TURNING POINT

England & Wales · Charity number 234887

Details

Other names	TURNING POINT LIMITED
Status	Registered
Legal form	Charitable company
Company number	00793558
Registered	1964-05-26
Register	View on the Charity Commission register

Contact

Address	Turning Point America House 2 America Square London EC3N 2LU
Phone	02074817600
Email	info@turning-point.co.uk
Website	www.turning-point.co.uk

Activities

Objects: The objects of the Company are, for the public benefit, to promote or assist in promoting the advancement of health of: those with a learning disability; and/orthose at risk of, or with: i. mental health conditions; and/or ii. drug or alcohol use, misuse or dependency; and/oriii. other addictive behaviours; and/or iv. other related conditions which the Trustees may determine from time to time; in particular (but not exclusively) by the provision of services, treatment, care, rehabilitation, housing, training, education and employment support.

Activities: Turning Point provides health and social care services for people with a learning disability and also people at risk of, or with a mental health diagnosis, mental health issues, drug or alcohol use, misuse or dependency or other addictive behaviours.

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Classification

- **How:** Provides Buildings/facilities/open Space, Provides Services, Provides Advocacy/advice/information, Other Charitable Activities
- **What:** The Advancement Of Health Or Saving Of Lives
- **Who:** Other Defined Groups, The General Public/mankind

Geography

- **Area of benefit:** UNITED KINGDOM
- Throughout England

Finances

Period end	Income	Expenditure	Assets	Employees
2025-03-31	£192,496,000	£191,535,000	£-1,581,000	3521
2024-03-31	£165,647,000	£163,107,000	£5,391,000	3210
2023-03-31	£152,936,000	£151,428,000	£3,616,000	4818
2022-03-31	£143,694,000	£141,230,000	£-2,613,000	4390
2021-03-31	£132,812,000	£128,361,000	£-5,656,000	4501

Trustees

Name	Role	Appointed
PETER HAY	Chair	2018-09-11
Christian Van Stolk		2020-12-11
Clare Ashton		2023-09-12
David Slegg		2023-09-12
Dr Chris Streather		2025-12-17
Dr Louise Sell		2026-06-01
Edith Dawn Kenson		2023-01-17
Grieg Sharman		2024-07-01
JULIE BASS WILLIAMS		
Nicola Gilham		2018-05-08

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TURNING POINT

England & Wales - Charity number 234887

Accounts

Company Number:
00793558
Charity Number:
234887
Housing RP Number:
H2509

TURNING POINT

(A company limited by guarantee)

ANNUAL REPORT AND FINANCIAL STATEMENTS

FOR THE YEAR ENDED 31 MARCH 2025

TURNING POINT

(A company limited by guarantee)

CHARITY INFORMATION

Turning Point is a private company limited by guarantee without share capital, incorporated in England on 27 February 1964.

NON-EXECUTIVE DIRECTORS
- Peter Hay (Chair)
- Nicola Gilham
- Christian Van Stolk
- Dr. Victoria Tzortziou Brown
- Dawn Kenson

EXECUTIVE DIRECTORS
- Julie Bass
- David Slegg
- Clare Taylor
- Greig Sharman (appointed 1 July 2024)

All of the above are key management personnel of Turning Point Group and the Charity

REGISTERED OFFICE
America House
2 America Square
London
EC3N 2LU

REGISTERED COMPANY NUMBER
00793558

REGISTERED CHARITY NUMBER
234887

REGISTERED PROVIDER NUMBER
H2509

AUDITORS
Crowe U.K. LLP
55 Ludgate Hill
London
EC4M 7JW

BANKERS
Barclays Bank PLC
Level 11
20 Chapel Street
Liverpool
L3 9AG

SOLICITORS
Eversheds Sutherland (International) LLP
Eversheds House
6 Stanley Street
Salford
M3 5GX

We are inspired by possibility. The possibility that every single one of us can change and grow, make choices, and live healthier and happier lives. With our expertise in working in the areas of substance use, mental health, sexual health, healthy lifestyles and learning disability, including with people with complex needs, we aim to continue to adapt to an ever changing external environment in order to extend our reach and support more people to improve their health and wellbeing.

TURNING POINT

(A company limited by guarantee)

DIRECTORS' REPORT
FOR THE YEAR ENDED 31 MARCH 2025

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1 Who we are and what we do

WHO WE ARE

At Turning Point, we constantly find ways to support more people to discover new possibilities in their lives. We are a leading social enterprise, designing and delivering health and social care services in the fields of substance use, mental health, learning disability, autism, acquired brain injury, sexual health, homelessness, healthy lifestyles, and employment. Over the last sixty years, we have grown and changed, just as the society we live and work in has too. We currently work in over 270 locations across England, empowering those we support to improve their health and wellbeing, learn, and bring about positive change in their lives.

WHAT WE DO

We are continually inspired by the stories, experiences, and possibilities created by those we meet. We have expertise in delivering innovative, integrated support in a range of places including people's homes, workplaces, communities, and specialist settings.

Most of our services are commissioned by the public sector, but increasingly we are expanding the ways in which people can access and pay for our support directly. We work closely with local authority adult social care and public health teams, the NHS, Integrated Care Boards (ICB), the Ministry of Justice, HM Prison and Probation Service, the Office for Health Improvement and Disparities (OHID), the Department for Work and Pensions and many private, benevolent and voluntary community and social enterprise (VCSE) organisations. As a social enterprise, we invest any surplus we make back into the organisation, for the benefit of the people we support.

OUR YEAR IN NUMBERS

In 2024-25

Turnover	**£191.9m**
Total number of people supported in 2024-25	**202,694**
Total number of people supported by our mental health services	**102,531**
Total number of people supported by our drug and alcohol services	**74,070**
Total number of people supported by our healthy lifestyle's services	**12,594**
Number of colleagues	**5,194**
Total number of people supported by our sexual health services	**1,444**
Total number of people supported by our learning disability services	**1,035**
Total number of peer mentors	**234**
Total number of volunteers	**82**
Total number of locations	**270**
Percentage of employees with lived experience of the issues facing people we support for themselves or as a carer*	**60%**
Regulated services rated Good or Outstanding by CQC	**96%**

* Based on Colleague Engagement Survey 2024 responses

2 Our vision and values

Our vision

To constantly find ways to support more people to discover new possibilities in their lives.

The quality of our services means everything to us. The people we work with inspire us and in turn we look for new ways to inspire change. We owe it to the people we work with to grow and shape the future, because we believe in what we do.

Our values

- We all communicate in an authentic and confident way that blends support and challenge.
- We commit to building a strong and financially viable Turning Point together.
- We deliver better outcomes by encouraging ideas and new thinking.
- We treat each other and those we support as individuals however difficult and challenging.
- We believe that everyone has the potential to grow, learn and make choices.
- We are here to embrace change even when it is complex and uncomfortable.

3 Chair and Chief Executive's statements

CHAIR'S STATEMENT

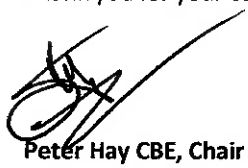
As we celebrate our sixtieth anniversary, I am immensely proud to reflect on the accomplishments of our organisation. This year's report stands as a testament to the extraordinary achievements of those we support and the unwavering dedication of our colleagues, exemplifying what it truly means to be inspired by possibility.

My board members and I have had the privilege of engaging with many of our services and participating in a diverse array of 60th anniversary events. These included the summer exhibition to showcase the "Story of Turning Point in 60 objects" campaign held at Kensington Palace, the inaugural My Voice lived experience event in Birmingham, and the launch of our Health and Care Futures Essay collection at Westminster. Meeting so many remarkable individuals and hearing their stories has been profoundly inspiring. There were also strong messages from people about the future, and a desire to tackle the stigma and labelling that have been a feature of the lives of too many people.

I extend my gratitude to the dedicated team led by Julie Bass, who continue to reach more people than ever before, upholding the core values and corporate goals of our organisation.

Our 61st object, a packet of flower seeds, could not be more fitting to represent the future of Turning Point and our mission. This vibrant symbol embodies hope, new beginnings, growth, and potential. While the future remains uncertain and unknown societal changes lie ahead, we remain steadfast in our commitment to our values and our work, striving for the benefit of those yet to come.

Thank you for your continued support and dedication. Together, we will continue to make a difference.



Peter Hay CBE, Chair of the Turning Point Board

CHIEF EXECUTIVE'S STATEMENT

Last year was a momentous year for Turning Point as we turned 60. We supported over 200,000 people and our turnover topped £191m. 79% of colleagues answered our annual colleague engagement survey, with 79% of those who completed the survey agreeing that we put our values into practice. 87% of the people we support told us they have an overall positive experience of support from Turning Point.

Lots of activities took place to mark our 60th year, including parties thrown by Turning Point services up and down the country. In June we held an exhibition called The History of Turning Point in 60 Objects at Kensington Palace. The exhibition showcased the stories and objects of many people we support, our colleagues, and other members of the public.

Many teams went over and above to mark this important year in our history. One highlight was staff and residents at Avondale, a care home for people with a learning disability in Salisbury, building connections with the local community through '60 Acts of Kindness'.

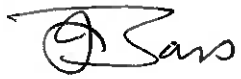
Following the exhibition at Kensington Palace, we had a public vote to choose a '61st Object' to represent Turning Point's future direction. The object chosen was a packet of sunflower seeds which represent hope, something every single one of us needs to move forward whatever challenges we face.

When thinking about the future in the health and care sector, it is important to acknowledge that sustaining hope can sometimes be difficult. The ongoing trend of rising service demand, heightened acuity, recruitment and retention challenges, and financial difficulties continues amidst growing global instability.

Despite these ongoing challenges, Turning Point continued to reach new communities in 2024-25 with new contract awards in Lincolnshire, Bristol, Bath & Northeast Somerset, Manchester, Northumberland, Lambeth, Southwark and Lewisham. I look forward to welcoming our new colleagues joining us on 1 April 2025.

At the end of a year of celebrations, we turned our focus to the future with the publication of a collection of essays, Health and Care Futures, from some of the sector's leading thinkers including the Rt Hon Patricia Hewitt, Professor Sir Michael Marmot and Professor Tom Shakespeare. We were delighted to be hosted by the Speaker of the House of Commons, Sir Lindsay Hoyle, for a reception at Westminster to mark the launch of the collection.

The future continues to be uncertain, but the opportunity our anniversary year gave us to celebrate our history has strengthened our shared values and purpose and put us in a strong position to face the future.



Julie Bass, Chief Executive of Turning Point

4 The health and social care landscape

Reflecting on the past year, I feel tremendously proud of all we have achieved across our services. Against a backdrop of considerable change and uncertainty, we continued to grow and develop our services, improving outcomes for the people we support.

We work with people facing multiple and often complex needs. All our work focuses on providing truly person-centred care and support, creating opportunities for people to overcome the barriers they face, develop new skills and confidence and find their own recovery and independence.

Our 60th year celebrations highlighted this and gave us the opportunity to look back at how society, Turning Point and the people we support have changed. We were able to share the powerful stories of the people we work with, each inspired by their own possibilities to change.

As well as looking back, we continue to look forward by developing and opening new services across all our market areas and focusing on finding new ways to support more people.

All our activity links back to our four high level strategic goals:

- Support people to improve their health and wellbeing and bring about positive change in their lives.
- Seek to reach more people and provide support at the earliest opportunity.
- Prevent the escalation of need and reduce demand on the wider health and social care system.
- And thereby create enduring value for communities and society as a whole.

We ended the year supporting more people than at any other time in our history

We were delighted to be chosen to deliver services across Lincolnshire and to develop new and exciting partnerships with Double Impact and Framework. We hit the ground running and are already building on the original vision by adding new elements of delivery to families and affected others.

Working in partnership with other organisations and harnessing their different and often unique strengths remains one of our key areas of focus in the coming years.

We were also pleased to grow our learning disability services in Wakefield, one of the only towns where we have key contracts across all our market areas. We expanded complex support across Kent, opened two new crisis houses, welcomed more young people into Turning Point through new sexual health and supported accommodation services, and continued to grow our mental health treatment footprint.

Supporting people's mental health and wellbeing sits at the heart of much of what we do, and we have made great strides forward in developing our service offers and solutions. Commissioning remains fragmented, but we worked with key stakeholders to design innovative whole pathway solutions where we were able to. We will take this co-production approach wherever we can harness the energy and commitment for real change.

We focussed on reducing harm and preventing the escalation of need

In our substance use services, our harm reduction work saw us role out our Naloxone Click & Deliver service and develop the first naloxone training aimed at young people. We delivered our third successful harm reduction conference, 'Safer Lives', where I was proud to share the origins of my career volunteering in a needle exchange in Liverpool. With death rates continuing to rise, we will do more to reduce stigma and develop innovative ways to reduce harms caused by drugs and alcohol.

Our mental health services focused on health and wellbeing. Thanks to the great work of our grants team, we developed a number of successful initiatives, such as rock climbing in Nottingham, creating a gym in Douglas House and trying out innovative technologies such as virtual reality headsets to support people to get active and stay active.

Across our learning disability services, we continue working to reduce the health inequalities the people we support face and revised and rolled out our Do Not Attempt Cardiopulmonary Resuscitation (DNACPR) campaign. We use our platform to continue shining a light on this appalling practice. We have also continued embedding our care record system, Nourish, and are working on developing common outcome measures so that we can evidence the work we do to improve health and wellbeing and quality of care.

We built on our strategic capabilities for front line, management, and leadership teams

We successfully rolled out new career pathways across many of our services in addition to onboarding more apprenticeship programmes. We also supported more managers through our dedicated Aspire and Inspire leadership programmes, helping to develop our leaders of tomorrow. We have strengthened our governance processes so that we can make sure we continue delivering safe and effective services. We also engaged our leadership teams in a review and refresh of our governance processes during the year.

We know some of the external challenges we face mean the needs of the people we support are becoming more complex and they are suffering even greater disadvantages than before. There has never been a more important time for Turning Point to rise to the challenges and continue to work collaboratively to develop new solutions and services for people who need them.

2024 was a milestone year and this report gives us the chance to look back and reflect. The year also gave us opportunities to make new memories and inspire more people. I know some of the things we have planned for 2025, and I am confident we will rise to the challenges and have another fantastic year.

Clare Taylor, Chief Operating Officer of Turning Point

Navigating the health and social care landscape

The 2024 election marked an end to 14 years of Conservative leadership. The new Labour government is focused on 'national renewal'. Keir Starmer's victory speech highlighted commitments to improving public services and restoring trust in the government. However, the government faces multiple challenges in realising these ambitions. High living costs continue causing difficulties for many households. The conflicts in Ukraine and Gaza, increasingly protectionist trade policies and the rise of the far-right in many parts of the world are all contributing to growing global instability. In the summer of 2024, far-right, anti-immigration protests and riots spread rapidly across Britain. Pressure on public services continues to rise, with staffing shortages and increased demand. The Labour government has identified five key missions it intends to pursue during its tenure. Central to these missions is to 'kickstart economic growth', which aims to support quality employment opportunities, attract investment and enhance living standards nationwide. The government has announced plans for the next generation of new towns and an overhaul of the planning system in order to build more homes.

Despite inflation being significantly lower than it was at its height in 2022, the cumulative impact of rising prices continues to squeeze household budgets, with consumer prices having risen by 21% between May 2021 and May 2024.[1] Households that were struggling before the period of high inflation have been most severely affected. The Trussell Trust reports that between April and September 2024, they provided 1.4 million emergency food parcels, 4% fewer than the same period in 2023, but 69% more than the same period in 2019.[2]

The UK economy experienced marginal growth during the latter half of 2024-25, which has eased the immediate risk of recession.[3] Despite this improvement, the public sector continues to experience funding pressures, particularly in the face of increases to Employer National Insurance Contributions. International instability has led to Starmer's commitment to increase defence spending, applying greater pressure to public sector budgets.

The rise in long-term sickness in the wake of the pandemic and increasing numbers of people not working or actively seeking employment (and the associated costs) has risen to the forefront of political discussion. The government faces the challenge of 3.1 million people claiming Universal Credit with no work requirements, double the number who were claiming in January 2022.[4] This dramatic increase, which is mostly due to illness claims, contrasts with the stable figure of 1.6 million seeking work. The government's large majority means it can push through and retain unpopular policies such as the Conservative's two-child benefit cap.

The government has unveiled ambitious plans to transform local government finances over the course of parliament. The plans aim to encourage stability and long-term thinking with longer funding cycles, and to redress funding inequalities with funding allocations which better reflect local needs. Alongside this, there is a commitment to extend devolution. In the 2024 Autumn Statement, the government committed to integrated settlements in Greater Manchester and the West Midlands, giving Mayors meaningful control over funding and improving the fragmented funding landscape for Mayoral Combined Authorities with a flexible single pot.

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[1] House of Commons Library. (2024, December 16). *High cost of living: Impact on households*. UK Parliament. Retrieved from https://researchbriefings.files.parliament.uk/documents/CBP-10100/CBP-10100.pdf

[2] Trussell Trust. (2024, November). *Mid-year statistics: Emergency food parcels distributed*. Retrieved from https://www.trussell.org.uk/news-and-research/latest-stats/mid-year-stats

[3] Reuters. (2025, February 13). *UK economy grows by 0.1% in Q4 2024*. Retrieved from https://www.reuters.com/world/uk/uk-economy-grows-by-01-q4-2024-2025-02-13/

[4] Department for Work and Pensions. (2025, February 18). *Universal Credit statistics, 29 April 2013 to 9 January 2025*. GOV.UK. Retrieved from https://www.gov.uk/government/statistics/universal-credit-statistics-29-april-2013-to-9-january-2025

Lord Darzi's independent report underscored the many challenges facing our health system, including lack of funding, low staff engagement and the legacy of the pandemic.[5] The government's 10 Year Health Plan intends to tackle these issues by focusing on three major shifts: transitioning care from hospitals to community settings; advancing the NHS from analogue to digital systems; and shifting the focus from treating illness to promoting prevention. The government's workforce plan focuses on addressing recruitment and retention challenges across healthcare and provides a supportive role within the broader 10 Year Health Plan.

Demand for social care services continues to increase with supply not keeping pace with demand. In April 2024, the Care Quality Commission (CQC) reported that waits for care home beds and home-based care accounted for 45% of delays in discharging people who had been in an acute hospital for 14 days or more, with nearly 4,000 people delayed on an average day.[5] Workforce pressures continue. In 2023-24 there was a significant decline in the number of overseas workers applying for health and care worker visas. Between April and July 2024, the numbers applying decreased by 81% compared to the same period in 2023.[6]

The Employment Rights Bill includes a Fair Pay Agreement for adult social care. Part of its intention is tackling workforce issues in the sector although it does not address funding. A new Social Care Commission led by Baroness Casey, was announced in January 2025. It aims to address system issues, including workforce shortages, underfunding, and rising demand. However, some commentators have expressed concerns regarding the Commission's timeframe, arguing that the sector risks collapse if reform is not introduced as a matter of urgency.

[5] Care Quality Commission. (2024). The state of health care and adult social care in England 2023/24. https://www.cqc.org.uk/publications/major-report/state-care/2023-2024

[6] Home Office. (2025, February 13). *Monthly monitoring of entry clearance visa applications*. GOV.UK. Retrieved from https://www.gov.uk/government/statistics/monthly-entry-clearance-visa-applications

Market perspectives

Public health and substance use perspective

Nat Travis, National Head of Service

The development of the Turning Point annual report is always a great opportunity to stop and reflect, and what a year it has been for our public health and substance use services. We have seen significant growth in our portfolio and diversity of service provision, along with pleasing developments in quality and innovation, backed by areas of exceptional performance.

I am proud to work alongside such a positive and engaged leadership team who have embraced the opportunities presented by the government's additional funding as part of the 2021 Drug Strategy: 'From Harm to Hope: A 10-year plan to cut crime and save lives', as well as facing challenges due to changes in the external and financial landscapes. As we approach the end of the 3rd year of additional funding aimed at supporting the sector to realise the ambitions of the national Drug Strategy, Turning Point has excelled in reaching out and engaging more people using substances than ever before.

The sharing of innovation and best practice means cross-sector working has never been better. Despite this, there has been a decline in the number of people using opiates receiving treatment. Turning Point has stepped ahead of the sector average in this area. At the same time, the number of people leaving treatment successfully has increased, demonstrating the true value of our offer.

We are now preparing to enter the fourth year of the funding with some small changes to positioning and priorities. In line with our own ambitions, we will focus on quality and utilise new performance metrics, as well as developing and improving our training and supervision offer to drive this forward.

We have seen changes in the drug market over the last year with the emergence of synthetic opioids in heroin supply and beyond, as well as significant increases in ketamine use among young people and young adults. Harm reduction has long been a pillar of our strategy with a clear drive to continually develop and improve our offer. As such we have responded to changing markets. We have introduced a 3-stage response to managing synthetic opioids and the increased overdose risk they present, learning from our experiences of a wave of overdoses in Leicester city across one weekend in April 2024. We have refined our offer around ketamine use, recognised the need for clinical interventions, begun partnership working with urology departments, and explored how residential detoxes can support substance users.

Our harm reduction impact continues to grow. We had great attendance at our 3rd annual Safer Lives conference and received very positive feedback about the event. Our use of technology to increase access and reach more people has seen the implementation of innovative Click & Deliver services for naloxone and needle and syringe equipment. It brings me great pleasure to see how many colleagues at Turning Point have outstanding harm reduction expertise.
Another focus for us during 2024 was the implementation of our new Lincolnshire Recovery Partnership service, an all-ages substance use service covering the beautiful and very expansive county of Lincolnshire. We were excited to be awarded this contract in late 2023, partly because delivering across large rural counties is a key strength of ours, but also because we entered a new and exciting partnership with two Midlands-based organisations, including a long-standing Lived Experience Recovery Organisation (LERO). The service delivers across six fixed sites and multiple satellite locations and has already developed strong partnerships and improved service provision across Lincolnshire. From April 2025 we are adding in a new standalone family and affected others service called Beacon, which will work in a truly integrated way to support those affected by another person's substance use.

