solicitors

Reed Smith, The Broadgate Tower, 20 Primrose Street, London, EC2A 2RS

Independent Examiner

Beechtree Bookkeeping, 9 Wallaford Road, Buckfastleigh, Devon, TQ11 0AR

Accountant

Merlin Accountancy Services Ltd, 2nd Floor, 33 Longbrook Street, Exeter, Devon, EX4 6AW

STATEMENT OF TRUSTEES' RESPONSIBILITIES


Charity Law requires the Trustees to prepare financial statements for each financial period, which give a true and fair view of the state of affairs of the company and the profit or loss for that period. In preparing those financial statements the Trustees are required to:

- Select suitable accounting policies and then apply them consistently;
- Make judgments and estimates that are reasonable and prudent;
- Prepare the financial statements on the going concern basis, unless it is inappropriate to presume that the company will continue to operate;
- State whether the policies adopted are in accordance with the charities SORP and with applicable accounting standards, subject to any material departures disclosed and explained in the Financial Statements.

The Trustees are responsible for keeping proper accounting records, which disclose with reasonable accuracy at any time the financial position of the charity and enable them to ensure that financial statements comply with the Charities Act 2011, Charity (Accounts and Reports) Regulations 2008 and the provisions of the governing document. The Trustees are also responsible for safeguarding the assets of the charity and, hence, for taking reasonable steps for the prevention and detection of fraud and other irregularities.

As the charities trustees, we certify that:

- So far as we are aware, there is no relevant information of which the charities Independent Examiners are unaware, and
- We have taken all the steps that we ought to have taken in order to make ourselves aware of any relevant information and to establish that the charity's Independent Examiners are aware of that information.

Signed: 

Name: Dr Joanne McCormack

Date: Monday 23rd January 2023

**INDEPENDENT EXAMINER'S REPORT TO THE MEMBERS OF
PUBLIC HEALTH COLLABORATION
YEAR ENDED 31ST MARCH 2022**

I report on the accounts of the charity for the year ended 31 March 2022, which are set out on pages 15 to 22.

Respective Responsibilities of Trustees and Examiner

The charity's trustees are responsible for the preparation of the accounts. The charity's trustees consider that an audit is not required for this year under section 144(2) of the Charities Act 2011 (the 2011 act) and that an independent examination is needed.

It is my responsibility to:

1. Examine the accounts under section 145 of the 2011 Act;
2. To follow the procedures laid down in the General Directions given by the Charity Commission under section 145(5)(b) of the 2011 Act; and
3. To state whether particular matters have come to my attention.

Basis of Independent Examiner's Report

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

Independent Examiner's Statement

In the course of my examination, no matter has come to my attention:

1. which gives me reasonable cause to believe that, in any material respect, the trustees have not met the requirements to ensure that:
 - a. proper accounting records are kept in accordance with section 130 of the 2011 Act; and
 - b. accounts are prepared which agree with the accounting records and comply with the accounting requirements of the 2011 or
2. to which in my opinion, attention should be drawn in order to enable a proper understanding of the accounts to be reached.

P. Northcott

P Northcott
Beechtree Bookkeeping
9 Wallaford Road, Buckfastleigh
Devon, TQ11 0AR

Signed:.....

.....

Date: 25/01/2023
Date:.....

PUBLIC HEALTH COLLABORATION
STATEMENT OF FINANCIAL ACTIVITIES
(INCLUDING INCOME AND EXPENDITURE ACCOUNT)
Year Ended 31 March 2022

	Notes	Total Funds 2022	Total Funds 2021
		£	£
Incoming Resources			
Donations and Legacies	3	63,120	120,128
Other Trading Activities	4	11,036	-
Income from Charitable Activities	5	13,602	-
Total Incoming Resources		87,758	120,128
Resources Expended			
Expenditure on Raising Funds	6	7,565	-
Expenditure from Charitable Activities	7	116,055	33,044
Total Resources Expended		123,620	33,044
Net Income/(Expenditure) for the year		(35,862)	87,084
Total Funds Brought Forward at 6th April 2021	13	130,772	43,688
Total Funds Carried Forward at 31st March 2022	13	94,910	130,772

The statement of financial activities includes all gains and losses recognised in the period.

All income resources and resources expended derive from continuing activities. No operations have been discontinued or acquired during the year.

The notes on pages 17 to 22 form part of the Financial Statements.

PUBLIC HEALTH COLLABORATION
BALANCE SHEET
Registered Charity Number: 1171887
As at 31 March 2022

		2022		2021	
	Notes	£	£	£	£
Current Assets					
Debtors and Prepayments	20	938		-	
Cash at bank and in hand	20	137,652		130,772	
		138,590		130,772	
Current Liabilities					
Amounts falling due within one year	21	(43,680)		(-)	
Net Current Assets			94,910		130,772
Net Assets			94,910		130,772
Total Funds					
Unrestricted Funds	21				
			94,910		130,772

Approved by the Board of Trustees on Monday 23rd January 2023 and signed on its behalf by:

Dr Joanne McCormack

Dr Joanne McCormack

PUBLIC HEALTH COLLABORATION
NOTES TO THE FINANCIAL STATEMENTS
Year Ended 31 March 2022

1. CHARITY STATUS

The charity is a Charitable Incorporated Organisation (CIO) and has no share capital and is registered in England and Wales. The CIO was registered on 17th March 2017, and the CIO's registered number and registered office address can be found within the Reference and Administration details on page 7 - 8 of the financial statements.

2. ACCOUNTING POLICIES

a. Basis of Preparation of Financial Statements

The financial statements have been prepared in accordance with Accounting and Reporting by Charities: Statement of Recommended Practice applicable to charities preparing their accounts in accordance with the Financial Reporting Standard applicable in the UK and Republic of Ireland (FRS 102 - effective 1 January 2015) - (Charities SORP FRS 102) and the Charities Act 2011. In drafting these financial statements, the charity has also takes advantage of the exemptions for smaller charities contained in Charity Commission publication CC17. Public Health Collaboration meets the definition of a public benefit entity under FRS 102. Assets and liabilities are initially recognised at historical cost or transaction value unless otherwise stated in the relevant accounting policy note(s). The financial statements are presented in pound sterling (£) which is the charity's functional and presentation currency.

b. Preparation of the financial statements on a going concern basis

Public Health Collaboration reported a net deficit in the reporting period of £35,862, with total funds held at the end of the period of £94,910. The trustees are of the view that, on the above basis, the charity is a going concern. Public Health Collaboration is reliant on donations and memberships to continue providing their core services. The economic outlook and cuts in public spending, are a potential area of financial uncertainty for the charity.

c. Incoming Resources

Donations and memberships are recognised in the financial statements on the date they are received. Income from other trading activities, fundraising and charitable activities is included in the period in which it relates. Grants, whether they are of a general nature or for a specific purpose, are recognised as a charitable activity and recorded at the date received.

d. Resources Expended

All expenditure is accounted for on an accruals basis and has been classified under headings that aggregate all cost related to the category. Where costs cannot be directly attributed to particular headings they have been allocated to activities on a basis consistent with use of resources. Costs of generating funds are those costs incurred in attracting donations, and those incurred in trading activities that raise funds. Charitable activities include charitable distributions and the costs involved in the provision of services that the Public Health Collaboration provides. Governance costs include those incurred in the governance of the charity and its assets and are primarily associated with constitutional and statutory requirements. Resources expended include attributable VAT which cannot be recovered.

e. Taxation

Under section 505 ICTA 1988 the charity is exempt from certain taxes. Full account is taken of tax credits attaching to gifts and qualifying donations. Public Health Collaboration has charitable status and is exempt from Income Tax on income it receives.

f. Debtors

Trade and other debtors are recognised at the settlement account due. Prepayments are valued at the amount prepaid.

g. Creditors and Provisions

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

h. Financial instruments

Public Health Collaboration only has financial assets and financial liabilities of a kind that qualify as basic financial instruments. Basic financial instruments are initially recognised at transaction value and subsequently measured at their settlement value with the exception of bank loans which are subsequently measured at amortised cost using the effective interest method. Financial assets, includes trade receivables, cash and balances and investments are recognised at transaction value. Financial liabilities, includes trade payables and recognised at transaction value. Trade payables are obligations to pay for goods and services required from suppliers in the course of business activities.

i. Reserves Policies

Unrestricted reserves are one fund that covers the day-to-day operations of the charity. Restricted funds are those for a pre-agreed purpose where the donor has imposed conditions on the use of the funds. The policy for such funds is to adhere to the relevant conditions; temporary timing differences for income received may occur at the reporting date and is the reason for negative balances on some funds. Designated reserves are built up of surplus unrestricted reserves assigned for specific purposes and are explained in more detail below. The trustees have decided that setting aside funds in this way is an effective financial discipline which helps the charity make the best use of its resources.