We have invested in our workforce, increasing the number of colleagues, and upskilling them to undertake their roles to their best ability, as well as supporting people to stay with Turning Point. With retention of colleagues at an all-time high, alongside pleasing colleague engagement scores, I am proud that we are contributing to Dame Carol Black's call to retain experience in the sector.

As we move towards a new financial year, we are excited to welcome our new substance use services in Bristol and Bath & Northeast Somerset and have more exciting partnerships and innovations in store. The growth in our sexual health services puts us right where we want to be, launching Lewisham, Southwark and Lambeth Sexual Wellbeing on 1 April 2025. Our work continues to set us up to deliver our ongoing strategic ambitions.

Learning disability perspective

Davinder Jhuty, National Head of Service

Reflecting on the past year, I am proud of our business growth and strategic achievements. We have made significant progress in delivering objectives, critical systems and new organisational infrastructure, navigating challenges with resilience and confidence.

Our commitment to maintaining consistently high-quality standards has remained unwavering, ensuring that for every contract we deliver, we meet and exceed the expectations of our stakeholders and regulator. Our quality continues to consistently benchmark ahead of our peers.

I am especially pleased that we have also achieved above-market sector performance in staff retention, reflecting our commitment to continuity in support provision, and to creating a supportive and engaging work environment.

Additionally, we have maintained exceptional stability within our management structures, ensuring consistent leadership and strategic direction. These accomplishments are the reward of meticulous workforce strategy planning and underscore our dedication to fostering a thriving workplace and driving sustained success.

We have continued evolving our use of the Nourish digital social care records platform in care delivery and management. I am particularly pleased to see our successful implementation of Nourish repeatedly being referenced as an example of best practice in systems adoption.

Over the past year, we have used Nourish to enhance our person-centred care, offering customisable care plans and real-time information. The system supports better care management, and our workforce's positive reception and willing embrace of the system has been crucial to our progress and success.

Health and wellbeing are crucial for everyone, but they hold particular significance for people with learning disabilities and autistic people. These individuals often face substantial health inequalities, including limited access to healthcare services, higher rates of chronic conditions, and shorter life expectancy. Our work in addressing these disparities is essential to ensure they lead fulfilling lives.

Our expanding health and wellbeing programme is designed to tackle these challenges head-on. By driving monthly health and happiness dialogues, we personalise strategies that empower individuals to make informed choices about their health and lifestyle. This approach not only promotes healthier living but also enhances their connections with communities and personal relationship networks.

Through this programme, we aim to provide more life choices and opportunities, fostering a sense of autonomy and inclusion. By focusing on individual needs and preferences, we help people with learning disabilities and autistic people achieve better health outcomes and a higher quality of life. Our commitment to eroding health inequalities ensures that

everyone has the chance to thrive, regardless of their perceived abilities.

We recognise that co-production is also crucial for people with learning disabilities and autistic people, ensuring their voices are heard. Involving them in decision-making leads to more effective, personalised services and promotes empowerment and inclusion.

This year, we expanded our co-production efforts with new engagement methods and roles to optimise local opportunities. Building on solid foundations, we will prioritise further co-production initiatives in the year ahead.
As well as winning significant new contracts, such as those in Wakefield, we have pursued a place-based growth strategy that leverages regional strength and creates more sustainable and impactful growth by tailoring initiatives to local needs and assets.

Relationship-driven growth builds strong connections with stakeholders, clients, and partners. Trust within the community enhances collaboration, leading to more business opportunities and higher contract retention rates.
One example is Northumberland, where we established several new supported living communities this year with more planned. These communities are intended to benefit local areas by repurposing sites for community use, providing stable employment opportunities, and facilitating networking across services to enhance collaborative efforts. They also provide excellent quality new homes that support people to live their best lives.

We expanded our service footprint in Kent by opening our largest new supported community in Sandwich earlier this year. This community caters to a wide range of support needs, including individuals transitioning to independent living through the Transforming Care programme, and established community members who are accessing a new home to continue their independent lives.

I am also mindful of the high quality of support our teams continue offering people with profound and multiple disabilities. Our exceptionally skilled colleagues find increasingly creative ways to amplify the voices of the people they support and ensure their rights are protected. They deliver individualised care that often includes the effective support of multiple health conditions.

Throughout the year, grant-funded initiatives have introduced new services and opportunities. We will continue developing this area of our work in the coming year. These initiatives add social value to the communities we serve. We are increasingly developing them collaboratively with the people we support.

I am proud of our achievements and confident in our ability to navigate the challenges and opportunities ahead. My heartfelt gratitude goes to our dedicated team for their unwavering commitment and hard work which have been instrumental in our success.

Mental health perspective

Stephen Parker, National Head of Service

I am pleased to reflect on a year of continued growth in our focus areas, which include complex support, crisis and reablement services. This expansion demonstrates our dedication to offering comprehensive, human-centric, and accessible mental health support to those most in need.

Throughout the year, we have also dedicated time to reflect on our future direction for mental health and wellbeing support. In the process, we have identified gaps, developed innovative approaches, and ensured that our strategies are increasingly inclusive and effective. Our meticulous planning aims to deliver improved mental health and holistic outcomes for individuals and foster more integrated partnership efforts to support resilient local solutions and communities.

Whilst recovery remains a valid objective, for some people we support focusing only on recovery can sometimes be counterproductive. Our goal is to enable and help individuals achieve significant, sustainable improvements in their mental health, opportunities, and quality of life, which includes the ongoing safe management of chronic conditions. We are gradually shifting our core support approach to focus on behavioural change by utilising motivational interactions. These interactions aim to modify negative thought patterns, remove barriers and enhance self-efficacy. Our strategy is to empower individuals to take control of their lives, make healthier choices, and create positive outcomes for themselves and those around them.

When considering how our offer evolves, we recognise that mental health is influenced by a range of factors beyond individual behaviour. Social, economic, and environmental influences play an important role. Socioeconomic status impacts access to mental, physical, and lifestyle health services, as well as the reliability and scope of achieved outcomes. We understand that social support networks offer emotional aid and reduce isolation which improves coping mechanisms. Environmental factors such as living conditions, neighbourhood safety and exposure to violence or trauma also affect mental health. Safe environments promote wellbeing, while adverse conditions will increase stress and challenges.

Addressing these factors helps us ensure equitable access to essential scaffolding for enablement and personal fulfilment, such as healthcare, education, jobs, positive relationships, personhood and housing.

Over this year, we have carefully evaluated the benefits of a range of therapeutic intervention models and outcome measures. We have laid the foundations to reorganise our services to address the needs of those we support more effectively, to address the significant challenges facing health and social care systems and services, and to position ourselves for continued growth.

Over the past year, we have expanded our local presence and strengthened relationships by providing strategically significant services and delivering solutions to alleviate the strain on NHS emergency services and inpatient beds. We launched an A&E Navigator Service in Manchester to bridge the gap between statutory and community-based services for people with mental health crises. Navigators work with A&E teams to identify patients who can be safely diverted to alternative crisis support and assist patients in A&E settings. We have expanded our crisis house provision with new services in Kent and West Sussex, and more are planned. New step-down supported accommodation services opened in areas such as Nottingham and Nottinghamshire, strengthening our local presence.

I am particularly pleased that we have successfully expanded our services to younger people. We secured our first Ofsted registration for a supported accommodation service, quickly followed by a second service. These services help younger people build skills and personal resilience as they transition to independent living. Our objective is to continue progress toward our future goals of helping more younger people have a better start in life.

Our enhanced supported accommodation community in Stafford has grown in reach and effectiveness. Insights from this pilot project are improving our operations and interactions, profoundly shaped by input from those we support. This shared learning experience enhances services' ability to empower individuals with complex conditions to achieve a better quality of life and to contribute meaningfully to their communities.

Over the past year we retained all health and social care contracts we retendered for, including those that went through competitive processes under the new Provider Selection Regime. This success rate reflects our strong performance and relationships, client satisfaction, and the levels of flexibility and creativity we bring to contract delivery.

We remain committed to innovation and adaptability, ensuring we stay ahead in a dynamic market through continuous improvement and cutting-edge solutions. By fostering a culture of creativity and agility, we drive transformative growth and deliver exceptional value. Our grant-funded activities provide substantial additional benefits, including improved access to employment, better access to physical fitness, healthy lifestyles, stronger community ties, and environmental improvements.

As I reflect on the past year, we can celebrate achievements and invaluable learning. We look forward to building on our success and embracing the opportunities that lie ahead with renewed energy and a clear vision. We will continue to innovate, grow, and make a positive impact.

5 Progress and impact

Marking our 60th year in 2024

Our story has always been about the people we support, so in January 2024 we launched our campaign to tell the 'Story of Turning Point in 60 objects' to mark our 60th year. We asked people to submit their story using an everyday object that best represented it. This gave us an accessible and vital way to learn and share moments of hope and inspiration. Our dedicated website www.TP60.co.uk hosted a wealth of materials for people and organisations to get involved in the campaign, and we received an overwhelming response.

True collaboration with the people we support

The idea of telling the stories of all those who make Turning Point what it is gave us the perfect opportunity to co-design our 60th anniversary activities alongside the people we support. This aligns with our commitment to meaningfully involve the people we support in all that we do.

As we came together to celebrate and connect, many of our services planned wide ranging activities to recognise the milestone year. Through these, we saw the power of connection between people we support, their families, and Turning Point colleagues as we worked together to find unique ways to recognise and mark the anniversary together in the ways they wanted to.

Our growing involvement networks played a key role in our national planning throughout the year, helping to provide guidance on the year of celebrations from the perspectives of those with lived experience. We convened a reference group of people we support and crafted ideas and plans collaboratively, culminating in our 60 objects campaign.

Choosing our final 60 objects

A group of people we support took on the difficult task of selecting the final 60 objects from the many wonderful submissions we received – all of which could have been displayed. They selected 60 objects that, alongside the stories they represented, showcased many different experiences, challenges and adversities faced and overcome with new possibilities inspired and realised.

Our exhibition at Kensington Palace

From the 3 - 7 June 2024 we hosted hundreds of people at the Clore Learning Centre at Kensington Palace to showcase our final 60 objects and stories. Alongside the objects, we screened a film of three people and the stories behind their objects, as well as a film of Princess Diana speaking at previous Turning Point anniversary events.

During exhibition week a group of people we support, peer mentors and colleagues took on important roles as exhibition guides. They trained in advance with colleagues from Kensington Palace with the aim of helping people engage with the exhibition and providing them with information about the display.

Having this lived experience expertise was particularly helpful in ensuring visitors had the opportunity to engage with the exhibition – both online and face to face – and that it was as accessible an experience as it could be. People were able to engage with it in different ways to suit their needs and preferences. This included being able to engage with each of the 60 stories through audio recordings. Peer mentors, people we support, and colleagues lent their voices to all the objects, bringing each powerful story to life.

The stories shared during the exhibition and throughout the year highlight the incredible experiences, strength and

determination of people supported by Turning Point. The success of the exhibition was due to everyone involved being genuinely committed to collaboration, with the people we support and our colleagues listening and learning from each other. By making it happen together, we were able to celebrate our 60 years in the right way, so that as many people as possible could engage with it in the way they wanted.

"For 60 years, Turning Point has worked alongside people to improve their health and wellbeing and their independence. The exhibition gives an insight into the incredible stories of some of these individuals whether that be people who have a learning disability or people struggling with their mental health or substance use." Julie Bass, Chief Executive

Our summer of celebration

We invited all Turning Point services and functional teams to host celebrations to mark our anniversary year, with encouragement to host inclusive events co-produced with the people we support, our teams and local communities.

One service, Avondale, inspired others by kicking off a local 'acts of kindness' campaign, reaching out to the community to engage the people they support in Wiltshire with those around them. That inspiration found its way into services across the country, with those hundreds of miles away taking part in their very own kindness campaigns.

We saw summer barbecues and garden parties aplenty where we involved the people we support in opportunities for recognition and celebration, engaging our partners along the way. There were sing-a-longs, crafting days, parties, and lots (and lots) of cakes – all in the spirit of wellbeing through connection.

60 voices that engaged our colleagues

Throughout 2024, we shared 60 stories, from 60 people who truly embody the values of our organisation. They were a mix of colleagues past and present, peer mentors, partners and people we support. Each voice tells the story of the people who come together to make Turning Point what it is today.

The 60 Voices collection reveals the immense power personal stories have to inspire, connect and drive positive change. They are a reminder of the richness of human experiences and challenge us to see the humanity in everyone, to recognise potential where others might see limitations, and to continue building an organisation that is inclusive, compassionate, and empowering.

Our 60 Voices are not testimonials but calls to action. They remind us of one universal truth: when people are given the right support, they can achieve incredible things.

We also produced four videos - each a thematic exploration of the profound impact Turning Point has on the people we support. These films are not only a celebration of our work but are also a reflection of the broader themes that define what we do: connection, inclusion, wellbeing, and challenging stigma.

Launching our Health and Care Futures series

We worked with leading professionals and people with lived experience to create a collection of webinars and essays looking at some of the major challenges facing the health and social care sector at the end of the first quarter of the 21st century.

Themes that emerged from our Health and Care Futures series included the critical roles of political and personal leadership and of collaboration and partnership. The strong guiding values of social justice, solidarity and inclusion are also important topics. The series highlighted the resilience of individuals in the face of adversity and their courage, determination and strength. The collection underlines the importance of working together to mobilise the current

complex, fragmented system to deliver holistically focused services, as close to home as possible with an emphasis on prevention and early intervention alongside treatment pathways.

To showcase the series, we hosted a series of seven webinars during October and November 2024, and over 900 people joined the conversation. In January 2025, we were delighted to be hosted by the Speaker of the House of Commons, the Rt Hon Sir Lindsay Hoyle for a launch event. This was attended by many of our stakeholders including commissioners, partner organisations and parliamentarians.

- The Rt Hon Patricia Hewitt who wrote about her vision for the role of the VCSE sector in the delivery of public services.
- Leading broadcaster and academic, Professor Tom Shakespeare, wrote about his hopes for social care.
- Professors Jon Glasby and Robin Miller from the University of Birmingham wrote about moving more people with a learning disability and autistic people out of locked hospital settings. Olivia, someone Turning Point supports, shared her personal experience.
- Isaac Samuels, a person with lived experience and a friend of Turning Point, shared his vision for the future of mental health services.
- Michael Linnell, who co-ordinates UK and Ireland DrugWatch and wrote the national guidance on Local Drug Information Systems, wrote about addressing the emerging threat of synthetic opioids. Deb Hussey, Turning Point Safer Lives Lead, wrote about what Turning Point are doing in this space.
- Dr Richard Piper, Chief Executive of Alcohol Change UK, wrote about his vision for a society free from alcohol harm. Heather, a peer mentor with Turning Point in Wakefield, shared her lived experience.
- Professor Sir Michael Marmot and Dr Jessica Allen from the Institute of Health Equity wrote about shifting the dial on health inequalities. Clare Wightman, Chief Executive of Grapevine Coventry and Warwickshire, wrote about the vital role of community power in this.

Announcing our 61st object

To continue the legacy of our 60th anniversary, we marked the closing of our anniversary year with the selection of a 61st object to symbolise the stories of tomorrow. People visiting our summer exhibition, our dedicated website and our internal communication channels voted on what the object should be.

There were three options to vote for, each representing the themes emerging from the initial 60 objects. We sent a special 61st Object Box to every Turning Point service and hub across the UK in December 2024.

The box contained three items, each representing a piece of our future vision: a puzzle, representing inclusivity; a friendship bracelet kit, representing feeling connected; and sunflower seeds, representing hope. We organised three days of action around the objects, creating exciting events at the start of the 2025 calendar year:

- 15 January – Board Game Day: We encouraged colleagues and people we support to celebrate inclusion, using their Turning Point puzzle to bring people together. Friendly competition brought people together across services. The City and Hackney Recovery Service broke out classic board games, complete with victory dances. The Grantham team got creative, designing their own games, including 'Guess Who I Am', which had players racing around the service as different characters. The Spalding team got competitive over Munchkin, Hereford hosted a Monopoly marathon, and even our marketing team from Central Services joined in the fun. Many services pieced together the Turning Point jigsaw puzzle from the 61st Object Box. The young people at The Mill, the Leicester City Team, the Coalville Team, Lee from Leicestershire Recovery Partnership, and colleagues and people supported at Rochdale and Oldham Active Recovery Service (ROAR) all took part, making it a truly shared experience.

- 17 February – Acts of Kindness Day: Our teams celebrated Random Acts of Kindness Day with a creative twist! We saw incredible participation across Turning Point, with colleagues and the people we support spreading positivity in creative and meaningful ways. The Castleford Inspiring Recovery team introduced a Kindness Tree, while

Lancashire Young People Services made 'You Matter' posters for everyone they support. The Lincolnshire Recovery Partnership in Grantham handed out goody bags to the community, and Holly House in Stafford set up a Kindness Table, offering cupcakes, kind words, and a listening ear to passers-by. Many also embraced the 61st Object Box Friendship Bracelet Kit, including Helen from Cranham Lodge and Alexandra from Leicestershire and Rutland Substance Use Service, who created bracelets to gift to others. We also released a video to celebrate the '60 Acts of Kindness' project, showcasing the acts of kindness people we support and colleagues at Avondale did throughout the course of the year.

- 28 March – Sunflower Growth Day: To symbolise the hope found in possibility, Turning Point teams united to plant sunflowers, which are a vibrant symbol of new beginnings. And are officially our 61st object!

Goal #1

Support people to improve their health and wellbeing and bring about positive change in their lives

In this section we showcase just a few of the many ways our services support people to improve their health and wellbeing.

We were delighted to be shortlisted for the London Homelessness Awards, a testament to the valuable work our colleagues are doing to support rough sleepers. Elsewhere, we have continued strengthening community engagement by working with local communities and raising awareness of our services.

Community engagement in Leicester

Over the past 12 months, our commitment to engaging diverse communities and connecting individuals with the support they need has continued to grow. We recognise that each community has unique needs, challenges, and cultural considerations and have taken a tailored approach to ensure our work remains effective, accessible, and impactful.

Strengthening connections

Our work in community engagement focuses on understanding and responding to the needs of specific groups through a culturally competent lens. By working closely with local mosques, community centres and faith-based organisations, we have strengthened connections within Leicester and beyond. A key focus has been breaking down barriers that prevent individuals from seeking help, whether due to stigma, lack of awareness, or concerns about cultural appropriateness.

A major achievement this year has been the ongoing success of our bilingual multi-faith 12-step Islamic-based recovery group, which meets every Thursday evening. This supportive space allows individuals to check in with peers, reflect on their progress, and receive guidance rooted in faith and evidence-based recovery principles. Additionally, our partnership with Spinney Hill Recovery has remained instrumental, with our dedicated Recovery Worker available at the centre every Thursday for one-to-one sessions, further bridging the gap between community engagement and formal treatment pathways.

We have also launched a 12-step peer-led group on Tuesdays at The Sikh Temple. This group is facilitated by trained peer mentors and provides a welcoming space for individuals seeking recovery support within their own cultural and faith-based context.

Beyond Leicester, our outreach has extended to the African Caribbean, South Asian and Polish communities, thanks to our growing and dedicated team. Our team includes Nimisha (Gujarati Lead), Julia (Polish Lead), Sadaf (Punjabi Lead), and Sumayya, all of whom play vital roles in ensuring our services remain inclusive and responsive to the specific challenges faced by different communities.

A crucial element of our work is not only supporting clients during their treatment journey, but also ensuring they receive continued support beyond treatment. We now have a highly skilled and diverse group of peer mentors and peer support workers who bring lived experience and a deep understanding of cultural barriers and stigma. Their role in guiding individuals post-treatment has been essential in fostering long-term recovery and reintegration into the community.

Under the Influence podcast: Changing the narrative

This year also saw the growth of our Under the Influence podcast, a platform created to showcase change and foster a new approach to discussions around substance use and recovery. The podcast provides a space to share real stories, challenge stigma and offer hope to those who may feel isolated in their struggles.

The podcast places real people at the heart of the conversation by featuring voices with lived experience, professionals in the field and community leaders. One of our most powerful episodes was a conversation with a daughter who was sexually abused as a child and turned to alcohol, and with her mother who struggled to find support. Their story highlighted both the barriers to accessing help, and the transformative impact of the right support services.

The podcast has also explored the impact of image and performance enhancing drugs (IPED) by speaking to two bodybuilders about their experiences. Other key episodes featured conversations with a harm reduction lead, our rehab and detox lead, and other professionals who contributed their valuable insights. We are now on our 16th episode and remain committed to growing this platform and continuing these important discussions.

The reach and impact of the podcast have been growing steadily, with increasing engagement from listeners who appreciate the open and informative nature of the discussions. Feedback has been overwhelmingly positive, with many listeners highlighting how the podcast helped them feel seen, heard, and inspired to take the next step in their recovery journey. As we move forward, we aim to expand our reach further by collaborating with more voices, increasing accessibility, and utilising the podcast as a tool for education and advocacy.

Looking ahead

When we reflect on the past year, we can see our work is making a difference. By continuing to approach each community with a tailored and culturally aware perspective, we not only support individuals in need, but also create sustainable change within communities. Looking ahead, our focus will be on strengthening our partnerships, expanding our podcast's reach, and developing innovative ways to engage those who have traditionally been overlooked or underserved in the field of addiction and recovery.

The past 12 months have reinforced our belief that community-driven support is one of the most powerful tools in addressing addiction and mental health challenges. Through collaboration, education, and compassionate outreach, we remain committed to making a lasting impact on individuals and communities alike.

London Homelessness Awards recognition

The Royal Borough of Kensington and Chelsea's (RBKC) Rough Sleepers Drug and Alcohol Service opened in 2022. Last year they worked with 157 people who were sleeping rough or staying in emergency accommodation (hostels and hotels). The team successfully supported 31% of the people they supported to move into more stable and secure housing and to address their substance use.

In July 2024, the service was shortlisted for the London Homelessness Awards. Now in its 25th year, the awards recognise innovation and encourage radical but practical solutions to homelessness and rough sleeping in London.

Vicky is someone who was supported by RBKC's Rough Sleepers Drug and Alcohol Service.

"I started using drugs at 17. My day consisted of taking heroin, shop lifting on High Street Kensington, then I'd do nightwork on the streets. My using resulted in me losing my children, going to prison and I lost my leg from using drugs in my groin. When I went to Turning Point, the staff were like family, no one was judging. Within a few weeks I could talk about anything. That's when my life slowly started to pick up and become more stable. Turning Point offered me one-to-one counselling. Even when I relapsed a couple times, they understood that coming off the street was not easy. My key worker Liam was brilliant, he checks on me even now. He will call me, ask me how I'm feeling, ask me about my mental health. He also helps with my housing, helps stuff get done - things that I need to improve my life."

Colleagues provide face-to-face support in places where people who are rough sleeping go, including day centres, hostels, and faith-based centres. No appointments are needed, and people can commence treatment the same day. The team includes peer mentors with lived experience of homelessness and substance use who provide advice and guidance to support people on their recovery journey. They also give harm reduction advice if a person is not yet ready to make a change in their substance use. The team led in the establishment of several multi-agency groups in the borough. They also have a learning programme that shares training with local professionals.

"Being shortlisted for the London Homelessness Awards is a tremendous achievement and a testament to the impactful work Turning Point is doing in our community. Their innovative approach and commitment to supporting rough sleepers and those struggling with substance use have made a significant difference in the lives of many residents.

This recognition highlights the importance of our collaborative efforts and the wider work we do across the Council to focus support on those who need it. It reinforces our dedication to preventing rough sleeping in Kensington and Chelsea and we are incredibly proud to be working with Turning Point." Anna Raleigh, Bi-borough Director of Public Health, Royal Borough of Kensington and Chelsea and Westminster City Council.

"We are very proud to have been shortlisted for the London Homelessness Awards, which raise the profile of the issues facing people sleeping rough in London. We have seen from our work how much homeless people rely on our services. People sleeping rough on the streets is not inevitable and nobody is beyond help – with the right support, people can turn their lives around. We've supported people who are sleeping rough to find stable accommodation, to address their substance use problems and to engage in our wider Get Connected offer that supports people to go back to work, back into education, and access funding for goods for their accommodation." Mark Dronfield, Senior Operations Manager at Turning Point's Royal Borough of Kensington and Chelsea Rough Sleepers Drug and Alcohol Service.

Marking World Mental Health Day at Wakefield Talking Therapies

The team at Turning Point Talking Therapies in Wakefield hosted their second annual World Mental Health Day (WMHD) event on 10 October 2024 to help raise awareness of mental health and promote access to the service. The event was held at The Ridings Shopping Centre, their local shopping complex which has been a part of the city for over 40 years.

The aim of the event was to bring together a host of service providers in one place to encourage conversations around mental health and to support the local community. The event featured stalls from Turning Point Inspiring Recovery, Andy's Man Club, The Samaritans, Future Selph, The Art House, Penny Appeal, and many more. Local organisations provided attendees with valuable information about the community resources and support networks they could access.

In addition to the partnership stalls, a special guest speaker, Ben Richardson from We Are Wellbeing, delivered a talk that focused on the WMHD's theme of *'Prioritising mental health in the workplace'*. The event also included chair-based aerobics, music from a local choir, The Sandal Singers, as well as a story from a volunteer who shared a personal journey of a client's experience of the service.

A new addition for 2024 was the Wakefield Talking Therapies employment support offering. The team hosted a successful careers support event during the day, giving guidance, advice and information on how to improve wellbeing around employment.

To close the day, the team hosted Wakefield Mayor, Darren Byford, who gave a speech with a clear message: *"Talk to people and do not bottle it up. Whether it's a professional or a friend, share your thoughts. You will feel so much better afterwards."*

Brian's object and story – work ID badge

Brian is supported by Turning Point to live in his own flat.

My work ID badge

A blue lanyard with a white badge with 'DEBRA the butterfly skin charity – volunteer' written on it. I use this to log in when I start a shift.

What my object represents

This represents my voluntary work with DEBRA. I really enjoy working in the shop. It is such an important cause as the money the shop raises helps people with a skin condition there is no cure for. It is very important to me that I can give back. I'm fortunate to be able to go out and about and enjoy my life - I'm so lucky - whereas some people can't do that because of a condition they have.

Some people come into the shop and say, 'I don't know anything about this shop,' and the manager says, 'go over and speak to Brian – he will tell you all about it'.

I quality check the clothes that have been donated. We get bags and bags of clothes. I need to check they are not stained. The good ones make it to the shop floor. I put them on the coat hangers and fold them so people can see them clearly and decide if they want to buy. I also help choosing the outfits for the mannequins and dressing them. I have quite a lot of responsibility. I am proud to be able to help others.

What I also want to share

I think sometimes people think certain things about people with a disability. The worst thing to hear is, 'have you ever had a job?' or 'have you ever learnt to drive?'. I have a lot to contribute.

When I was young at school, I was the only person with a disability. I was left alone and not supported well. My mum used to take me on a three-wheeler trike to get there. It wasn't a happy experience. Things have changed a lot since then. My Mum and Dad aren't with me anymore, but me and my sister are very close.

Where I live at the flats everyone is buzzing. I can wheel myself around and I have independence. Everyone is so happy, and I'm very well supported.

Things have changed for the better and now I can give back. Thank you, Turning Point, for this opportunity to share this and for supporting me to have my flat.

My hope for the future

I want to keep giving back. I hope that in the next generation a cure is found for epidermolysis bullosa – the condition the

shop I work in helps to raise funds for. I want to keep going with my job for as long as I'm alive. I'm not one for saying no to going to work!

Goal #2

Seek to reach more people and provide support at the earliest opportunity

We continue delivering new and expanded services in accessible ways so that we can reach those who need us, when they need us.

One year on, our Lincolnshire Recovery Partnership is thriving with a growing team and investment in new hubs that will enable more people to access the services. We continue to work in partnership with local services including emergency services, schools and universities. We are looking forward to launching Horizons - Bristol's Drug and Alcohol Partnership which builds on the successful alliance model we set up in Lincolnshire.

Lincolnshire Recovery Partnership one year on

1 April 2025 marks the first anniversary of 'Lincolnshire Recovery Partnership', Turning Point's new partnerships with Framework and Double Impact to deliver substance use treatment across Lincolnshire.

Our strength lies in our incredible team who combine extensive experience in the sector with the fresh perspectives of those in newer roles. In our first year, we grew our Lincolnshire team to over 160 people, introducing several new key roles to support quality and governance, including a Clinical Lead Consultant Psychiatrist and a Safeguarding Manager. We have also significantly increased the number of Recovery Connector roles which enable a clear pathway into employment for those with lived experience.

We have invested heavily in our premises across Lincolnshire to create accessible and welcoming new hubs which add value for those who work in them and those who access our services. We opened our new hub in Grantham in September 2024 with a well-attended launch event for the local community. Our refurbished hub in Spalding opened shortly afterwards. We will soon be following these with renovated sites in Skegness and Boston and a new hub in Gainsborough.

Our new Individual Placement Support service, delivered by Double Impact, launched in October and has already supported 66 service users, with 24 securing employment in the first seven months. The service has received national recognition for the number of service users referred to it, and the number of roles the team have supported service users in securing.

We launched Naloxone Click & Deliver in October, making us the third Turning Point service to offer the postal service in England. We have been working closely with Lincolnshire Police to offer training and kits to officers and are proud to have trained 250 officers to date, with many more training sessions planned. We have also worked closely with the police force on outreach operations to identify, contact and support people across the county.

Horizon, our dedicated team for young people, has built strong relationships with local schools and colleges and its outreach approach means we can meet our younger service users wherever they feel most comfortable. Horizon is part of the Stay Safe Partnership. Along with partners, including local police, road safety and fire and rescue, it facilitates drug and alcohol awareness sessions in secondary schools, alternative education settings, colleges and to year 6 primary students. In the last academic year, they delivered awareness sessions to over 25,000 students. They were recently invited to present to several Children's Centre Hubs across the county, supporting the people who work there to understand and identify signs of substance use, and giving them the tools to signpost people to our service. The team received great feedback from these sessions.

We have appointed a dedicated women's lead, a veteran's lead, and have recently launched a Polish-speaking recovery

group to encourage the wider reach of our service. We worked closely with local universities to support their freshers campaigns and to deliver presentations and training to students. We also exhibited at several local Pride and agricultural events. Our leaflets are now available in four languages as well as in an easy read format, and we continue identifying the needs of our local community. As we head into our second year, a key focus is enabling access and inclusivity for the rich tapestry of people who live across our county.

In our first 10 months, Lincolnshire Recovery Partnership has supported around 3,500 individuals in structured treatment.

Following the success of our implementation, we are delighted to have been awarded a second contract by Lincolnshire County Council to deliver a service for local families, friends and others who are affected by a person's use of alcohol or drugs. The service aims to equip affected others with the knowledge, tools and emotional resilience they need to navigate the impact of substance use within an inclusive, nurturing environment. The new service, called Beacon, will join Lincolnshire Recovery Partnership in April 2025.

Preparing to welcome Horizons, Bristol's drug and alcohol partnership

We are launching Horizons, Bristol's drug and alcohol partnership, on 1st April 2025, having been awarded a contract by Bristol City Council for the delivery of substance use services. Building on our successful alliance partnership model adopted in Lincolnshire, we have joined forces with Bristol Drugs Project (BDP), who have been delivering substance use services in Bristol for nearly four decades. We are joined by seven other local and national partners who each bring their own hyperlocal or specialist expertise. These are:

- **Hawkspring:** South Bristol substance use support and community development.
- **Southmead Development Trust:** North Bristol community development.
- **Wellspring Settlement:** Central and East Bristol community development, including a focus on the Somali community and Traveller/Roma communities.
- **Nelson Trust:** Specialist support for women with multiple disadvantages. This supports our offer for women which we want to be one of the best in the country.
- **One25:** Street sex worker engagement and support.
- **Southmead Project:** Counselling and trauma-informed support.
- **Release:** Service user advocacy.

Our offer is designed around service user feedback on what they liked and didn't like from the old Bristol substance use service. Where there was once a fragmented service, with different organisations responsible for different parts of treatment, Horizons is designed as a single service with one culture and name. This allows service users to stay in one treatment system while accessing the collective expertise of a wide range of services. Teams are made up of staff with different employers, but staff within the service see themselves as working for Horizons first and for the organisation which employs them second.

Following feedback from service users, we identified improving service reach, accessibility and equity of access as core priorities. As a result, Horizons delivers services across three localities and a range of enhanced satellite locations. To ensure equity of access, we are targeting Bristol's higher-needs neighbourhoods so that service users can access the entire treatment system in each locality. Previously some parts of the service were only available in the city centre, but we now take all elements of treatment to all areas of the city, with brand new clinical spaces and needle exchanges in some of Bristol's most deprived areas.

Families and loved ones of people who use substances are supported using our evidence-based 5 Step model. We have a separate young people's service, Horizons Youth, which works across schools and youth centres to offer tailored support for young people who need help with their drug or alcohol use.

Henry's object and story – the recovery tree

In a recovery tree, the roots represent a strong network of support and encouragement. The trunk and branches are the ongoing efforts to strengthen a sense of self. And the leaves represent new growth.

One day at a time

For Henry, that new growth comes one day at a time. Yesterday, he focused on connection, learning, staying active, taking notice, and giving back. Today, he'll do the same. All with our support. It's a process that's working for him. He's been in recovery for 2 years and 4 months, which is the longest period he can remember in four decades.

Henry's struggles with drug and alcohol use span more than 40 years. In the 1990s, he realised he had a problem with drugs and sought help through Narcotics Anonymous. While he was able to achieve short periods of abstinence, maintaining them for longer was always a challenge.

During the early 2000s, he explored various recovery support groups and tried a range of recovery practices, including mindfulness and CBT. He also started on Turning Point's 12-week programme a couple of times but had reservations that led to relapses.

In July 2021, he decided to give our programme another go, completing all 12 weeks. He also reconnected with his Narcotics Anonymous sponsor, working his way through steps one, two and three. Achieving one year of life without substances was a turning point for Henry and his life began to transform. He enrolled in a peer mentoring course, began facilitating wellbeing groups, organised day trips for mental health clients, and volunteered at his local Turning Point drug service.

Today, he says he sees the world with a newfound clarity and fulfilment that lets him move forward one day at a time.

Goal #3

Prevent the escalation of need and reduce demand on the wider health and social care system

We take our role in the wider healthcare system very seriously with a focus on providing services that help to ease pressure on the system.

From setting up a new service for rough sleepers in Staffordshire, to undertaking a scoping exercise for a new sexual health service in Lambeth, we continue providing a range of effective interventions that prevent the escalation of need and reduce demand elsewhere in the wider health and social care system.

For the third year running, we held our Safer Lives conference, providing a space for individuals and organisations to come together to share new ways of working to reduce drug deaths. We continue to prioritise making sure naloxone is available to anyone who needs to use it. Following a successful pilot scheme in 2024, we are rolling naloxone postal services out across all our services in 2025.

Safer Lives innovations

In November 2024, we held our third Safer Lives conference. We invited 200 delegates from across England, Scotland, and Wales, including colleagues from across the substance use sector, NHS providers and public health.

With changing drug markets and the increasing emergence of synthetic opioids, the theme for the event was 'Harm

Reduction in a Time of Change'. We felt it was important to provide a space for individuals and organisations to come together and share new ways of working to reduce drug-related deaths. Speakers from Turning Point and the wider sector presented on a range of topics, including responding to the local presence of synthetic opioids, the value of peer naloxone distribution, and novel ways of providing young people with harm reduction information. Feedback from delegates described the event as well organised and full of inspiring and thought-provoking content for them to take back and use to develop local service delivery.

Throughout the year, Turning Point's Safer Lives strategy has maintained a focus on reducing avoidable opiate overdose deaths. In response to the ongoing issue with synthetic opioids, we have continued to prioritise ensuring naloxone is available to anyone who may be able to use it. We issue everyone we support who is at risk of overdose with two kits as standard but recognise there are people who are not in touch with our services who we also need to reach and provide with this life-saving medication. One way we are doing this is by making naloxone available to order online.

While there are successful postal naloxone services in both Scotland and Wales, Turning Point has launched the first and only service of this kind in England. In 2024, we started a pilot scheme in our Somerset service and are now rolling out Naloxone Click & Deliver across our services. Herefordshire, Lincolnshire, Leicester City and Leicestershire have joined Somerset in providing Naloxone Click & Deliver, and we plan for the rest of our services to follow them in 2025. In 2024 we posted out 250 orders. For many people, this is the first naloxone kit they have ever received. A significant percentage of the kits have gone to family members of people at risk of an opiate overdose, and we know that at least seven kits issued through Click and Deliver were used successfully to reverse an overdose.

In response to a request from colleagues, and in the face of increased risk to young people from contaminated drugs, we have developed a young person specific overdose awareness and naloxone training package. We have trained managers and young people's workers in our Young People and Family Teams to deliver an intervention that can be tailored to a young person's specific needs. It focuses on the importance of calling 999 if someone is unwell and includes an aftercare plan to ensure that if a young person witnesses or responds to a drug related emergency, they have a clear plan for accessing support. It has generated a lot of interest externally as there is no other training of this kind available. We will be making it available as a free downloadable resource in 2025.

In our continuing work to ensure naloxone is available anywhere it may be needed, Turning Point colleagues collaborated with more police forces in 2024. We trained officers in both Lincolnshire and Thames Valley Police who are now carrying kits. Our teams have continued their excellent work providing naloxone training for a range of partner agencies, including training staff in probation offices across our regions. In total our services dispensed over 32,000 naloxone kits in 2024.

Holly House – a community home with co-production at its heart

People experiencing homelessness often demonstrate incredible resilience, navigating daily challenges with strength and determination. Despite facing multiple complex needs, such as mental health issues and substance use, we know they possess real potential for growth and recovery. We also understand that many people will have experienced traumatic events, systemic exclusion and discrimination. Those experiences leave psychological scars, influence behaviours and make it difficult to trust others.
With the right support and opportunities, people can overcome barriers, develop new skills, and achieve stability. Their lived experiences provide valuable insights, making them powerful advocates for change and positive contributors among their peers and in their communities. Recognising and nurturing their potential is key to our commitment to foster a more inclusive and supportive society.

Holly House is a person-first service, providing a welcoming home where dignity and potential are respected. Here, individuals have the time and space to build their hopes, strengths and skills, striving for a better quality of life and greater inclusion in their local communities, including economic participation.

At Holly House, we have rules and boundaries to keep everyone safe, but the shared culture is all about inclusion, understanding, compassion and forgiveness. We know stability and recovery are not straightforward, and setbacks are part of the journey. These setbacks will not automatically lead to a person losing access to a home or services. We created our model with input from people who have lived through similar experiences, and it keeps evolving based on what we learn every day. This approach ensures that we respect everyone's dignity and potential as they work towards a better life and greater inclusion in their communities.

Setting up a new service model requires immense trust and bravery from all stakeholders, including the people who make Holly House their home, and Stafford Borough Council who support the funding of the service. Despite significant challenges and inevitable hurdles, we have all remained focussed on learning and achieving our shared objectives. It is all worth it when we witness the progress and achievements that validate the effort and dedication we all put in. Although it is tough, this journey brings hope and positive change, making every step meaningful.

Fundamental to the ongoing development of the service and housing model at Holly House is a commitment to co-production. It is essential that we engage the voices of those with lived experience of homelessness and rough sleeping. Together we are seeking to shift the balance of power, listen to these voices, and adapt services and strategies accordingly. The co-production activities build trust and engagement with people who have often been disengaged from services for a prolonged period. It provides a platform for individuals with lived and living experience to be included in the design, development, and evaluation of homelessness services that will become better through their involvement.

One factor in why rough sleepers and people with complex needs learn to distrust services is the lack of continuity. Changes in service providers, models and funding priorities often create an unstable support environment for people who need stability in their lives and the confidence that if they connect to a service or concept, it will still be there tomorrow. We are therefore delighted that the Ministry of Housing, Communities and Local Government and Stafford Borough Council continued their support of Holly House by renewing funding in 2025. The service is also supported by a recurring contribution from the Midlands Partnership University NHS Foundation Trust.

This continuing support reflects the position and increasing social value Holly House has on the support pathway within its neighbourhood and across the Stafford community. The advances made would have been more challenging to achieve without the support of a network of local service partners.

The service currently operates at full capacity with six rooms occupied. Over the past year, we have piloted an additional grant-funded service. This initiative funds a Rough Sleeper Outreach Worker who encourages individuals to engage with relevant services by providing ongoing support tailored to their needs. This support includes appropriate referrals to statutory agencies. The goal is to help individuals access suitable and sustainable accommodation with support. The Outreach Worker also assists Stafford Borough Council with reporting requirements for rough sleepers, including internal reports and external government reporting. They participate in relevant partnership meetings to advance support plans and improve housing opportunities for rough sleepers.

Positive outcomes at Holly House are steadily growing, and the achievements of individuals are truly inspirational. Witnessing their progress motivates and uplifts everyone involved in delivering the service. Each success story reinforces our commitment and highlights the incredible potential within each person we support. The service continues to advocate for inclusive co-production and engagement, offering sessions and feedback opportunities to empower people and improve service competence and delivery.

Scoping community sexual health services in Lambeth

In March 2024, Turning Point were commissioned by Lambeth Council to undertake a scoping project to assess the sexual health, wellbeing, support and educational needs of young people in the borough, particularly those at risk of poor sexual health. The findings were used to make evidence-based recommendations to shape the new sexual health outreach service

that launched in October 2024.

Over seven months, practitioners Kitale Kennedy and Phoebe Phillips used a mixed-method approach focused on collaborative stakeholder involvement and maximising data collection within the limited timeframe. To increase the likelihood that the new services would make a real impact, they sought to engage all relevant stakeholders, including those already supporting young people in the borough. By allowing them to voice what support would be most beneficial to them, Kitale and Phoebe reached a consensus on how sexual health support, services and outreach should be designed and delivered to best meet the needs of young people in Lambeth.

"The two key methods utilised were online surveys and in-person focus groups. We developed seven surveys and hosted four focus groups, engaging with 326 stakeholders in total.

Through focus groups we reached:

- *29 young people*
- *10 Special Educational Needs and Disabilities (SEND) and Relationships, Sex and Health Education (RSHE) Practitioners*
- *3 sexual health professionals*

Through surveys we reached:

- *133 young people aged 16-25*
- *54 additional young people with SEND*
- *36 sexual health professionals*
- *28 sixth form and secondary Relationships, Sex and Health Education (RSHE) teachers*
- *13 primary RSHE teachers*
- *10 parents/guardians/carers of young people with SEND*
- *10 youth workers*

Regular in-person outreach proved effective for engagement and increased uptake from stakeholders. It allowed us to build connections with the community youth organisations within the borough and assess existing support. To ensure that the young people we engaged with felt that their time, opinions and contributions were valued, we developed an eclectic array of 'sexual health goodies'. The most popular of which were our hand-made clitoris keyrings and stickers, which acted both as an incentive and a very effective educational tool. In addition to these 'goodies' we developed a stand-in leaflet to provide young people with the information and support they needed until the new services were up and running.

Our findings painted a frustrating but unsurprising picture, showing that both the young people and those who support them are struggling. All stakeholders needed targeted interventions and better access to the knowledge, resources, and services they need. Young people face inadequate RSHE, lack of awareness and outreach, inaccessible sexual health services and specific support for at-risk groups is sparse. These challenges are compounded by a lack of specific RSHE training, resources and outreach available for those providing support. When presenting each recommendation, we outlined stakeholder interest, suggestions on how it could be implemented and an explanation on how they would help address these challenges." Phoebe Philips

Following completion of the project, Turning Point won the bid to run the service, with both Kitale and Phoebe joining the team as young person practitioners. The recommendations and scoping process have shaped how the service delivers training, develops resources, and approaches outreach. Many of the effective outreach tools Kitale and Phoebe developed (including the clitoris keyrings and stickers) are now regularly used in the service.