3. DONATIONS AND LEGACIES

	Year Ended 31 March 2022	Year Ended 05 April 2021
Donations	£63,120	£120,128
	£63,120	£120,128

4. OTHER TRADING ACTIVITIES

	Year Ended 31 March 2022	Year Ended 05 April 2021
Books and Publications	£10,212	-
Conference Income	£744	-
Merchandise Income	£80	-
	£11,036	

5. INCOME FROM CHARITABLE ACTIVITIES

	Year Ended 31 March 2022	Year Ended 05 April 2021
Fundraising Income	£3,137	-
Membership	£10,465	-
	£13,602	-

6. EXPENDITURE ON RAISING FUNDS

	Year Ended 31 March 2022	Year Ended 05 April 2021
Books and Publications	£5,606	-
Conference Expenditure	£272	-
Merchandise Expenditure	£1,134	-
Other Events Expenditure	£553	-
	£7,565	-

7. EXPENDITURE FROM CHARITABLE ACTIVITIES

	Year Ended 31 March 2022	Year Ended 05 April 2021
Advertising	£952	-
Bank Charges	£1,117	-
Computer Costs	£10,843	-
Insurance	£185	299
Printing, Postage and Stationery	£1,511	2,004
Telephone and Internet	-	2,911
Travel and Accommodation	2,716	-
Staff Costs	33,750	26,880
The Lifestyle Club	59,130	-
Governance	5,851	950
	116,055	33,044

8. STAFF COSTS

	Year Ended 31 March 2022	Year Ended 05 April 2021
Salaries	£33,750	£26,880

The staff costs relate to the salaries paid to the full time Director who runs the Public Health Collaboration.

The Key Management Personnel of Public Health Collaboration is the Director.

No employee received remuneration in excess of £60,000 in either the current or previous year.

The average number of employees during the year were 1 (2021: 1).

9. TRUSTEE REMUNERATION AND EXPENSES

During the year no reimbursement of expenses or remuneration was paid to Trustees.

10. MOVEMENTS IN TOTAL FUNDS FOR THE YEAR

This is stated after charging:	Year Ended 31 March 2022	Year Ended 05 April 2021
Independent Examiner's Fee	£110	£350

11. DEBTORS AND PREPAYMENTS

Due Within One Year	Year Ended 31 March 2022	Year Ended 05 April 2021
Prepayments	£938	-
	£938	-

12. CASH AT BANK AND IN HAND

	Year Ended 31 March 2022	Year Ended 05 April 2021
HSBC – Current	£137,652	£130,772
	£137,652	£130,772

13. CREDITORS: AMOUNTS FALLING DUE WITHIN ONE YEAR

	Year Ended 31 March 2022	Year Ended 05 April 2021
Creditors	£3,600	-
Accruals	£39,634	-
Paypal Account	£446	-
	£43,680	-

14. MOVEMENT IN FUNDS

	As at 06 April 2021	Income	Expenditure	As at 31 March 2022
General Fund	£130,772	£87,758	£123,620	£94,910
Total Funds	£130,772	£87,758	£123,620	£94,910

Unrestricted reserves are one fund that covers the day-to-day operations of the charity.

Restricted funds are those for a pre-agreed purpose where the donor has imposed conditions on the use of the funds. The policy for such funds is to adhere to the relevant conditions; temporary timing differences for income received may occur at the reporting date and is the reason for negative balances on some funds.

Designated reserves are built up of surplus unrestricted reserves assigned for specific purposes and are explained in more detail below. The trustees have decided that setting aside funds in this way is an effective financial discipline which helps the charity make the best use of its resources. These are reported as follows:

- General Reserve - to cover 3-6 months running costs and any potential wind-up costs of the charity.

15. ANALYSIS OF NET ASSETS BETWEEN FUNDS

	Total Funds As at 31 March 2022	Total Funds As at 05 April 2021
Current Assets	£138,590	£130,772
Current Liabilities	(£43,680)	-
Net assets	£94,910	£130,772

16. RELATED PARTIES

Other than the following, no trustee or connected person has received fees or emoluments, or reimbursement of expenses incurred during the year.

Merlin Accountancy Services Ltd

A company owned by Giles Corby, became a trustee and treasurer of the Public Health Collaboration in April 2022. During the year donations of £144 were received by the charity and £376 was accrued for bookkeeping and accounts work for the year ended 2021/2022.

	2022	2021
Amount due to related party at the balance sheet date	£376	-