"We both feel immeasurably proud to have helped develop and deliver a service that supports, educates and empowers young people in the manner they want and need while equipping those that support them with the tools to do so effectively

and with confidence." Kitale Kennedy

Marie's story – stopping smoking

Marie was supported by our Smoking Cessation Service at Turning Point Hammersmith and Fulham.

"There's no way that I could have successfully stopped smoking if it hadn't been for the NHS vapes that Turning Point gave me. It was great to have someone to talk to about it, because I didn't realise smoking had been bothering me, because we push it to the back of our mind. What if I get lung cancer? Because literally every time you smoke you've got that subconscious thought am I going to kill myself? Is this going to give me cancer?

Now, you've tested my lungs they're healthy, so that's a good feeling. I really appreciate it. You're amazing! The keyworker spoke to me on the phone initially and he was very persuasive at getting me to try it. Without Turning Point, and without the help that I got, I would probably still be subconsciously worrying about cigarettes and creating lung cancer in my life.

Now a lot more people can stop smoking because of vapes, because it's not such a shock to the system to go from 20 cigarettes to nothing. You showed me how to use them as I'd never used those types of vapes before. Eventually I found myself needing it less and less. I wanted to get the energy of addiction out of my life, and I've noticed my lungs are clearer and my house smells much better. And my breath - I don't have to have mints on me all the time!

Just give it a try. If you want the peace of mind, it's worth it."

Goal #4

Create enduring value for communities and society as a whole

The success of our 60th year anniversary celebrations and exhibition demonstrate the innovative ways our teams continue to deliver real value to the communities we work in, as well as for wider society.

We have continued protecting the rights of people with a learning disability by joining forces with Disability England to review and refresh the DNACPR pack, co-producing a new interactive resource with the help of people with lived experience. This year also saw us extend the support Rightsteps, our business-to-business brand, provides by refreshing and rebranding the service and expanding access to our online support.

Expanding Rightsteps mental health support

Turning Point's business-to-business brand, Rightsteps, continues to enable us to extend our reach to new audiences, supporting individuals' mental health earlier and helping prevent issues from escalating.

Rightsteps works directly with employers to support their workforces through its range of innovative and impactful solutions. This includes support for Mental Health First Aiders in the workplace, emotional support for employee groups struggling with the impact of their roles on their mental health, and access to online guidance and clinically developed digital interventions. Rightsteps also works closely with many benevolent organisations and charities, enhancing their wellbeing offer and supporting in the delivery of their charitable objectives.

We are continuing to expand access to the online support we have developed for people experiencing difficulties with night sweats and hot flushes associated with the menopause. People who access our NICE recommended support show improvements across all outcome measures, including the severity and frequency of night sweats and hot flushes, anxiety and low mood.

The number of people choosing to improve their understanding of their own mental health grew significantly during the year, with over 3,000 completions of our Mental Health Self-Assessment tool. This helps people better understand how they feel and guides them to the type of support that is most appropriate for their needs. The aggregated data from completion of the self-assessment tool provides a real insight to the level of difficulties many people are experiencing, which in turn informs the support Rightsteps provides.

Meeting customers' needs is critical to Rightsteps. We do this by listening to what our customers tell us, continually evolving our products and services and by providing fantastic customer support. Rightsteps' customer retention provides evidence of this, with contract renewals at over 80% for the year. We are also extremely proud that each year more and more organisations choose Rightsteps to support their mental health and wellbeing objectives. For instance, in 2024 Admiral Insurance selected Rightsteps to support its Mental Health First Aid community.

"Rightsteps have provided our colleagues with personalised, tailored counselling support to help improve and manage their health and wellbeing. As a result of this service, we have seen improved attendance at work, but more than that they have provided essential support to our colleagues when they need it most, such as not having to wait to access talking therapy through their GP. The team are super helpful and friendly and always offer considered solutions and options in times of crisis."

Dawn Haughton – Head of People, Vets4Pets

In 2024-25 Rightsteps' refreshed and rebranded My Rightsteps Hub, our online mental health platform. The Hub has a programme of new content and support for users along with a new look and feel and improved navigation. This is just the start of a new phase for Rightsteps' online support, building on customer feedback and reflecting our drive to continually improve how we meet customers' needs. Alongside this, Rightsteps launched its new website with new branding and a new structure to help those considering Rightsteps as a mental health and wellbeing partner to quickly understand who we are and how we can support them.

As well as supporting many external organisations, Rightsteps is a key part of Turning Point's health and wellbeing offer and is available to all our colleagues. Given the challenges that so many of our colleagues navigate both inside and outside of work, this support is critical, and hundreds of colleagues chose to access Rightsteps during 2024-25.

Health and wellbeing support to improve life chances

Enabling and ensuring good health and wellbeing is at the heart of what we do at Turning Point, both to improve life chances and prevent the impact of ill-health and inequalities.

This is especially important given that many of the people we support are at increased risk of poor health. However, our ambition for health and wellbeing extends to our colleagues and the communities we are part of across the country. We seek to create ripples of change and possibility for the thousands of people our work touches every day.

We have never been prouder of how we help improve health and wellbeing across different domains of people's lives. Our 60th year highlighted the many and innovative ways we reach people searching for their 'turning point', and how we are led by them to explore how this could enhance their lives in the present and the future.

To mark our 60th year, we asked people to put forward an object that tells their story. Many of these objects demonstrated an impact on wellbeing:

- Lucy captured Raven the cat sitting on her work bag with her guitar in the background, a demonstration of the power of pets, creativity and the role employment can have on our lives, giving us focus, financial stability and connection

with other people. (TurningPoint60 | Object)

- Hannah's simple candle held a poignant message, reminding us of ways to create calm for our minds, our bodies and the places we live. (TurningPoint60 | Object)

- A mug of tea or coffee can be the everyday item that brings people together and initiates someone to open up about their concerns for themselves or loved ones for the first time. Years later they may be the very people offering that mug to others. "Now, I'm using everything I know to teach, motivate, and inspire people who find themselves where I was in the past," Kerri told us. (TurningPoint60 | Object)

- For Craig, his wellies represent his love of keeping busy and his 'switch off' where he can enjoy being outside in nature, feeling free of worry and concentrating on his next catch. Being supported to find fishing, his new hobby, helped Craig manage his mental and physical health during the pandemic. (TurningPoint60 | Object)

The objects are a reminder that what may appear to be unremarkable can help create remarkable and long-lasting change, even when the initial change is small.

Looking forward, our Health, Wellbeing and Inequality strategy continues to guide us to adopt preventative and systemic approaches to address the underlying factors that impact on health and wellbeing.

Our Wiltshire Connect substance use service has partnered with the council to be a provider of the Household Support Fund locally. They received £30,000 in the last round of funding to be distributed to local people who struggle to meet essential living costs during the current cost-of-living challenges. Peer mentors with lived experience are central to the decision-making process that allocates the funds. To date, we have helped people to purchase a range of essentials, including shopping vouchers, white goods, children's furniture, mobile phones and clothing. We have helped people clear debts, live in safer conditions and reduce many risk factors for poor health and wellbeing.

We will remain focussed on working with people who are at the greatest risk of health inequality, exploring ways to broaden the support we provide and increase access to support from the wider communities we work within.

Our stop smoking service in Hammersmith and Fulham targets groups of people who are known to have a high prevalence of smoking and, therefore, a greater risk of associated health conditions. In 2024-25, we supported 232 people to achieve their goals to quit smoking. 41% of them were also struggling with drug and/or alcohol addiction, and 43% had a mental ill-health diagnosis. Over 50% of people who access our service quit successfully, which is something to celebrate, given the challenges many of the people we see experience in tackling what is often a long-term habit and addiction.

Advocating for change

DNACPR stands for Do Not Attempt Cardiopulmonary Resuscitation. It is a recommendation from a doctor that CPR is not performed on someone when their heart stops. 'Learning disability' should never be a reason for a DNACPR recommendation.

During the pandemic, we saw an unprecedented increase in the number of people we support with learning disabilities being subject to inappropriate DNACPR recommendations. In response, Turning Point worked with Learning Disability England to put together a DNACPR checklist to help people with a learning disability and their family, carers and support workers to understand the law and their rights.

Unfortunately, the problem remains. The 2022 LeDeR (Learning from lives and deaths) review found that where a DNACPR was in place at the time of death, DNACPR documentation and processes were not correctly completed and followed in over a third of cases.

This is why Turning Point joined forces with Learning Disability England again last year to review and refresh the DNACPR information pack. A new interactive resource, including videos and 'top tips' from people with lived experience was launched in July 2024. We coproduced this information pack with the help of different people and organisations. These include self-advocates, family members and advocacy organisations. Academic specialists, the National Mental Capacity Forum, CQC and NHS England also provided expertise.

"Sometimes we don't know how to challenge and it's really important we understand what to do about it and who to go to." Mel - support worker

"There was a general lack of awareness and confidence among people, families and care workers about what a DNACPR decision meant, and how to challenge this." Care Quality Commission (CQC)

The Information Pack is available at https://www.turning-point.co.uk/support-we-offer/learning-disability/dnacpr

"It's not an illness a learning disability. You're born with a learning disability, but you don't die from it." Brian – self advocate

"We're all human, we're all equal – and no one should be discriminated against." Linda – family carer

Marie-Ann and Alistair's object and story - DNACPR decision note

Protecting the rights of people with a learning disability

"My brother, Al, loves living at Rix House, a residential centre for people with a learning disability that's run by Turning Point. In April 2020, right in the early stages of the pandemic, Al's doctor called to tell me that Al wouldn't be admitted to the hospital if he fell ill. The doctor also said they were issuing a DNACPR decision.

At the time, my overriding feeling was relief. At least Al wouldn't need to go to hospital by himself; he has a strong fear of hospitals and needs a familiar person by his side. Since no-one was allowed to accompany their loved ones to hospitals back then, I was reassured he'd at least be surrounded by love and care.

However, as I thought things over that evening, I became more and more troubled that the doctor hadn't said how long the DNACPR decision would be in place. The next morning, I called the doctor to ask about the timeframe and expressed my shock when I was told there was no specific limit. That was when the doctor agreed to set the timeframe at three months.

Wanting to talk things through, I called Al's dedicated key worker, Vivienne and told her about the order and my conversation with the doctor. A few days later, Vivienne called me back. She was furious. The centre had received a blanket DNACPR decision for all residents. This included one resident, perfectly capable of making their own decision, who hadn't even been consulted.

Thankfully, Vivienne decided to contact our local MP, Robbie Moore. She told him what had happened and explained her disgust that people were being disregarded, and their lives considered insignificant. Robbie Moore immediately recognised the injustice and raised the issue with Bradford Clinical Commissioning Group. It was April 15th when Vivienne first emailed Robbie and by April 25th, the DNACPR orders had been cancelled.

Similar stories in the news made it clear that Al wasn't alone in facing this kind of prejudice. People with learning disabilities and elderly residents in care homes, some of whom were veterans, were being denied the same opportunities as others. I'll be forever grateful to Vivienne for everything she did and enabling me to realise that not everything was being done with Alistair's wellbeing in mind."

6 Our approach

Involvement and engagement

Involvement is key to ensuring the high quality of the services we provide.

This year, we have continued listening and learning from the people we support. Our My Turning Point Experience measures give us valuable insights about how people feel about the support we provide, while My Voice 2024 brought people together to explore themes of real importance to the people we support. Our networks continue to thrive, acting as critical friends and providing valuable input to help us improve services and resources.

Listening and learning from people's experiences

We continue gaining the rich insight that informs and improves the support we provide through the many ways we have of listening to, learning from, and collaborating with people we support across our organisation. One of our ambitions is to meaningfully involve all in everything we do. We have continued growing involvement across our services and national initiatives, from involvement forums and co-production projects to service design and quality improvement initiatives.

Alongside qualitative insight and collaborative working with people we support, we recognise the benefit strong quantitative metrics can play in understanding people's experiences. This year we focussed on this by working to strengthen how we enable people to rate aspects of their support easily, and how we learn from what they tell us.

Our co-designed *My Turning Point Experience* measures give everyone supported by Turning Point the chance to answer questions about their overall satisfaction, and some specific questions about aspects of their support. Through looking at combined data from all our services, we are building a national picture of how people feel about their support and an understanding of any themes and variances across our three business areas. Services are beginning to use their real-time data to monitor experience ratings of the people they support and to reflect on and learn from the data.

As data continues to build, we will be able to glean more from it across Turning Point. We plan to continue embedding *My Turning Point Experience* to make sure every person we support has the chance to feed back to us.

What people we support told us this year:

- 87% people have an overall positive experience of support from Turning Point
- 85% feel they get the support that matters to them
- 88% feel listened to and well communicated with
- 84% feel involved in decisions about their own support
- 90% feel safe in the service they use

(based on 1,936 responses)

Amplifying the voices of people we support in our 60th year: My Voice 2024

This year, we continued to strengthen our dialogue and collaboration with people we support, demonstrating the value we place on their experiences to inform all we know and do at Turning Point. As part of the programme of events marking our 60th year, *My Voice 2024* brought together people from each area of support we provide and from across the country to share their experiences, needs and ideas.

From Northumberland to Kent, people we support came together in-person alongside colleagues for a co-designed day that explored some of the recurring themes that came up about engagement during the year. These were themes people highlighted as being of real importance to them and which have crucial impact on their support, and the opportunities they have to achieve new possibility in their lives.

Family members and wider circles of support played an important part in the *My Voice* discussions as they are vital partners in the care and support of their loved ones. They shared perspectives and ideas around what great support for their loved ones looks like, and what they need when engaging with the service.

"The day has been collaborative between service users, peers support workers, professionals - it seems to me that we're all talking on an equal par which is important." Karlito, supported by Turning Point

What we heard

Reducing stigma

We heard experiences of the stigma that people we support continue to face and how this can have an impact on their ability to thrive. But we also heard of positive change around this and efforts to actively challenge and reduce stigma, for example through working to ensure we use destigmatising, inclusive and empowering language throughout our organisation and beyond.

Accessing services and support

We heard how having access to the right services and support, and chances to explore new possibilities and reach new potential, are key to recovery, reablement and independence. We heard a clear message that we must continue striving for truly inclusive and equitable support in our own services, and champion improved access outside Turning Point in wider health and care.

Communication and connection

We heard of the positive impact great connections have on the lives of people we support, and in them developing meaningful, trusting relationships and networks, such as the connections they make with others supported by Turning Point, support staff, new and existing friends and family members. We also heard of the important role excellent, person-centred communication plays in enabling people's voices to be heard, and in their confidence and personal growth.

"The only way change is going to happen is if we learn from each other. If these conversations happen it's heard from all sides – staff, people who use the services and families." Sameya, family member of someone supported by Turning Point

It was a powerful day where we heard important messages that will inform the support we provide so that it continues to be the very best it can be. There were real benefits in coming together in person to connect and share in this way. Those who attended showed a real sense of pride in being part of Turning Point, as well as a continued commitment and determination to work together to inspire possibility and reach new potential, individually, for their services, and for our national organisation.

"It is vital that we hear from the people we support and also their families and wider circles of support because if we listen and we learn, we can do something directly with the experiences that we're hearing." Julie Bass, Chief Executive, Turning Point

The importance of networks at Turning Point

The LGBTQ+ Network

The LGBTQ+ Network continues to grow and thrive. They have now been running for four years and continue to evolve. A wide representation of the LGBTQ+ community attends meetings, both supporting and being supported. More transgender people, non-binary people, lesbians and gay men are attending the groups than ever before. In the last year, Turning Point had space at a record ten Pride events around the country. This helps us shine a light on our cultural competence to support this cohort of clients, as well as being another strong signal of our diverse and welcoming workforce.

The network has extended meetings from 60 to 90 minutes with the final 30 minutes having a trans and non-binary focus while remaining open and welcoming to all. This change came about following one of the network's monthly sessions where trans was the main topic. The discussion that followed was rich and varied but there was not enough time to discuss everything that came up. After many external meetings driven by two regular trans attendees (one being the Co-Chair), the network created the space.

The Autism and Neurodiverse Allies Forum

The Autism and Neurodiverse Allies Forum promotes the interests of colleagues, volunteers and peer mentors who are autistic or have neurodiverse support needs, as well as offering advice, guidance and support for colleagues working with autistic and/or neurodiverse clients. They offer support and advice to the organisation on policy and practice within Turning Point and act as a critical friend to the business to support improved equity and inclusion.

Some of their 2024-25 highlights include promoting resources and information to inform and support colleagues, including Ambitious About Autism and the National Autistic Society, as well as celebrating national awareness days with colleagues. They have worked with local services to introduce tools and resources for people who are neurodivergent, including the use of ear defenders, emote cards and sensory aids.

The Disability Network

The Disability Network promotes the interests of colleagues, volunteers and peer mentors with disabilities and/or chronic health conditions. They offer support and advice to the organisation in adopting the social model of disability and embedding this model in both policy and practice within Turning Point. In 2024-25, activities included:

- Advocated to embed the Inclusion Passport, which they devised and initiated, into managerial practice. The passport now supports the transfer of disabled staff through the TUPE process for new contracts, ensuring that reasonable adjustments and any specialist equipment transfer with new staff.

- Continued promoting a culture of equity, diversity and inclusion and belonging within the organisation by sharing experiences on internal platforms such as Spark and Viva Engage. They focussed on disabilities and neurodivergence but also referenced intersectionality with other minority communities such as LGBTQ+ and ethnicity.

- Led discussions around visible and invisible disabilities, focusing on perceptions, attitudes and the impact of stereotyping and labelling.

- Facilitated peer support discussions to provide a platform for sharing experiences and advice in a confidential, psychologically safe space that is free from judgement.

The Menopause Network

The Menopause Network keeps menopause in the conversation at Turning Point by creating a safe space for colleagues to discuss and share their lived experience and further increase their employee voice. As well as looking at ways Turning Point can better support colleagues, the network focuses on increasing awareness and education. Some of the activities in this period include:

- Launching Turning Point's Menopause Policy on October 18th to coincide with International Menopause Day.
- Collaborating with Rightsteps who facilitated two network sessions highlighting what support is available to colleagues and how to access it. Rightsteps also attended a further session on tips for managing sleep during menopause.
- Developing our Explore Menopause learning resources to include Diverse Ethnic Women and Menopause, and LGBTQ+ Menopause.

The Ethnic Diverse Community Network (EDCN)

The EDCN provides mutual support, encouragement, guidance and networking opportunities for network members. As champions of diversity and inclusion, they raise awareness of relevant issues and help build a culturally competent approach. In 2024-25 their activities included:

- Reviewing pharmacy documents to feedback any cultural or spiritual considerations including the medication optimisation, medication administration policy, and supervised consumption information leaflet.
- Delivering three Black Women Safe Space workshops, providing a safe space for Black women to address difficult conversations and self-care.
- Holding the first network away day in Birmingham, building on the network principles of Cultivate, Develop, Enlighten, and Improve.
- Celebrating Black History Month, including the first Black History Month quiz, won by a group of colleagues and people we support at the Yeovil hub for the Somerset Drugs and Alcohol Service.

Olivia's Story – a right to live independently in your own home

Olivia is supported by Turning Point, but until recently she had lived in long-stay institutions for most of her life. Olivia has learning disabilities, mental health needs and profound hearing loss, and has experienced traumatic events in her past.

In hospital, Olivia had very little freedom. Her weekly escorted leave was often withheld as a punishment. Olivia moved into her own home in 2024. When she was first referred to Turning Point she was assessed as needing 3:1 support at all times. Within just a few months of moving, Olivia had settled into her new home and built trusted relationships with the staff supporting her. Her support subsequently reduced to 1:1 and she can have periods of time on her own. She is the proud owner of a rescue cat, Bonnie.

How long were you in hospital for?

"I've been in hospital for about 45 years. Different hospitals. I've been travelling all around. All around the country, in

different ones.

What was it like in hospital?

I didn't like it at all because you couldn't have ornaments, you couldn't have china, couldn't go in the kitchen or nothing. So, I went to C- House and I stayed there for about nine, ten years. I felt really bad because you used to get wee everywhere. I didn't like it at all. It was filthy. We couldn't go out. Only once a week. Do your shopping. Then you only got about three to four hours to get there and back. Certain times be in bed.

What's it like living in your own home?

I love it. Now I can have everything. I can have ornaments, I can have glass stuff, I can have china, I can have cutlery, I can make my own drink. I go to bed when I want. I've got a cat, which I like, named Bonnie. And I like her a lot. I looked at two but one was only a kitten and it wouldn't come to me, and I thought "oh why won't it come to me, it doesn't like me or something". She was meowing at the door straight away. Yesterday was the first time she slept across my legs.
I can't wait to go on my holiday on Friday. I'm going for two nights on my holiday to Dymchurch. I just can't wait for it because last year Dr L- who was my doctor at the hospital, she did write to the Home Office about it and that was to get me some time to go on holiday. But they said no, the Home Office, so I got let down.

So, I'm going this time. [The last time I went on holiday was] about 50 years ago. I'm going to go to the caravan. When we get there, we're going to get all our clothes and everything out and get all sorted out. Then we're hoping to go out for a meal and perhaps go for a little drive somewhere around. Then the next day we're hoping to get up early and go to like second hand shops and arcades and that.

How did you feel when you were told that you were moving to your own home in the community?

I was happy. I couldn't wait. I used to say to Dr L- "Have you heard anything yet? Have you heard anything yet? Am I moving yet?" And she'd go "Not yet. I've got nothing yet." And this come up, they came and told me straight away. "They're going to start coming to see you quite soon, the people" so I thought "Oh lovely". When they were telling me about it and that, each day I was going "Is there anything yet? Am I moving right now? Have I got a date?" And she's going, "No, not yet" and I'm going, "Well, hurry up then". She goes "Alright, we'll hurry up, we'll try to get that pushed along".

What would you like to do in the future?

I'd love to work at the church place you know, helping them to put stuff out and that. Price the stuff and stuff like that. When I come back off my holiday, I'm hoping to go and you know, try it out. I'm very, very happy and pleased. I'm out of hospital and living out here in my own flat with my cat, with my stuff, what I got around me. It could be no better for me."

Our Turning Point culture

At the core of our organisation is a strong commitment to creating a culture where our colleagues can thrive. We believe that our culture is not just a backdrop but a powerful force that influences our daily interactions and long-term vision. Our values guide our actions and decisions, and we take them seriously.

The positive impact of our supportive and engaging culture is reflected in the excellent outcomes we achieve for those we support. By fostering a healthy workplace, we enhance the quality of service and care we provide, enabling colleagues to make a meaningful difference in the lives of those we support.

Despite challenges in the sector, we continue to attract exceptional colleagues through recruitment campaigns that emphasise our commitment to equity, diversity and inclusion. Our turnover rate remains significantly lower than the sector average. We believe this is due to our commitment to fostering a culture that empowers, rewards and develops our people and those we support. We are committed to developing colleagues, expanding and embedding our range of leadership programmes and learning opportunities.

Colleague engagement

Our colleague engagement survey results show a positive trend this year, reflecting our commitment to fostering a supportive and engaging work environment. The overall engagement score for Turning Point is 79%, an improvement of 2% from last year. This increase is a testament to the hard work and dedication of our colleagues who have co-created cultures that allow them to thrive and give their best to the people we support.

Key highlights from the survey include:

- 83% of colleagues understand Turning Point's priorities and where the organisation is heading, an increase of 2% from last year.
- 92% of respondents feel their role contributes to achieving Turning Point's outcomes, a 1% improvement from last year.
- Our values resonate strongly; 79% of our colleagues believe we have strong values which are put into practice.

We are particularly proud of the 5% increase in trust and respect for our leadership group which is now at 75%. This reflects our ongoing efforts to build a transparent and trustworthy leadership team. Furthermore, 87% of colleagues trust and respect their manager or supervisor, an increase of 2% from last year. These results highlight our progress and areas where we can continue to improve. We remain committed to listening to our colleagues and taking action to enhance our workplace culture.

Inspired by Possibility awards

The Inspired by Possibility awards are all about shining a spotlight on those who have made remarkable progress over the past year. They give us the opportunity to recognise the efforts people have made in their lives, or to steadfastly stand by others in the pursuit of possibility.

During 2024-25, 421 people were nominated for an award, including contracted employees, people we support and our peer mentor and volunteer community. Whether through personal achievements, acts of kindness, or inspiring others with their determination, every nominee has shown what is possible with resilience and support.

We were delighted to give an Inspired by Possibility award to Brian, who we support in a Learning Disability service. Brian started working at a local charity shop, to support their cause and give back to his community. He also worked to establish our Learning Disability People's Network, to which he brings loads of energy, passion and dedication to understanding and advocating for the needs of others. Brian is an inspiration and support to those around him.

Sonal, a Senior Support Worker, also received an award. Sonal provides support to people with Learning Disabilities. She inspires her colleagues with her consistently person centred and empathetic approach to the people they support. She has coached colleagues who support those with high support needs to ensure they enjoy the best quality of life. She also actively supports people to get involved in their local communities and, where appropriate, proactively supports people to access education and training, as well as voluntary and paid employment.

Recruiting and retaining our colleagues

Recruiting top talent is always at the heart of our efforts. Despite challenges in our sector, we continue to attract exceptional individuals. We utilise advanced advertising platforms to reach a wider audience and tailor our campaigns to emphasise our commitment to equity, diversity, and inclusion. We craft adverts for individual job roles to ensure we paint a true, authentic picture of the role, and are attracting the right talent for each opportunity.

Our strong relationships within local communities are key. By partnering with councils, universities, and job centres, and by attending job fairs and hosting recruitment open days on weekends, we can showcase our opportunities and accommodate potential candidates' schedules. This inclusive approach makes our application process accessible to all, supports working families, and enhances our appeal to a wider audience. As a result, we can attract a richer, more diverse workforce.

Our referral system in hard-to-recruit areas has seen true success. By encouraging our current employees to refer like-minded individuals and family members, we have tapped into a network of passionate and dedicated individuals. This approach fosters a sense of involvement and belonging among our staff. The personal connections and values our referred candidates share have made our workforce more cohesive and motivated, ensuring we maintain a fully staffed service even within tight timelines.

One of our standout stories comes from our Wiltshire service. Faced with significant recruitment challenges, we leveraged our sponsorship status to offer permanent opportunities to individuals who had previously been overlooked for permanent opportunities. This initiative not only filled critical vacancies but also brought in a group of highly motivated and dedicated professionals. Their enthusiasm and commitment have been instrumental in creating a stable and engaged workforce. As a result, we have been able to provide consistent, high-quality care to those we support, ensuring continuity and building trust within the community.

By the end of 2024-25, our average vacancy rate was just 3.7%. Our voluntary colleague turnover rate stood at 17.55%, significantly lower than the sector average of 24.8% (Skills for care). Our approach not only addresses workforce shortages but also fosters a vibrant, inclusive, and committed team.

Leadership and development

Great leadership is key to our success and growth. This year we have embedded the new leadership programmes we launched in February 2024.

The Aspire leaders programme supports colleagues who are not currently people managers to grow professionally and personally so that they can become tomorrow's great leaders. Aspire is designed to be learner-led and bespoke to the individual's needs. To achieve this, we take all delegates through a 360° assessment against our value-led leadership framework and develop a personalised development plan from this. Alongside the learning, delegates can choose to access

coaching and/or complete a level 3 apprenticeship in Leadership and Management. This year 72 colleagues signed up for Aspire.

The best leaders inspire others with their values and their actions. The Inspire leaders programme supports our existing leaders in understanding themselves as a leader. It develops and refines their personal leadership skills, including their ability to handle difficult situations, influence others and build relationships. The Inspire programme takes a continual professional development approach, built on the ethos that leadership is a practice we all need to continue to reflect on and develop. Leaders can access learning and coaching and complete a level 5 Leadership and Management or Coaching apprenticeship as part of the Inspire programme. 194 managers have signed up for Inspire to date.

We launched the Manager's Induction in September 2024 to support new managers joining Turning Point or stepping up into a new role. The induction is designed to support managers to land in their roles as effectively as possible. Since the launch, we have had 56 managers join the Managers Induction.

We also supported wider developments in the sector by being an early adopter for the Care Workforce Pathway, developed by Skills for Care and the Department of Health and Social Care. The pathway aims to standardise various job roles within the care sector. This initiative aligns the values of the care workforce with those of organisations, identifies skill gaps, and outlines clear progression opportunities and accountabilities.

Through working with Skills for Care as part of the early adopters' programme, we have been able to help support and shape this key initiative that will contribute to a more competent, motivated, and effective care workforce.

Adam's story – the People's Champion

Adam Hardaker is the Supported Living Manager at Turning Point Cornish Close, a residential unit that consists of five terraced bungalows that supports 14 people with learning disabilities and complex needs. People who live at Cornish Close are supported with their emotional, physical and cultural needs so that they can live their lives to the fullest. Adam leads a team that provides the very best care and a person-centred approach that fosters a close-knit community atmosphere for all those who live at Cornish Close.

In the summer of 2024, Adam won the prestigious People's Champion award at the annual Greater Manchester Health and Care Champion Awards. The award recognises an individual or team for their commitment to improving the health and wellbeing of others. Organised by NHS Greater Manchester, they are the only Greater Manchester-wide awards which recognise the exemplary contributions of our whole health and care workforce. The judging panel said Adam was recognised for his "work and passion, supporting people with learning difficulties and disabilities to improve their day-to-day quality of life".

After collecting his award, Adam said: *"To just be nominated by the families of the people we support and other members of the public for the work that I do within the health and social care sector was such an honour itself. To win such a prestigious award is something that is difficult to put into words. I am privileged to work with and alongside some of the most amazing people who work tirelessly for the people we support so they can live great, healthy, meaningful and fulfilling lives. This award is not just for me, but also all our brilliant support workers, as well as Katie, Charlotte, Brendan, and Karl - we all come together with the aims and vision of Turning Point at heart. Every person at Cornish Close brings their own uniqueness to achieving all that we do. A massive thank you to all those who have helped along our journey, and long may it continue."*

Karl Howard-Jones, Locality Manager, Learning Disability at Turning Point, said:

"Since the transfer of Cornish Close to Turning Point in October 2022, Adam has worked tirelessly to advocate for the people we support. He has led his team through the myriad changes required from the previous care provider to the high standards

that Turning Point require. Sometimes this has been difficult, from liaising with property personnel regarding refurbishment work, health professionals, as well as supporting and directing the support team in implementing all the changes that were required to support plans for the residents. This award given to Adam recognises his efforts in the best of ways."

Delivering social value

Social value is the added value services can deliver to the economy, community life, the health of the local population and the environment. It is an integral part of everything we do.

We are committed to being 'inspired by possibility' and improving the health and wellbeing of the people we support, the communities we work in and our teams. This commitment to social value shines through everything we do whether that is our community innovation fund and grant funding programmes, our evolving apprenticeship programme, or the mental health and wellbeing support we give our colleagues.

Inspiring projects from our Community Innovation Fund

During 2024, our Community Innovation Fund continued to help inspire the people we support, staff, local organisations and residents to come together and create projects that improve wellbeing, reduce isolation and leave a positive legacy for our services and the wider community. We had 57 applications to the fund over two rounds of funding, one in spring and one in autumn. Each applicant demonstrated an ability to co-produce with community stakeholders, resilience and determination to overcome challenges, and a dedication to the work they do. At the start of 2025, over 1,000 people had benefitted from the projects either by being part of development and delivery or through participation.

Our rotating panel is made up of people we support, staff and previous recipients. They had the difficult challenge of shortlisting 18 projects to receive funding. We continue to follow these projects and to offer them support and share their successes throughout our organisation. The 18 shortlisted projects are:

- **Falcon FC** – Falcon Recovery Services
- **Rounds to Recovery** – Team Valentine
- **My Journey, My Way** – Turning Point Beacon Lodge and Angel Lace
- **Community Pharmacy: Time to change the script** - Turning Point
- **Stafford Courtyard of Success**
- **Disability Champions** - J7 Health and Fitness CIC Manchester
- **Writing in Recovery** – Turning Point Herefordshire
- **Brown Girl in a Bottle** – Turning Point Leicester, Leicestershire and Rutland
- **Stafford Self-Care Project**
- **Birchwood Forest School** – Turning Point Birchwood
- **Mental Health Lending Libraries** – Turning Point
- **Speaking without Stigma in PHSU** – Turning Point Service User Council

- **Wakefield Arts and Crafts** – Turning Point Wakefield
- **Virtual Experiences, Real Outcomes** – Turning Point
- **Making recovery visible and connecting with the community** – Turning Point Somerset
- **Bees and Refugees Farm Visits** - Bees and Refugees
- **Rabbits Warren** - Development Plus
- **Digital Developments** Turning Point Wakefield Talking Therapies

Case Study: Falcon FC

Falcon Support Services is a homeless and community project that supports people across Leicestershire and Rutland. Falcon Support Services applied to the Community Innovation Fund for £2,000 to support them with the hire of an indoor football pitch and for equipment to ensure that not being able to afford boots or shin pads is not a barrier to playing football. They planned to create a borrowing bank of equipment that could be cleaned between sessions.

Since receiving the fund, being able to offer the correct footwear for these events has really given the service users a boost. The team's dedication and hard work has been amazing, and we have had some significant improvements in fitness and reducing substances. In the first three months of the project there were 54 individual visits to the training sessions. The amount of interest service users have shown in getting involved in the football training is a mark of the success of this project. *"Knowing I have this every week to come to helps me get motivated" Participant*

In September 2024, we put together a football tournament with eight teams from across Leicestershire, Derby and Nottingham. 90 people attended or took part in the event. All involved were in recovery or seeking recovery from substance use.

Inspiring possibility through grants

Our Grant Application Programme secures funds for activities that enhance life choices, community inclusion, access to services, quality of life, and better health. We support individuals and communities by funding projects that meet their needs. This creates opportunities for education, employment and personal growth, improving life choices and fostering self-efficacy.

Our funding priorities include initiatives aimed at fostering interaction and understanding among diverse groups. These activities support the development of stronger, more cohesive communities where all individuals are recognised, respected and included.

In 2024-25, our work also focused on improving access to physical and recreational activities, environmental enhancements, and arts and culture projects. These initiatives aimed to improve the living environment and provide opportunities for fitness, relaxation, shared experiences, and fun. Our grant applications drive positive change, achieving more than contract funding alone.

HOOF League (Leicestershire Mental Health and Substance Use), Barclays Sported Fund and Turning Point. This grass roots initiative supported individuals across mental health and substance use services with a history of insecure housing to play community sports. In partnership with The Falcon Centre and The Leicestershire and Rutland County FA, the opportunity was open to all services supporting people across the East Midlands. It focussed on reducing the barriers

people supported face in accessing recreational football.
St Barts (Sandwich, Kent Learning Disability) Turning Point and The Lawson Trust. This project provided improved accessibility for individuals supported by our learning disability service in Sandwich, as well as recycling materials to preserve the environment and reduce costs.

Cornish Close Community Comfort Garden (Wythenshawe, Greater Manchester Learning Disability) Neighbourhood Investment Fund, Great Places Landlord, Turning Point, and Manchester Airport Group. This peer-led initiative transformed a run-down and under-used area into the Cornish Close Community Comfort Garden, creating a calming and dignified outside space where people we support and their friends and families can spend time together. Volunteers from Good Gym helped to create the garden and Manchester Airport Group provided funds for benches and planters which volunteers from their team also built. The garden brought the local community, councillors, and the MP together to increase community representation for an often-forgotten group.

Five places at the Beyond Food course (London). We cover the costs of Beyond Food's course for five people we support in London. The course aligns with Turning Point's approach to supporting people with budgeting, independent living and healthy eating, as well as having a tangible, positive impact on sustainable employment which can improve the wellbeing, confidence, quality of life and resilience of people we support. The chef and front of house course is up to nine weeks long and finishes with work experience in a professional fine dining restaurant, alongside experienced staff catering for paying customers.

Douglas House and Pendlebury House for the extension and expansion of their 'One Step At A Time' Exercise Programme. Mental illness is associated with many forms of inequalities. People are at greater risk of poor physical health and reduced life expectancy compared to the general population, and normal ways of improving physical health are often less accessible to people with mental health issues. 'One Step At A Time', is a peer-led and person-centred fitness pilot for people we support. It includes a mental health aware personal trainer and aims to increase the physical health and wellbeing of individuals with enduring mental health challenges. The programme also helps develop confidence in physical wellbeing abilities at our Nurse-led mental health hospital, Pendlebury House, through tailored group and one-to-one settings.

Manchester Crisis House and Recovery Lounge and CERT. Local developers CERT created and ran a series of themed events around mental health within the Northern Quarter of Manchester. CERT will donate all the funds raised through these events to fund the development of our Crisis House and Recovery Lounge Community Garden.

Virtual Experiences, Real Outcomes in Mental Health. Donation and Community Innovation Fund. The idea of this project is to give some of the most marginalised people in society the opportunity to access the benefits of virtual and mixed reality, using ten virtual reality headsets in selected Turning Point mental health accommodation-based services. Initially, this will be a trial focussing on relaxation, mindfulness and fitness outcomes. The objective is to improve individual engagement with health and wellbeing activities and goals through a medium which enables them to become more active in spaces where they feel safe and in control and expands opportunities for anxiety and stress relief in worlds they choose and inhabit.

Staffordshire Rough Sleepers - Stafford Borough Council grant. This grant funds outreach work to rough sleepers and people who are experiencing homelessness in Stafford. Our Rough Sleeper Outreach Worker and colleagues within Turning Point provide rapid response in the community to verify individuals reported as rough sleeping to Stafford Borough Council and their partner agencies. This enables Stafford Borough Council to refer individuals to the most appropriate service, including housing options, substance use services and mental health support services. We encourage people to engage with relevant services by providing ongoing support tailored to their needs, with the aim of accessing suitable and sustainable accommodation with support.

The Wilderness Programme. Turning Point, the RSPB and external donations. Wilderness environments hold many benefits for the human psyche. The Wilderness Programme started in 2017 and has continued developing since then. It

helps to address the needs and wellbeing of a growing number of individuals who are unable to cope with the rigours of modern life. The Wilderness Programme is running an eight-person pilot programme to gather data, including data about the physiological impact of their programme. Places are available for Turning Point peer workers and volunteers within the Northwest. They create a safe space for participants to explore and develop their goals for life and options for wellbeing while generating existential opportunities to change behaviours and engage in a life worth living.

The power of apprenticeships

2024 kicked off with Kirsty, our Apprentice Star of the Year, being shortlisted for the Regional Apprenticeship and Skills awards – East of England in the Higher Apprenticeship Category. She won the award and went on to the National Apprenticeship and Skills Awards Finals in November. Kirsty celebrated her fantastic year with like-minded peers and represented Turning Point, who were the sole Social Care provider at the national event.

As well as taking part in the awards, we supported the regional events by being a regional judge for the Southwest. This gave us the opportunity to celebrate all things apprenticeship. Entering the National Apprenticeship and Skills Awards and getting through to the National stage within two years of applying demonstrates how far we have come in a very short space of time.

In 2024-25 we continued developing and evolving the apprenticeship programme. We developed apprenticeships with providers for the level 3 public health and substance use (PHSU) bespoke apprenticeship and supported the development of Trailblazers with other employers and providers. In September 2024, we launched our Level 3 Team Leader apprenticeship (formerly Level 3 Team Leader/Supervisor), and Level 5 Operations Manager apprenticeship (formerly Operations and Departmental Manager). These align with our Aspire and Inspire leadership programmes to support colleagues' progression and develop our leaders' and future leaders' knowledge, skills and behaviours.

We have grown our apprenticeship programme from 43 standards in 2024 to 61 standards in 2025. As our organisation grows, we need a robust and growing apprenticeship programme that supports colleagues in their roles. We also need to be able to explore the new opportunities that apprenticeships can provide in supporting growth and economic stability, in line with the Department of Education and the apprenticeship reforms introduced in 2024.

As we have grown the programme, the number of colleagues on clinical apprenticeships has increased. This will help us ensure we can fill clinical roles and fulfil our value of developing existing colleagues into key roles across the organisation.

Most of our apprenticeship providers have complimented us on the high quality of learners on the programme and the sustainable support network we provide for colleagues involved in apprenticeships. We launched the apprenticeship community fully in October 2024 and have added all programmes with more than one learner to the community. Knowledge experts who support learners peer to peer are also members of the community.

National Apprenticeship Week 2025

To celebrate apprenticeships, we took part in National Apprenticeship Week by hosting five live online events for colleagues to attend, and our third annual Apprenticeship Graduation and Star Awards.

The theme focused on Skills for Life. We looked at what we do as an organisation, how we can align with the off the job requirements of an apprenticeship, as well as how to engage colleagues with exciting content. We used Viva Engage to promote and share examples internally on a regular basis. We also promoted our apprenticeships externally through four mini blogs.

Apprenticeships in numbers

- In 2024-25, 45 colleagues started an apprenticeship. 17 colleagues completed their apprenticeship in 2024 and were invited to our 2025 Apprenticeship Graduation and Star Awards.
- All colleagues who completed an apprenticeship in 2024 passed, with 54% achieving a merit or distinction. This was a 4% increase on those who achieved a merit or distinction in 2024.
- Since 2018, 93 of our colleagues have completed an apprenticeship.

Apprenticeships Diversity Pledge

The apprenticeship Diversity Champions network is now part of our Apprenticeship Ambassador Network, so we decided to honour our commitment to make the apprenticeship programme diverse and inclusive. We focus on this through our pledges:

1) Providing a wider and more diverse workforce with access to apprenticeships across Turning Point.

2) Improving our approach to social mobility and how we provide access to apprenticeships and support for those on our apprenticeship programme.

3) Using equity, diversity and inclusion (EDI) analytics and developing case studies.

4) Upskilling colleagues around apprenticeships and debunking myths about apprenticeships.

Our apprenticeship programme reflects our diverse workforce. We tailor the learning experience to individual apprentices to ensure we take account of their unique needs and provide them with a bespoke and empowering experience. We constantly review our apprentices' experience to make sure the support we offer is right for them. In this way, we have created a programme with the apprentice and not the apprenticeship at its heart.

Commitment to colleague health and wellbeing

Our colleagues' health and wellbeing are very important to us. To be able to support others in line with our ambitions, our colleagues need to be aware, engaged and supported in enabling their own health and wellbeing. We want to create an inclusive environment and the conditions and practices which protect and enhance health and wellbeing, so we encourage and enable colleagues to take up the support opportunities available to them, both from Turning Point and externally, if needed.

Responses from our colleague engagement survey show:

- 87% of colleagues know what health and wellbeing support is available to colleagues at Turning Point.
- 69% believe that Turning Point gives priority to colleague health and wellbeing. This is an increase of 2% from our 2023 Pulse Survey.
- 51% rated their emotional health between 7-10 (with a rating of 10 being the highest).
- 72% believe that Turning Point takes reasonable steps to ensure physical and psychological safety for colleagues at work.

- 82% believe people here are treated equally irrespective of age, disability, gender reassignment, marriage and civil partnership, pregnancy and maternity, race, religion or belief, sex and sexual orientation.

- 60% feel their work generally has a positive impact on their wellbeing with 40% feeling that the nature of their work is challenging for their wellbeing.

- 61% rated their physical health between 7-10 (with a rating of 10 being the highest).

We have well established procedures, initiatives, and mechanisms for providing colleagues with mental health and wellbeing support. We monitor engagement in wellbeing initiatives and mechanisms and have controls and processes to support the ongoing embedding of a wellbeing culture.

We continuously seek to obtain feedback from colleagues, consistently promote mental health and wellbeing support, and provide guidance via the 'physical, emotional and financial' approach to supporting colleagues and increasing awareness of health and wellbeing.

We use an annual communications calendar to identify key areas of focus for colleague health and wellbeing. This includes national targeted campaigns and educational awareness activities, in addition to the ongoing promotion of our health and wellbeing offerings and/or interventions. The content is developed and/or delivered by some of our own internal subject matter experts, and we also link to external sources, as applicable. We review the calendar each year to make sure it remains relevant.

Supporting our colleagues' health and wellbeing is an important aspect of our employee value proposition, so we are delighted that knowledge of and engagement with our health and wellbeing support offerings continues to increase through ongoing promotions and new developments in what we offer.

Luke's object and story - Grogu

Hello, my name is Luke and this is "Grogu". It was inspired by my love of sci-fi. I was able to create this while participating in a pottery course funded by Turning Point's Community Innovation Fund and supported by staff from Alfred Minto House, who I stayed with for eight years.

It took me about a month to complete! I really felt motivated to complete this project, which is something that has grown since starting with Turning Point. I hugely enjoy arts and crafts and have done numerous projects. "Grogu" represents how far I have come with Turning Point as this would not have been possible in earlier years.

Life was difficult at the beginning of my eight-year journey with Turning Point. Since then, their support and guidance has helped my mental health improve significantly, my confidence grow, and I can enjoy my independent life for the first time ever.

I hope to complete all my unfinished projects and continue to live my independent life.

7 OUR STRATEGIC INTENT

We actively seek out new opportunities to extend our reach in health and social care service provision in line with our vision and values which remain an important constant in an uncertain world. Our strategic intent is represented in the following strategic goals:

- Support people to improve their health and wellbeing and bring about positive change in their lives.
- Seek to reach more people and provide support at the earliest opportunity.
- Prevent the escalation of need and reduce demand on the wider health and social care system.
- And thereby create enduring value for communities and society as a whole.

Our stakeholders

Section 172 (1) statement

In decision-making and discussions during the year ended 31 March 2025, the Directors of Turning Point have acted in the way that is considered, in good faith, to be most likely to promote the success of the Company for the benefit of the people we support (recognised beneficiaries under company and charity law), with regards to all its stakeholders and to the matters set out in section 172 (1) (a-f) of the Companies Act 2006.

Strategy and vision

The Turning Point Board meets throughout the year for discussions on strategic matters. The charitable objects (last reviewed and updated in 2021) align with the strategic period. The Board regularly monitors and reviews progress in executing the strategic intent through reports presented on operational and financial performance.

Our stakeholders

The stakeholders of the company include the people we support, local communities, our colleagues, the purchasers of our services (public sector commissioners and businesses), our regulators and our suppliers. Through active engagement the views of stakeholders are gathered by the Board both directly and indirectly throughout the annual business cycle. This knowledge is considered when taking principal decisions throughout the year.

Our approach to stakeholder engagement during 2024-25

The people we support (the beneficiaries)

The company is a registered charity in England and Wales and under charity law has beneficiaries to whom public benefit is delivered in accordance with the charitable purpose of the company. At Turning Point, we support over 200,000 people each year. We provide health and social care services in a range of markets, including the health, care, employment, and criminal justice sectors.

Our engagement channels include:

- Regular Board and senior leadership visits to our services.
- Individuals we support attending Operating Board meetings to share their experiences.
- Local forums and our national involvement groups bringing together the people we support to provide feedback and work in partnership to improve services.
- An annual survey gathers feedback from the people we support.
- National involvement networks bring together representatives from across our services to share feedback and learning.

Outcomes of engagement:

- Central activities and initiatives are developed collaboratively with people we support, including our Do Not Attempt Cardiopulmonary Resuscitation resource pack, working alongside Learning Disability England to help people with a learning disability and their family, carers and support workers to understand the law and their rights.
- Our voice in external policies and campaigns is informed by the views of people we support, as are our secretarial duties for the Complex Needs and Dual Diagnosis APPG (All Party Parliamentary Group).
- Co-designing our services through involvement initiatives with people we support. Our first in-person "My Voice" event was held in 2024 to bring together many individuals with lived experience to explore themes of real importance to the people we support.

Communities and local partners

Turning Point operates nationally, and our services are embedded within the wider community. We work closely with local partners to engage communities, signposting important local resources to people wherever possible. As part of our service user involvement programme of work, service users are supported and empowered to have a voice within local community initiatives that matter to them. Engagement with the local community forms an integral part of our approach to person centred support.

Our engagement channels include:

- Supporting local events and community initiatives.
- Social media engagement with local organisations.
- Building relationships with other community charities.
- Working in partnership with other local organisations.
- Promoting our National Community Innovation Fund.

Outcomes of engagement:

Services work positively and collaboratively with partners in local systems and communities to meet the needs of their local population, improve access for underrepresented groups and involve service users in improving services.

Environment

Due to the impacts of climate change, it is vital that the company has due regard of its activities and the impact these have on the environment. The Company is committed to achieving Net Zero by 2050.

Our engagement channels include:

- Green Heart of Turning Point intranet site encouraging an environmentally conscious workforce.
- The introduction of a new Green Heart Viva Engage channel to engage employees in environmental matters and encourage individual action both at work and at home; and
- The Director of Corporate Governance is the Net Zero Lead for the organisation.

Outcomes of engagement:

Environmental objectives are achieved through a clear environmental policy and environmental management system. The Green Plan is approved by the Board and sets out the commitment to minimising the impact on the environment from the business activities of the organisation. The Carbon Reduction Plan is available on the Turning Point website. For further details see Environment and energy reporting on page 63.

Our people

Colleagues at Turning Point strive to achieve a meaningful positive impact in people's lives. Our ability to provide high quality services is made possible by the dedication, diversity and skill found within our teams, and a culture in which we are continuously learning from the experiences of those around us.

Our team of over 5,200 people is made up of employees, peer mentors and volunteers, spread across 270 sites and supporting over 200,000 people a year across England. We rely on our people to deliver health and social care outcomes under contract to commissioning authorities.

For further details see People report on page 39.

Principal Decisions in 2024-25

For each matter that comes before the Board of Directors, the board considers the likely consequences of any decision in the long term, identifies stakeholders who may be affected, and carefully considers their interests and any potential impact as part of the decision-making process.

The board made the following principal decisions during the year:

1. The re-appointment as non-executive directors of Victoria Tzortziou Brown and Nicola Gilham for second and third terms respectively on 14 May 2024.

2. The appointment of Philip Newton as director of Turning Point (Services) Limited (company number: 02166697) on 23 July 2024.

3. The re-appointment of Peter Hay as non-executive director and Chair for a third term on 10 September 2024.

4. The approval of a Cross Company Guarantee between the Company and Turning Point (Services) Limited (company number: 02166697).

5. The approval of a Loan Facility and Grant from Social and Sustainable Housing II HoldCo Limited, part of Social and Sustainable Capital.

8 Combined directors' and trustees' report

Risk management

The company operates in a business with significant risks. The people we support can have mental health conditions and learning disabilities requiring intensive support, or substance dependency requiring clinical prescribing of medicines.

Principal risk or uncertainty	Mitigation and controls
Financial risk: Economic conditions and financially challenged commissioner budgets could affect the ability of Turning Point to grow and strengthen in the markets in which it operates.	Maintaining a clearly articulated financial strategy. Maintaining a contract pipeline for new service and income opportunities. Robust financial management and cost control. Regular assessment and monitoring of the quality of services and performance.
Operational risk: By the very nature of the contracts undertaken the people supported through those service contracts are often adults at risk of self-harm, injury, abuse and even death.	Investment in robust governance frameworks, policies and procedures (including health and safety) that meet or exceed legal and regulatory requirements. Comprehensive risk management, incident reporting and monitoring systems.
Cyber security: Increasing dependency on information technology systems gives rise to cyber risk comprising the risk of financial loss, disruption to business operations or potential damage to the reputation of the organisation from a failure of information technology systems. **Information security:** Increasing reliance on data and information held in systems gives rise to information security risk leading to potential Data Protection Act breaches and harm to data subjects as well as potential damage to the reputation of the organisation.	Maintaining a robust Information Security Management System certified to the ISO27001 standard.
Strategic: Changes in government policy, continuing public sector funding cuts in a challenging economic trading environment.	PESTLE analysis. Commitment to the principles of emergent strategy, being agile and responsive to market risks and opportunities.
People: Our people are our most important asset and the primary means through which we are able to add value to the lives of the people we support. Within a low margin business and increasingly	Benchmarking our pay and benefits across the sector. Continually developing appropriate recognition and development opportunities for colleagues.

competitive market, this presents risks around recruitment, retention and colleagues' development.	Succession planning and talent mapping for critical roles. Recruitment and attraction strategy aligned with outcomes of talent management. Ongoing market reviews to ensure local pay is appropriate for geography and roles.

Emerging Risks

The Operating Board considers long term trends in the health and social care sector that could present both risks and opportunities for the company. Any new emerging risks identified by the management are considered and acted on as appropriate.

Turning Point has always operated with full adherence to financial and tax regulations and so, following HMRC's recent Brief on the use of VAT grouping within the care industry, we are reviewing our VAT arrangements and taking professional advice to ensure we continue to do so. We have estimated the impact of reduced VAT recovery on our finances and we are implementing mitigation actions to ensure our financial position is not materially impacted by the changes announced in the recent VAT Briefing.

Internal Controls Assurance

The board recognises that no system of internal control can provide absolute assurance or eliminate all risk. The system of internal controls is designed to manage risk to an acceptable level and to provide reasonable assurance that key business goals and expected strategic outcomes will be achieved.

The board confirms that the process for identifying, evaluating and managing the significant risks faced by the company is on-going, has been in place for the whole of the financial year and up to the date of approval of the annual financial statements, and is regularly reviewed by the board.

The company adopts a "three lines of assurance" model for risk management. The board has reviewed the effectiveness of the system of internal controls in existence for the year ended March 2025 and through to the date of approval of these accounts. No significant weaknesses were found in the internal controls that resulted in material losses, contingencies or uncertainties that required disclosure in the financial statements or in the auditor's report on the financial statements.

Directors' Report

Chair's introduction

The Turning Point Board of Directors presents their annual report and accounts for the year ending 31 March 2025.

The board adopted the Wates Corporate Governance Principles for large private companies in April 2019 as the governance framework for the company. The table on page 59 summarises how we have applied the Wates Principles.

The board has ensured with management that the views of the people we support, the communities in which they live, employees, and our suppliers drive the work of the board and the decisions that it makes.

The board was provided with an inspirational account of the experiences of some of the people we support at its Away Day in November 2024.

The Directors' Report sets out the composition of board of directors and the Operating Board as well as our corporate governance arrangements, processes and activities throughout the year for the board and the committees.

The board re-appointed Dr. Victoria Tzortziou Brown and Nicola Gilham in May 2024 and Peter Hay in September 2024. The board continues to engage with self-assessment board effectiveness questions throughout the year aligned to the board annual agenda plan. Feedback on each self-assessment questionnaire is discussed at the relevant board meeting with an annual review of board effectiveness based on the aggregated feedback throughout the year.

The board last had an externally facilitated review on 23 October 2023, discussing ways of thinking about complexity and approaches to organisational change.

Our board of directors approved this report on 22 July 2025.

Peter Hay, Chair of the Turning Point Board

OUR BOARD OF DIRECTORS

Executive Board Members

Julie Bass, Chief Executive - Julie has been an executive board director at Turning Point since 2009 and Chief Executive since 1 April 2020. Prior to this Julie worked in financial services in the UK and overseas in a wide variety of roles including holding responsibility for corporate strategy, organisational performance and development and people-related functions. She is passionate about supporting individuals to discover new possibilities in their lives through the provision of high quality, constantly evolving services, and interactions. Julie has a strong focus on the co-creation of conditions in which colleagues from a wide diversity of backgrounds can thrive. Julie is a Senior Independent Director at Surrey and Sussex NHS Trust. She is a Chartered Insurer, a fellow of the Chartered Institute of Personnel and Development and has a PGC in executive coaching.

Greig Sharman, Chief Information Officer - Greig joined Turning Point in July 2024 as Chief Information Officer and Executive Director. Greig has overall accountability for technology, data and information security across Turning Point. He has worked for over 20 years in technology and transformation roles across a number of sectors in both private and public sector organisations, as well as working with several UK and globally-based healthcare providers. In his previous role as the first ever Chief Technology Officer for the NSPCC he supported a complex variety of both local and national services dealing with some of the UK's most vulnerable children. He is a Member of The Chartered Institute for IT (MBCS), has a Ph.D. in Neuroendocrinology from the University of Bristol, and is a contributor to various charity and social enterprise IT communities, as well as being an ally and advocate for Women in Tech & Data.

David Slegg, Chief Financial Officer - David joined Turning Point as Chief Financial Officer in June 2020 and was appointed as an executive board member in September 2023. David has previously worked for 27 years in finance director roles in the NHS in commissioning and provider organisations and brings to Turning Point extensive experience of financial strategy and financial management. His last NHS role was a Director of Finance for the London Region of NHS England working across a wide range of stakeholders in and outside of the NHS. In addition to his financial responsibilities at Turning Point, David also manages the Property and Procurement teams.

Clare Taylor, Chief Operating Officer - Clare has overall responsibility for Turning Point's service delivery across its different areas of work and was appointed as an executive board member in September 2023. She has worked in health and social care for over 26 years including roles within universities, service providers, local authority commissioning and public health. She is Vice-Chair of Collective Voice, the umbrella body for third sector drug and alcohol treatment providers, and is passionate about improving access to services, particularly for those who need help the most. Clare has an MSc in Addiction Studies and through her varied leadership roles has a keen interest in supporting the development of women leaders within the wider system.

Non-Executive Board Members

Peter Hay, CBE, Chair of the Board - Peter was appointed Chair of Turning Point Board in September 2018. After a long career as a director of social care services, and a past president of the Association of Directors of Adult Social Services, Peter is now pursuing a range of interests in different roles across social care, housing and wellbeing. Peter is curious about ways of developing people's control over their own health and wellbeing, passionate about building good lives and fascinated by the leadership styles that support these aims. Peter was awarded a CBE in 2012 for services to health and care.

Nicola Gilham - Nicola joined the Turning Point Board in May 2018. She is Vice-Chair of the Board and Chair of the Audit, Risk and Quality Committee. As a qualified chartered accountant, Nicola enjoyed her first career with Arthur Andersen where, for many years, she led consulting assignments, both in the UK and overseas. Whilst living in Australia, she moved into recruitment and worked in the sector for over twenty years. Nicola now pursues a portfolio non-executive career working for businesses across health and social care. She also has a long-standing interest in her local community. As such, currently, she is non-executive director for Brighter Futures for Children in Reading, which runs Children's Services for the

borough, non-executive member of the Buckinghamshire Healthcare NHS Trust and Trustee of NHS Charities Together. She is also Chair of Cancer Care & Haematology Fund, and separately she spent several years, in a voluntary capacity, as a telephone counsellor for emotional support services.

Dawn Kenson - Dawn joined the Turning Point Board in January 2023. After a career where she was responsible for the combined regulated sales forces of The Woolwich and Barclays Bank, Dawn moved into non-executive work and built a portfolio in, and supporting, the public sector. Dawn has held roles in a wide variety of organisations spanning central government, arms-length bodies, a housing association and the NHS. Dawn was the Senior Independent Director at Frimley Health NHS Foundation Trust for eight years until March 2024. Currently she sits on the NHS Lincolnshire Integrated Care Board, with a special interest in service delivery. She holds a degree in Mathematics and Statistics and is qualified as an Associate of the Chartered Insurance Institute.

Dr. Victoria Tzortziou Brown, OBE - Victoria joined the Turning Point Board in May 2021 and is a member of the Audit, Risk and Quality Committee. She brings over two decades of experience as a GP in East London. She is the Vice Chair for External Affairs at the Royal College of General Practitioners (RCGP), with key responsibilities in health policy, system integration, and collaborative working. Victoria will become Chair of the RCGP in November 2025. As a clinical commissioner and a researcher at the Wolfson Institute of Population Health, Queen Mary University of London, she has engaged extensively with a diverse range of stakeholders across health and social care, academia and local communities to develop innovative solutions aimed at enhancing health and care services while addressing health disparities. She currently serves as the Research and Innovation Lead for the Northeast London Integrated Care Board, which serves a population of approximately two million people. She is a Founding Senior Fellow of the Faculty of Medical Leadership and Management and a founding participant of the Health Foundation Q Initiative.

Dr. Christian Van Stolk – Christian joined the board in December 2020. He is a member of the Audit, Risk and Quality Committee. He has worked extensively on health and wellbeing in the workplace including research on improving the health and wellbeing of staff in the NHS, maintaining and gaining employment for those with common mental health conditions, building an evidence base for health interventions in workplace settings, and looking at the relationship between productivity and health and wellbeing outcomes. Christian sits on several expert panels for the UK government including those on occupational health, mental health, and employee health and wellbeing in the NHS. He holds a Ph.D. from the London School of Economics and Political Science and fellowships at the Royal Society of Medicine and Royal Society of the Arts.

Our Operating Board

Our Operating Board oversees the day-to-day operations of the organisation. The Operating Board is chaired by **Chief Executive, Julie Bass** and includes **Clare Taylor (Chief Operating Officer), Greig Sharman (Chief Information Officer)** and **David Slegg (Chief Financial Officer),** all of whom are executive board members. In addition, the Operating Board includes:

David Foord – Director of Quality & Risk – *David joined Turning Point in December 2021 and came with a wealth of experience as a qualified clinician. He is a registered mental health nurse and has worked at board level for over a decade leading quality, risk, safeguarding and clinical governance teams. David left the company on 31 January 2025.*

Sarah Kennedy – Director of External Affairs and Marketing – Sarah joined Turning Point in 2009, having previously spent 8 years working with the National Lottery operator, Camelot, and Breast Cancer Care. Sarah has also worked in politics in numerous roles and was a local government councillor in an inner-city London Borough. Sarah is a Member of the Chartered Institute of Public Relations.

Philip Newton – Director of Corporate Governance – Philip joined Turning Point in 2007 after many years working for British Telecommunications PLC. He supports the board, executives and senior management teams to shape the organisation from the perspective of corporate governance and strategy development. Philip is a Fellow of the Chartered Institute of Management.

Structure, governance & management

Turning Point is a registered charity incorporated under Companies Act 2006, being a private company limited by guarantee without share capital. The governing document is the Articles of Association adopted on 22 September 2021.

Subsidiary companies

Turning Point has one wholly owned subsidiary, Turning Point (Services) Limited which is the trading subsidiary of the parent charity. The subsidiary board meets twice a year and as of 31 March 2025 has a board composition of four directors from the Turning Point board and two independent directors.

Turning Point board meetings

The Turning Point Board met formally six times between April 2024 and March 2025.

Board attendance in 2024-25	Turning Point
Number of meetings in 2024-25	7
Numbers attended:	
Peter Hay (Chairman)	7
Nicola Gilham	7
Julie Bass	7
Christian Van Stolk	7
Victoria Tzortziou Brown	6
Dawn Kenson	7
David Slegg	7
Clare Taylor	6
Greig Sharman	6 of 6

Board appointment

The directors of Turning Point form a unitary board of non-executive and executive members as defined by the Articles of Association. The directors are also the trustees for the purpose of charity law. Executive members are appointed according to the terms of their employment with the company and article 50 of the Articles of Association relating to Relevant Qualifying Positions. Non-executive members are appointed by the board following a recruitment process overseen by the Nomination Committee and supported by a recruitment agency. Directors are appointed for a three-year term with the option to be reappointed for a second term on a resolution of the Board. Directors can, following sufficient review, be appointed for a third and final three-year term should circumstances require this. Newly appointed directors go through an induction process that includes service visits, meetings with key senior managers and other directors of the board. There is also an introduction to the regulatory and market environment, the strategic intent of the company and the associated risks and opportunities.

Victoria Tzortziou Brown and Nicola Gilham were reappointed for second and third terms respectively on 14 May 2024. Peter Hay was re-appointed for a third term on 10 September 2024.

Statement of Directors' Responsibilities

The directors are responsible for preparing the Annual Report and the Financial Statements in accordance with applicable law and regulation. Company law requires directors to prepare financial statements for each year which give a true and fair view of the state of affairs of the company and of the income and expenditure for the period of account.

In preparing these financial statements, the board is required to:

- Select suitable accounting policies and then apply them consistently;
- Make judgements and estimates that are reasonable and prudent;
- State whether applicable accounting standards have been followed, subject to any material departures disclosed and explained in the financial statements; and
- Prepare the financial statements on the going concern basis, unless it is inappropriate to presume that the charity will continue in business.

The board is responsible for keeping proper accounting records which disclose with reasonable accuracy at any time the financial position of the Charity and enable it to ensure that the financial statements comply with the Companies Act 2006, Charities Act 2011 & 2022 and the Housing and Regeneration Act 2008, Housing SORP 2022 and the Accounting Direction for Private Registered Providers of Social Housing 2022. The directors are also responsible for safeguarding the assets of the company and hence for taking reasonable steps for the prevention and detection of fraud and other irregularities.

Board effectiveness

The board continues to engage with self-assessment board effectiveness questions throughout the year aligned to the board annual agenda plan. Feedback on each self-assessment questionnaire is discussed at the relevant board meeting with an annual review of board effectiveness based on the aggregated feedback throughout the year. The board last had an externally facilitated review in October 2023 discussing ways of thinking about complexity and approaches to organisational change.

Conflicts of interest

Turning Point has a policy in place to manage conflicts of interest. Upon appointment, all directors are required to declare their interests. On an annual basis, all members are required to update the register of interests, which includes the fit and proper persons requirements. At each meeting of the board and Audit Risk and Quality Committee, members and attendees are required to state any transactional interests with regard to specific items on the agenda in line with their duties under the Companies Act 2006.

Payments to Directors

Non-executive directors of Turning Point receive remuneration of £7,500 per year for the Chair and £5,000 per year for the other non-executive directors. There has been no increase in non-executive director remuneration during the year. Executive directors are paid for their functional roles and do not receive additional payment for their responsibilities as company directors and trustees of the organisation. Apart from the reimbursement of expenses entailed in the course of company business, there have been no other payments to directors in 2024-25.

Corporate Governance report

For the year ended 31 March 2025, under the Companies (Miscellaneous Reporting) Regulations 2018, the Company has applied the Wates Corporate Governance Principles for Large Private Companies. Each of the six Wates Principles has been considered individually within the context of the company's specific circumstances and a short supporting statement is set out below to explain how each principle has been applied to achieve better outcomes.

PRINCIPAL	SUMMARY
PURPOSE AND LEADERSHIP An effective Board develops and promotes the purpose of a company, and ensures that its values, strategy and culture align with that purpose.	The Board promotes the purpose of the Company through strategic intent and emergent strategy.
BOARD COMPOSITION Effective Board composition requires an effective chair and a balance of skills, backgrounds, experience and knowledge, with individual Directors having sufficient capacity to make a valuable contribution. The size of a Board should be guided by the scale and complexity of the company.	As of 31 March 2025, the Turning Point Board comprised of an independent non-executive Chair, four independent non-executive directors, and executive directors comprising the Chief Executive, Chief Financial Officer, Chief Operating Officer and Chief Information Officer. The size and composition of the board is considered appropriate to the size, nature and complexity of the company. The board has delegated some functions to the Audit, Risk and Quality Committee which is the only standing board committee. Other board committees such as the Remuneration Committee and Nomination Committee are stood up as required. More information regarding committees is included on page 61. There is process in place for appropriate board effectiveness reviews. More information regarding board effectiveness is included on page 58.
DIRECTOR RESPONSIBILITIES The Board and individual Directors should have a clear understanding of their accountability and responsibilities. The Board's policies and procedures should support effective decision-making and independent challenge.	The board receives regular reports on strategic performance, financial performance, stakeholder engagement, and management of key business risks along with updates on activities and decisions of its committees. In addition, certain responsibilities are delegated to the board committees in accordance with the approved Governance Standing Orders. At each board meeting, all directors are asked to declare any potential conflict of interest. Any declaration is noted and where there are potential conflicts, appropriate safeguards are implemented.
OPPORTUNITY AND RISK A Board should promote the long-term sustainable success of the company by identifying opportunities to create and preserve value, and establishing oversight for the identification and mitigation of risks	The board seeks out opportunity while mitigating risk. The board engages with the ongoing organisational strategy dialogue and organisational performance at Board meetings throughout the year including the annual board away day. The Audit Risk & Quality Committee, consisting of

	independent non-executive directors, receives assurance reports from the internal and external auditors. Material risks are identified and managed and where required the substantive issues are escalated to the Board. The principal risks of the company are set out on page 52.
REMUNERATION A Board should promote executive remuneration structures aligned to the long-term sustainable success of the company, taking into account pay and conditions elsewhere in the company	The Remuneration Committee has clearly defined terms of reference set out in the Governance Standing Orders and is responsible for determining remuneration. The committee considers benchmarking data and where appropriate advice from external consultants. The Remuneration Committee did not sit during the 2024-25 year. More information regarding committees is included on page 61.
STAKEHOLDER RELATIONSHIPS AND ENGAGEMENT Directors should foster effective shareholder relationships aligned to the company's purpose. The Board is responsible for overseeing meaningful engagement with stakeholders, including the workforce, and having regard to their views when taking decisions.	Accountability and transparency with stakeholders are key to the long-term success of the Turning Point group. The Section 172(1) Statement and more information on some of the engagements that take place at the operational or group level with the key stakeholders is included on pages 48 to 50.

OUR PEOPLE

Our roles offer exciting and rewarding career opportunities to all who join us, and our focus remains on supporting our colleagues to get what they need from their careers. Many colleagues apply to Turning Point because of their passion for supporting others and their community. We aim to meet their ambition with a solid and exciting career, rewarded fairly, and with multiple opportunities for the future.

Our colleagues' health and wellbeing is very important to us. To be able to support others in line with our ambitions, our colleagues need to be aware, engaged and supported in enabling their own health and wellbeing. We want to create an inclusive environment and the conditions and practices which protect and enhance health and wellbeing, so we encourage and enable colleagues to take up the support opportunities available to them, both from Turning Point and externally. Responses from our 2024 colleague engagement survey showed that 87% of colleagues who took part in the survey know what health and wellbeing support is available to them, and 69% of colleagues believe that Turning Point gives priority to colleague health and wellbeing. This is an increase of 2% from our 2023 Pulse Survey.

OUR SUPPLIERS

We work with a range of suppliers throughout the year for the delivery of many essential services, including harm reduction products, facilities management, technology, and agency staff cover. We have good working relationships with all our suppliers and value the contribution they make. Central to our procurement process is the assured delivery of value for money, social impact, and environmental commitments.

BOARD COMMITTEES

Audit Risk & Quality Committee (the "ARQ Committee")

The ARQ Committee is a standing board committee and it supports the Board by providing assurance that robust and effective systems are in place to manage risks and ensure standards in financial management, internal and external audit, quality, safeguarding and clinical governance. The ARQ Committee receives reports from both internal and external auditors as well as executives and senior managers. As at 31 March 2025, the members of the Audit Risk and Quality Committee were as follows:

- Nicola Gilham, non-executive director (Chair)
- Victoria Tzortziou Brown, non-executive director
- Christian Van Stolk, non-executive director

The Chief Financial Officer is invited to ARQ Committee meetings as a matter of course. Other executives and senior managers are invited to ARQ Committee meetings as required. The committee met four times between April 2024 and March 2025. All meetings were quorate. The Chief Financial Officer attended all ARQ Committee meetings.

Nomination Committee

When required, the Nomination Committee is convened to make recommendations to the Board on recruitment, membership and succession planning. The Nomination Committee did not meet during the 2024-25 year.

Remuneration Committee

The board applies the principle of a non-standing Remuneration Committee for both executive and non-executive remuneration. The executive directors are subject to the benefits of the company annual pay review in the same manner as all employees.

When required, the Remuneration Committee is convened for both executive and non-executive remuneration via the means of passing a board resolution including the appointment of committee members. The Remuneration Committee did not meet in the 2024-25 year.

REVIEW OF OBJECTIVES

The charitable objects of the company are for the public benefit, to promote or assist in promoting the protection of health of those with learning disability; and/or those at risk of, or with mental health conditions; and/or drug or alcohol use, misuse or dependency, and/or other addictive behaviours.

The charitable objects are met through the provision of services across England for people to improve their health and wellbeing whether that is at home, within the workplace or through specialist services. In doing so the company builds upon sixty years of experience in substance use, mental health, learning disability, autism, acquired brain injury, sexual health, healthy lifestyles and employment services.

The board of directors who are also the trustees under charity law has given careful consideration and due regard to the Charity Commission's general guidance on public benefit in reviewing the activities of the Turning Point group. The directors are satisfied that the objects of the charity and the activities it undertakes remain entirely for the public benefit in accordance with Section 17 of the Charities Act 2011.

ENVIRONMENTAL & ENERGY REPORTING

Our carbon emissions, using a location-based approach to calculating emissions, were 1,903.6 tonnes CO_2e for 2024-25, this is 6% higher than in 2023-24.

These include the emissions associated with electricity, natural gas, stationary combustion of kerosene, and travel in vehicles. The location-based intensity of 9.9 tonnes CO_2e per £m is -9% lower than last year.

Table 1 Greenhouse gas emissions by year (tonnes CO_2e)

Activity Category	2023-24 (tCO_2e)	2024-25 (tCO_2e)	Percentage Change (%)	Actual Change (tCO_2e)
Scope 1: Direct emissions from the operation of owned and controlled facilities and equipment				
Scope 1 Total (tCO_2e)	**991.0**	**1,000.7**	**1%**	**9.7**
Scope 2: Indirect emissions from the production of purchased energy				
Scope 2 Location-Based Total (tCO_2e)	**464.6**	**490.2**	**6%**	**25.6**
Scope 2 Market-Based Total (tCO_2e)	**0.0**	**0.0**	**0%**	**0.0**
Scope 3: Indirect emissions from the value chain				
Category 3. Fuel and energy related activities	40.2	43.3	8%	3.1
Category 6. Business travel	300.1	369.4	23%	69.3
Scope 3 Location-Based Total (tCO_2e)	**340.3**	**412.7**	**21%**	**72.4**
Scope 3 Market-Based Total (tCO_2e)	**340.3**	**412.7**	**21%**	**72.4**
Total Gross Emissions - Location-Based (tCO_2e)	1,795.8	1,903.6	6%	107.8
Total Net Emissions – Market-Based (tCO_2e)	1,331.3	1,413.4	6%	82.1
Revenue (£m)	165.0	191.4	16%	26.4
Intensity Ratio: (tCO_2e per £m) Location-Based	10.9	9.9	-9%	-0.9
Intensity Ratio: (tCO_2e per £m) Market-Based	8.1	7.4	-8%	-0.7

Energy Consumption

Annual quantity of energy consumed by the company, in the UK resulting from the purchase of electricity, combustion of natural gas and kerosene, and consumption of fuel for transport purposes.

Table 2 Energy consumption by year (kWh)

Scope and Emissions Source Category	Energy Source	2023-24 (kWh)	2024-25 (kWh)	Percentage Change (%)	Actual Change (kWh)
Scope 1: Direct emissions from the operation of owned and controlled facilities and equipment					
Stationary combustion	Natural Gas	4,883,013	5,012,842	3%	129,829
Mobile combustion	Company Vehicles - Diesel Average Car	18,683	19,189	3%	506
Mobile combustion	Company Vehicles - Petrol Average Car	2,004	11,684	483%	9,680
Mobile combustion	Fuel Card	179,894	159,410	-11%	-20,484
Stationary combustion	Kerosene	200,725	154,534	-23%	-46,192
Scope 2: Indirect emissions from the production of purchased energy					
Generation of purchased energy	Electricity - Location Based	2,243,449	2,367,428	6%	123,979
Scope 3: Indirect emissions from the value chain					
Upstream emissions - 6. Business travel	Grey Fleet - Diesel Average Car	460,562	500,438	9%	39,876
Upstream emissions - 6. Business travel	Grey Fleet - Petrol Average Car	786,112	1,047,043	33%	260,930
Total (kWh)		8,774,442	9,272,567	6%	498,125
Revenue (£m)		165.00	191.38	16%	26
Intensity Ratio (kWh per £m)		53,178	48,450	-9%	-4,728

Methodology

Our Streamlined Energy & Carbon Reporting (SECR) covers the emissions from our operations from 1 April 2024 to 31 March 2025, aligning with the fiscal year.

The reported carbon emissions have been calculated following the guidance in the UK Government's Environmental Reporting Guidelines, 2019, and the methodology outlined in The GHG Protocol Corporate Accounting and Reporting Standard (revised edition). Carbon emission factors have been obtained from the UK Government's GHG Conversion Factors for Company Reporting 2024.

An 'operational control' methodology has been adopted to outline the scope of carbon emissions reporting for the company.

This report includes the material carbon emissions, in line with the emissions categories, as required to be reported under the SECR regulations. The kerosene emissions for 2023-24 were restated in line with new data becoming available which enabled a more accurate estimation to be made and so too the electricity market-based figure for 2023-24 as all supplies were provided via a 'green' tariff.

In that regard, Table 1 includes a reduced 'net' carbon emission figure, the 'net' figure is based on our purchase of a 'contractual arrangement' for the supply of renewable electricity, the emissions reduction is reported as 'market-based'. This is voluntarily reported.

ACHIEVEMENTS AND PERFORMANCE IN 2024-25

Turning Point was selected to deliver services across Lincolnshire, developing a new and exciting partnership with Double Impact and Framework. We grew our learning disability services in Wakefield, one of the only towns where we have key contracts across all our market areas. We expanded complex support across Kent, opened two new Crisis Houses, welcomed more young people into Turning Point through new sexual health and supported accommodation services, and continued to grow our mental health treatment footprint.

In our substance use services, our harm reduction work saw us role out our Naloxone Click & Deliver service and develop the first naloxone training aimed at young people. We delivered our third successful harm reduction conference, Safer Lives, with over 200 delegates in attendance.

Our mental health services focused on health and wellbeing and developed a number of successful initiatives, such as rock climbing in Nottingham, creating a gym in Douglas House and trying out innovative technologies such as virtual reality headsets to support people to get active and stay active.

Across our learning disability services we continue to embed our care record system, Nourish, and work to reduce the health inequalities the people we support face by relaunching our DNACPR (Do Not Attempt Cardiopulmonary Resuscitation) campaign.

Governance and financial viability

The company has carried out an annual assessment of compliance with the Governance & Viability Standard and the board confirms continued compliance.

Value for money

For Turning Point value for money means delivering the best possible health and social care outcomes for the service price. We deliver value by continually improving the efficiency and effectiveness of our people, processes and systems to drive ever better outcomes. This means we need to ensure there is money available to invest in our people and our technology infrastructure. We understand value for money along the lines of the National Audit Office definition which assesses value across three criteria:

- **Economy:** minimising the cost of resources used or required
- **Efficiency:** the relationship between the outcomes delivered through our services and the resources needed to produce them
- **Effectiveness:** the relationship between the intended and actual outcomes delivered through our services.

This approach is governed through our Governance Framework and provides us with the means of achieving cost effectiveness, which we define as the optimal use of resources to achieve the intended health and social care outcomes.

As a provider of health and social care services Turning Point benchmarks its Care Quality Commission (CQC) regulated services against other providers to ensure that service effectiveness compares favourably and serves as an indicator of value we deliver through the quality of our services.

Turning Point Overall Ratings – 96% Good or Outstanding

96% of all Turning Point CQC regulated services are rated Good or Outstanding.

We are regulated by the CQC for our care home services with and without nursing; community-based services for people who use substances; domiciliary care services; hospital services for people with mental health needs; rehabilitation services; residential substance use treatment and/or rehabilitation services and our supported living services.

The blended national average for all Adult Social Care (ASC) CQC rated services is 86%, Turning Point ASC rated services compare favourably with a blended average of 96.8%. Turning Point is currently performing in the top 3rd of all ASC providers (source CQC 29 April 2025).

Our substance use services are also benchmarked on the basis of successful completion outcomes for each Public Health England Partnership Area compared to other Partnership Areas that share the same client characteristics. This information forms part of the Public Health England official statistics and is therefore subject to reporting restrictions beyond internal use for management, quality assurance and briefing purposes.

Turning Point is first and foremost a national provider of health and social care services and therefore provides little social housing and where it does so this is only in conjunction with, and for the purpose of providing health and social care. Most of the value for money metrics required of a typical Registered Provider by the Regulator of Social Housing do not provide meaningful information for the annual report and are therefore not included. The metrics that are relevant to the organisation are as follows:

	2025	2024
Return on Capital Employed	7%	13%
Operating Margin	1%	1%

FINANCIAL PERFORMANCE

Turning Point has returned another year of income growth and sustained positive contribution. The operating environment for the financial year has been challenging and characterised by difficult economic conditions including continued strain on public sector funding. This is exasperated further from April 2025 because of the added pressure from increased Employer National Insurance Contributions. This increasingly complex financial outlook has been reflected in the commissioning environment, with local authorities and NHS bodies facing squeezed budgets in real terms, often impacting both existing and new service provisions.

The financial results for the year show that Turning Point continues to positively adapt to the changing operating environment, and financial performance remains strong. Income for the year was £191.9m, an increase of 16% compared to the financial year 2023-24. As an organisation, Turning Point continues to sustainably grow and during the last 10 years income has increased by 95%.

The operating surplus after exceptional items was £1.4m (1% of turnover). During the year we experienced several changes with the defined benefit pension scheme (note 30), and the operating costs include a one-off charge of £3.4m relating to past service costs of the pension scheme. Comparatively, excluding this exceptional item, the operating surplus was £4.8m (3% of turnover). Unrestricted reserves increased by £4.0m to £18.0m compared with 31 March 2024.

2024-25 was the 3rd year of the government's 2021 Drug Strategy, and Turning Point received additional funding of £22.9m which we applied to reaching out and engaging with more people using substances than ever before.

Turning Point was awarded new contracts during the financial year 2024-25, including a substance use service in Lincolnshire, alongside sexual wellbeing services in Lewisham, Southwark and Lambeth, and mental health services in Kent, West Sussex, Nottinghamshire and Lancashire. We also expanded our learning disabilities services in Wakefield, Northumberland and Kent and retained our substance use service in Suffolk. This growth is the foundation of Turning Point's ongoing financial sustainability and was achieved in difficult market conditions that have proved challenging for many providers across the sector.

We are continuing to implement our growth strategy with new contracts starting in April 2025, and we are now supporting people through our substance use services in Bristol and Bath & Northeast Somerset.
In addition to growth, we continue to focus on the financial viability of existing contracts and are working closely with commissioners to ensure that Turning Point can sustainably provide high-quality services to the people who rely on us. These conversations are progressing well and putting us in a strong position to meet the challenges ahead.

RESERVES

Unrestricted reserves are that part of a charity's income funds that are freely available to spend to further the charity's objects. The unrestricted reserves of the Turning Point Group have increased by £11.5m over the last 5 years to reach £18.0m in March 2025.

Turning Point has restricted reserves of £0.3m, which represents legacy income that is set aside for enhancing services at the locations where the people were supported. We are grateful to the people we had the privilege to support, and their families, for the opportunity to develop these services for the benefit of the people we will support in the future.

The charity's freehold properties were independently valued as at March 2025 based on market value with vacant possession. The properties owned at March 2023 and March 2024 were previously measured at cost so, in accordance with FRS 102, the value of these properties at both dates has been estimated, and the comparatives have been restated to apply the new accounting policy. The property in London was valued on 1 March 2025 at £3,425k. The market value at March 2023 was estimated as £3,413k, which exceeded the net book value by £1,230k and the gain has been recognised as a Revaluation Reserve in the restated comparatives. The market value at both March 2024 and March 2025 exceeded

the restated net book value by £228k and these gains have been recognised in the Revaluation Reserve in the restated comparatives and current financial year respectively. The property in Carlisle was revalued as at March 2025 at £155k, which exceeded the restated net book values at March 2024 and March 2025 by £3k. These gains have also been recognised in the restated comparatives and current financial year respectively, bringing the Revaluation Reserve at March 2025 to £1,692k.

Turning Point operated a defined benefit pension scheme, which is a multi-employer scheme that closed in March 2012. During the financial year, the defined benefit pension scheme has been impacted by several changes. Previously, it was not possible to accurately split the scheme's assets and liabilities between the employers, so the scheme was accounted for as a defined contribution scheme. The pension reserve at March 2024 was therefore calculated as the discounted value of Turning Point's future contributions which were based on the triennial valuation of the scheme in March 2022. In 2024-25 the scheme's actuary obtained sufficient member information to split the scheme's assets and liabilities between the employers so, in accordance with FRS 102, the scheme is accounted for as a defined benefit scheme in 2024-25 and the prior period has been restated to apply the new accounting policy. This change in accounting treatment has resulted in the following events having a significant impact on the pension reserve in 2024-25, rather than in 2025-26 when the pension reserve would have been updated based on contributions set after the triennial valuation in March 2025:

- Gilts crisis in September 2022 - The scheme was unable to meet collateral calls, so the assets were not sufficiently hedged against the economic volatility.
- Benefits rectification - At the end of 2023, the scheme's actuary received a complaint from a member regarding the increase in value of the benefits that they transferred into the scheme from a Local Government Pension Scheme. An investigation identified that approximately 150 members are in the same position; the additional liabilities are still being calculated. The pension reserve at March 2025 includes the actuary's estimate of these additional liabilities, which is £3.4m and is recognised within Turning Point's operating costs.

As a result of the change in accounting treatment and the above events impacting the scheme's assets and liabilities, the pension reserve has increased from £8.8m in March 2024 (valued on the defined contribution basis) to £21.5m in March 2025 (on the defined benefit basis). The March 2023 and March 2024 pension reserve has been restated. The March 2025 reserve was £21.5m on the defined benefit basis. However, it is important to note that the pension reserve is an accounting disclosure and does not directly impact our operating cashflows.

Turning Point's unrestricted reserves are underpinned by liquid cash balances, which provide working capital funding for day-to-day operating costs, supporting the delivery of the charity's objects in an efficient and cost-effective way.

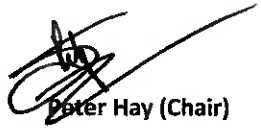
The ambition is to continue to build reserves and the 2025-26 budget, which was approved by the Board in March 2025, shows continued improvement in this area.

The Board assesses the risks to the organisation annually and sets the target level of unrestricted funds. In 2008-09 the directors established a target for unrestricted reserves of 8.3% of income, which is £16.0m based on the income from operations in 2024-25. This target has been achieved in the last 3 years, but it will be an ongoing target as it will be affected by income growth and profitability in future years.

DIRECTORS' REPORT (CONTINUED)
FOR THE YEAR ENDED 31 MARCH 2025

The Board has reviewed the budgets and cashflow forecasts for 2025-26 and 2026-27, which reflect all the known opportunities and challenges, both internally and in the external environment. They consider the cash balance to be adequate for the purpose of meeting the working capital requirements for the foreseeable future and coping with the financial impacts of the risks faced by the organisation. The approach to reserves is approved with input from the Audit, Risk & Quality Committee.

This report was approved by the board on 22 July 2025 and signed on its behalf.



Peter Hay (Chair)
Director

INDEPENDENT AUDITOR'S REPORT TO THE MEMBERS OF TURNING POINT

Opinion

We have audited the financial statements of Turning Point (the 'Charitable company') and its subsidiary together (the 'Group') for the year ended 31 March 2025, which comprise the Group and Charity Statements of comprehensive income and the consolidated and charity Statements of financial position, the Group Statement of cash flows, the Group Statement of changes in reserves and the related notes, including a summary of significant accounting policies. The financial reporting framework that has been applied in their preparation is applicable law and United Kingdom Accounting Standards, including Financial Reporting Standard 102 'The Financial Reporting Standard applicable in the UK and Republic of Ireland' (United Kingdom Generally Accepted Accounting Practice).

In our opinion the financial statements:

- give a true and fair view of the state of the Group's and of the charitable company's affairs as at 31 March 2025 and of the Group's and charitable company's incoming resources and application of resources, including its income and expenditure for the year then ended;
- have been properly prepared in accordance with United Kingdom Generally Accepted Accounting Practice; and
- have been prepared in accordance with the requirements of the Companies Act 2006, Housing and Regeneration Act 2008 and The Accounting Direction for Registered Providers of Social Housing from April 2022.

Basis for opinion

We conducted our audit in accordance with International Standards on Auditing (UK) (ISAs (UK)) and applicable law. Our responsibilities under those standards are further described in the Auditor's responsibilities for the audit of the financial statements section of our report. We are independent of the Group in accordance with the ethical requirements that are relevant to our audit of the financial statements in the United Kingdom, including the Financial Reporting Council's Ethical Standard, and we have fulfilled our other ethical responsibilities in accordance with these requirements. We believe that the audit evidence we have obtained is sufficient and appropriate to provide a basis for our opinion.

Conclusions relating to going concern

In auditing the financial statements, we have concluded that the Board's use of the going concern basis of accounting in the preparation of the financial statements is appropriate.

Based on the work we have performed, we have not identified any material uncertainties relating to events or conditions that, individually or collectively, may cast significant doubt on the Group's or charitable company's ability to continue as a going concern for a period of at least twelve months from when the financial statements are authorised for issue.

Our responsibilities and the responsibilities of the Board with respect to going concern are described in the relevant sections of this report.

Other information

The trustees are responsible for the other information within the Annual Report. The other information comprises the information included in the Annual Report including the Directors' and Strategic reports, other than the financial statements and our Auditor's report thereon. Our opinion on the financial statements does not cover the other information and, except to the extent otherwise explicitly stated in our report, we do not express any form of assurance conclusion thereon.

In connection with our audit of the financial statements, our responsibility is to read the other information and, in doing so, consider whether the other information is materially inconsistent with the financial statements or our knowledge obtained in the audit or otherwise appears to be materially misstated. If we identify such material inconsistencies or apparent material misstatements, we are required to determine whether there is a material misstatement in the financial statements or a material misstatement of the other information. If, based on the work we have performed, we conclude that there is a material misstatement of this other information, we are required to report that fact.

We have nothing to report in this regard.

Opinion on other matters prescribed by the Companies Act 2006

In our opinion, based on the work undertaken in the course of the audit:

- the information given in the Group strategic report and the Directors' report for the financial year for which the financial statements are prepared is consistent with the financial statements; and
- the Group strategic report and the Directors' report have been prepared in accordance with applicable legal requirements.

Matters on which we are required to report by exception

In the light of the knowledge and understanding of the Group and the parent Charity and its environment obtained in the course of the audit, we have not identified material misstatements in the Group strategic report or the Directors' report.

We have nothing to report in respect of the following matters in relation to which the Companies Act 2006 requires us to report to you if, in our opinion:

- adequate accounting records have not been kept; or
- the financial statements are not in agreement with the accounting records and returns; or
- certain disclosures of trustees' remuneration specified by law are not made; or
- we have not received all the information and explanations we require for our audit.

Responsibilities of directors

As explained more fully in the directors' responsibilities statement on page 58, the trustees are responsible for the preparation of the financial statements and for being satisfied that they give a true and fair view, and for such internal control as the trustees determine is necessary to enable the preparation of financial statements that are free from material misstatement, whether due to fraud or error.

In preparing the financial statements, the directors are responsible for assessing the Group's and the Charitable Company's ability to continue as a going concern, disclosing, as applicable, matters related to going concern and using the going concern basis of accounting unless the trustees either intend to liquidate the Group or the Charitable Company to cease operations, or have no realistic alternative but to do so.

Auditor's responsibilities for the audit of the financial statements

Our objectives are to obtain reasonable assurance about whether the financial statements as a whole are free from material misstatement, whether due to fraud or error, and to issue an Auditor's report that includes our opinion. Reasonable assurance is a high level of assurance, but is not a guarantee that an audit conducted in accordance with ISAs (UK) will always detect a material misstatement when it exists. Misstatements can arise from fraud or error and are considered material if, individually or in the aggregate, they could reasonably be expected to influence the economic decisions of users taken on the basis of these financial statements.

A further description of our responsibilities for the audit of the financial statements is located on the Financial Reporting Council's website at: www.frc.org.uk/auditorsresponsibilities. This description forms part of our Auditor's report.

Extent to which the audit was considered capable of detecting irregularities, including fraud

Irregularities, including fraud, are instances of non-compliance with laws and regulations. We identified and assessed the risks of material misstatement of the financial statements from irregularities, whether due to fraud or error, and discussed these between our audit team members. We then designed and performed audit procedures responsive to those risks, including obtaining audit evidence sufficient and appropriate to provide a basis for our opinion.

We obtained an understanding of the legal and regulatory frameworks within which the charitable company and group operates, focusing on those laws and regulations that have a direct effect on the determination of material amounts and disclosures in the financial statements. The laws and regulations we considered in this context were the Companies Act 2006, the Charities Act 2011, the Housing and Regeneration Act 2008 and The Accounting Direction for Registered Providers of Social Housing from April 2022 together with the Housing SORP. We assessed the required compliance with these laws and regulations as part of our audit procedures on the related financial statement items.

In addition, we considered provisions of other laws and regulations that do not have a direct effect on the financial statements but compliance with which might be fundamental to the charitable company's and the group's ability to operate or to avoid a material penalty. We also considered the opportunities and incentives that may exist within the charitable company and the group for fraud. The laws and regulations we considered in this context for the UK operations were CQC Regulations for service providers and managers, Employment legislation, Health and Safety legislation and requirements imposed by the Regulator of Social Housing.

Auditing standards limit the required audit procedures to identify non-compliance with these laws and regulations to enquiry of the Trustees and other management and inspection of regulatory and legal correspondence, if any.

We identified the greatest risk of material impact on the financial statements from irregularities, including fraud, to be within the recognition of contract income and override of controls by management. Our audit procedures to respond to these risks included reviewing the income recognition policy, sample testing the contract income, sample testing of funding agreements and reviewing for restrictions and clawbacks, tracing the income receipts to bank, reviewing the controls in place for income recognition, enquiries with management, review of internal audit reports, review of the fraud reports made to the Audit Committee, reviewing correspondence with the regulators, reading minutes of meetings of those charged with governance, testing on the posting of journals and reviewing accounting estimates for biases.

Owing to the inherent limitations of an audit, there is an unavoidable risk that we may not have detected some material misstatements in the financial statements, even though we have properly planned and performed our audit in accordance with auditing standards. For example, the further removed non-compliance with laws and regulations (irregularities) is from the events and transactions reflected in the financial statements, the less likely the inherently limited procedures required by auditing standards would identify it. In addition, as with any audit, there remained a higher risk of non-detection of irregularities, as these may involve collusion, forgery, intentional omissions, misrepresentations, or the

override of internal controls. We are not responsible for preventing non-compliance and cannot be expected to detect non-compliance with all laws and regulations.

Use of our report

This report is made solely to the Charity's members, as a body, in accordance with Chapter 3 of Part 16 of the Companies Act 2006 and Section 128 of the Housing and Regeneration Act 2008. Our audit work has been undertaken so that we might state to the Charity's members those matters we are required to state to them in an Auditor's report and for no other purpose. To the fullest extent permitted by law, we do not accept or assume responsibility to anyone other than the Charity and the Charity's members, as a body, for our audit work, for this report, or for the opinions we have formed.

Julia Poulter (Senior statutory auditor)

for and on behalf of
Crowe U.K. LLP

Statutory Auditor

55 Ludgate Hill
London
EC4M 7JW

Date: 10 September 2025

GROUP STATEMENT OF COMPREHENSIVE INCOME
FOR THE YEAR ENDED 31 MARCH 2025

	Note	2025	2024 (Restated)
		£000	£000
Turnover	4	**191,940**	165,266
Operating charges	4	**(190,522)**	(163,603)
Operating surplus		**1,418**	1,663
Interest receivable and similar income	12	**556**	381
Interest payable and similar charges	13	**(1,013)**	(976)
Surplus for the financial year		**961**	1,068
Gain on revaluation of fixed assets	15	**231**	231
Actuarial gains/(losses) on defined benefit pension schemes	30	**3,231**	(871)
Other comprehensive income for the year		**3,462**	(640)
Total comprehensive surplus		**4,423**	428

All 2025 activities relate to continuing operations.

CHARITY STATEMENT OF COMPREHENSIVE INCOME
FOR THE YEAR ENDED 31 MARCH 2025

	Note	2025	2024 (Restated)
		£000	£000
Turnover	5	**190,311**	163,780
Operating charges	5	**(190,517)**	(163,596)
Operating surplus		**(206)**	184
Interest receivable and similar income	12	**556**	381
Interest payable and similar charges	13	**(1,013)**	(976)
Surplus/(deficit) for the financial year		**(663)**	(411)
Gain on revaluation of fixed assets	15	**231**	231
Actuarial gains/(losses) on defined benefit pension schemes	30	**3,231**	(871)
Gift aid from subsidiary	32	**1,473**	1,344
Other comprehensive income for the year		**4,935**	704
Total comprehensive surplus		**4,272**	293

All 2025 activities relate to continuing operations.

Gift aid from the subsidiary of £1,473k relates to gift aid arising on profits generated in the previous accounting period (2024: £1,344k).

CONSOLIDATED STATEMENT OF FINANCIAL POSITION
AS AT 31 MARCH 2025

	Note		2025		2024 (Restated)
			£000		£000
Fixed assets					
Housing properties	15		**8,062**		6,319
Other fixed assets	16		**459**		375
			8,521		6,694
Current assets					
Debtors	18	**20,608**		20,940	
Cash and cash equivalents	19	**19,528**		12,765	
		40,136		33,705	
Creditors: amounts falling due within one year	20	**(26,565)**		(22,850)	
Net current assets			**13,571**		10,855
Total assets less current liabilities			**22,092**		17,549
Creditors: amounts falling due after more than one year	22		**44**		51
Defined benefit pension liability	30		**21,503**		21,470
Provisions for liabilities					
Reinstatement provision	24	**2,126**		1,987	
Other provision	24	**-**		45	
			2,126		2,032
Reserves					
Unrestricted reserves			**17,957**		14,005
Pension reserve			**(21,503)**		(21,470)
Restricted reserves	25		**273**		-
Revaluation reserve			**1,692**		1,461
			22,092		17,549

The financial statements were approved and authorised for issue by the board and were signed on its behalf on 22/07/2025.

Peter Hay (Chair)
Director
Turning Point
Company number: 00793558

The notes on pages 82 to 114 form part of these financial statements.

TURNING POINT

(A company limited by guarantee)

CHARITY STATEMENT OF FINANCIAL POSITION
AS AT 31 MARCH 2025

	Note		2025		2024 (Restated)
			£000		£000
Fixed assets					
Housing properties	15		**8,062**		6,319
Other fixed assets	16		**459**		375
Investments	17		**-**		-
			8,521		6,694
Current assets					
Debtors	18	**6,857**		8,150	
Cash and cash equivalents	19	**19,501**		12,737	
		26,358		20,887	
Creditors: amounts falling due within one year	20	**(15,764)**		(12,858)	
Net current assets			**10,594**		8,029
Total assets less current liabilities			**19,115**		14,723
Creditors: amounts falling due after more than one year	22		**44**		51
Defined benefit pension liability	30		**21,503**		21,470
Provisions for liabilities					
Reinstatement provision	24	2,126		1,987	
Other provision	24	-		45	
			2,126		2,032
Reserves					
Unrestricted reserves			**14,980**		11,179
Pension reserve			**(21,503)**		(21,470)
Restricted reserves	25		**273**		-
Revaluation reserve			**1,692**		1,461
			19,115		14,723

The financial statements were approved and authorised for issue by the board and were signed on its behalf on 22/07/2025.

Peter Hay (Chair)
Director
Turning Point
Company number: 00793558

The notes on pages 82 to 114 form part of these financial statements.

CONSOLIDATED STATEMENT OF CHANGES IN RESERVES
FOR THE YEAR ENDED 31 MARCH 2025

	Restricted reserves £000	Pension reserve £000	Revaluation reserve £000	Unrestricted reserves £000	Total reserves £000
At 1 April 2024 (Restated)	-	(21,470)	1,461	14,005	(6,004)
Comprehensive income for the year					
Surplus for the year	273	-	-	688	961
Actuarial gains on pension schemes	-	-	-	3,231	3,231
Movement on pension deficit	-	(33)	-	-	(33)
Gain on revaluation	-	-	231	-	231
Transfer from profit and loss account	-	-	-	33	33
At 31 March 2025	273	(21,503)	1,692	17,957	(1,581)

The notes on pages 82 to 114 form part of these financial statements.

Details of the restatements are provided in note 34.

CONSOLIDATED STATEMENT OF CHANGES IN RESERVES
FOR THE YEAR ENDED 31 MARCH 2024

Restated	Restricted reserves £000	Pension reserve £000	Revaluation reserve £000	Unrestricted reserves £000	Total reserves £000
At 1 April 2023 (Restated)	--	(20,647)	1,230	12,985	(6,432)
Comprehensive income for the year					
Surplus for the year	--	-	-	1,068	1,068
Actuarial gains on pension schemes	--	-	-	(871)	(871)
Movement on pension deficit	--	(823)	-	-	(823)
Gain on revaluation	--	-	231	-	231
Transfer from profit and loss account	--	-	-	823	823
At 31 March 2024 (Restated)	-	(21,470)	1,461	14,005	(6,004)

The notes on pages 82 to 114 form part of these financial statements.

Details of the restatements are provided in note 34.

CONSOLIDATED STATEMENT OF CASH FLOWS
FOR THE YEAR ENDED 31 MARCH 2025

	2025	2024 (Restated)
	£000	£000
Cash flows from operating activities		
Surplus for the financial year	**961**	1,068
Adjustments for:		
Depreciation of tangible assets	**1,052**	829
Loss on revaluation of housing properties	**357**	-
Amortisation of capital grants	**(7)**	(6)
Interest received	**(556)**	(381)
Decrease in debtors	**332**	544
Increase in creditors	**3,714**	915
Increase/(Decrease) in provisions	**95**	(1,101)
Pension interest and service costs	**3,264**	1,305
Net cash generated from operating activities	**9,212**	3,173

CONSOLIDATED STATEMENT OF CASH FLOWS (CONTINUED)
FOR THE YEAR ENDED 31 MARCH 2025

	2024 £000	2023 £000
Cash flows from investing activities		
Improvement to housing properties	**(2,656)**	(1,269)
Purchase of tangible fixed assets	**(349)**	(337)
Interest received	**556**	381
Net cash from investing activities	**(2,449)**	(1,225)
Net increase in cash and cash equivalents	**6,763**	1,948
Cash and cash equivalents at the beginning of the year	**12,765**	10,817
Cash and cash equivalents at the end of the year	**19,528**	12,765
Cash and cash equivalents at the end of year comprise:		
Cash at bank and in hand	**19,528**	12,765
	19,528	12,765

The notes on pages 82 to 114 form part of these financial statements.

ANALYSIS OF NET DEBT
FOR THE YEAR ENDED 31 MARCH 2025

	At 1 April 2024 £000	Cash flows £000	**At 31 March 2025 £000**
Cash at bank and in hand	12,765	6,763	**19,528**
	12,765	6,763	**19,528**

The notes on pages 82 to 114 form part of these financial statements.

NOTES TO THE FINANCIAL STATEMENTS FOR THE YEAR ENDED 31 MARCH 2025

Accounting policies

1. General information

Turning Point is a company limited by guarantee and is incorporated in England. The registered office is America House, 2 America Square, London EC2N 2LU. The registered number is 793558.

2. Accounting policies

The principal accounting policies adopted, judgements and key sources of estimation in the preparation of the financial statements are as follows:

2.1 Basis of preparation

Turning Point is registered under the Companies Act 2006 and Charities Act 2011 and is a registered provider of social housing.

The financial statements have been prepared in accordance with applicable Accounting Standards, including Financial Reporting Standard 102 (FRS 102), the Accounting Direction for Registered Providers of Social Housing 2022, and the Housing SORP 2018.

Turning Point meets the definition of a public benefit entity under FRS 102. Assets and liabilities are initially recognised at fair value or transaction value unless otherwise stated in the relevant accounting policy.

2.2 Going concern

On 31 March 2025, Turning Point had working capital of £13.6m (2024: £10.9m) and a cash balance of £19.5m (2024: £12.8m). During the year, working capital generated from operating surpluses has been invested in our properties to ensure we continue to deliver high-quality services in future years. Forecast cash available shows significant headroom against future working capital requirements and we are in a good position to meet the challenges ahead.

At the year-end, the unrestricted reserves balance was £18.0m (2024: £14.0m after restatement adjustments) and the total reserves balance, which includes the pension reserve, was (£1.6m) (2024: (£6.0m) after restatement adjustments). Our unrestricted reserves are building, and financial sustainability is strengthening as Turning Point progresses through its strategic period in good financial health.

The pension reserve at the year-end was £21.5m (see note 30 for further details). In order to remove the deficit by 31 January 2031, Turning Point agreed to pay contributions of £1,449k for the year ending 31 March 2026. Contribution levels for the next 3 years will be agreed following the triennial actuarial valuation dated 31 March 2025, which will be concluded by June 2026.

Turning Point had a successful year of growth in 2024-25, winning new contracts for a substance use service in Lincolnshire, sexual wellbeing services in Lewisham, Southwark and Lambeth, and mental health services in Kent, West Sussex, Nottinghamshire and Lancashire. We also expanded our learning disabilities services in Wakefield, Northumberland and Kent and retained our substance use service in Suffolk.

Growth is the foundation of Turning Point's ongoing financial sustainability, and we opened new substance use services in Bristol and Bath & Northeast Somerset in April 2025. The efforts of our Business Development team continue year-round to ensure we realise our growth strategy.

Accounting policies (continued)

A corner stone of the strategic period 2022 to 2027 is the continued improvement to financial sustainability. In addition to growth, we are focussing on the financial viability of existing contracts and working closely with commissioners to ensure that Turning Point can continue to provide high-quality services to the people who rely on us. These conversations are progressing well and putting us in a strong position to meet the challenges ahead.

We are continuing to develop our products and find innovative ways of supporting people, through engagement with the people we support and commissioners, and this will drive future growth and secure retention of our current contracts.

These activities underpin the budgets and cash forecasts for 2025-26 and 2026-27, which have been reviewed and challenged by the Board. In addition, the Board has considered the organisation's ability to respond to the longer-term challenges facing health and social care providers and changes in the economic environment and are implementing a corporate strategy that will ensure the continuing financial viability of the business.

After due consideration, the Board has a reasonable expectation that the Group has adequate resources to continue its activities for the foreseeable future. Accordingly, the directors continue to adopt the going concern basis in preparing the financial statements as outlined in the Statement of Directors' Responsibilities.

2.3 Basis of consolidation

The financial statements consolidate the accounts of the Charity and its trading subsidiary, Turning Point (Services) Limited under the purchase method.

Investments in subsidiaries are accounted for at cost less impairment in the individual financial statements.

2.4 Turnover

Turnover represents contract and grant income from statutory sources (including rents net of voids), payments from residents and donations. Grant income is recognised when the related provisions for the grant have been met. Donations are recognised when the charity is legally entitled to the income and the amount can be quantified with reasonable certainty. All other income is accounted for on an accruals basis at the point the service is delivered and donation income is accounted for on a cash basis.

2.5 Value added tax (VAT)

Turning Point and Turning Point (Services) Limited are members of a VAT group and operate the standard method for partial exemption. Irrecoverable VAT is recognised as an expense when the tax point of the relevant expenditure is reached.

2.6 Taxation

A current corporation tax charge is recognised for the amount of corporation tax payable in respect of the taxable income for the current or past reporting periods using the tax rates and laws that have been enacted or substantively enacted by the reporting date.

Turning Point is a registered charity that is exempt from taxation on income and gains to the extent that they fall within the exemptions for charities in Part 11 Corporation Tax Act 2010 or s.256 of the Taxation of

Accounting policies (continued)

Chargeable Gains Act 1992.

The non-charitable subsidiary typically claims relief against its taxable profits by making gift aid payments to Turning Point.

2.7 Capital grants

Capital grants (including social housing grants) are deferred in creditors and written off in the Statement of Comprehensive Income over the expected period of the useful life of the assets acquired.

2.8 Accrued income

Accrued income is classified as "Debtors" and includes contract and grant income (especially outcome related income) that will probably be received in a reporting period after that to which it relates.

2.9 Deferred income

Contract income and revenue grants are recognised as income in the period in which the performance criteria are met.

Deferred income is classified as "Creditors: amounts falling due within one year" and includes contract and grant income received in advance. These contracts and grants represent funds that have been received for specific purposes and are potentially refundable if the conditions of the contract or grant are not satisfied.

Contract and grant income received in the year but which remains unspent at the year-end is, with the agreement of the funder, carried forward in creditors at the year-end to be spent in the following year.

2.10 Fixed assets and depreciation

Freehold properties were previously measured at cost (including all directly attributable expenditure). In 2024-25 the revaluation model has been adopted, and freehold properties have been revalued by external qualified valuers on an open market value basis with vacant possession. Revaluations will be undertaken every 3 years, or more frequently if the directors consider the carrying value to have changed materially in the period.

All other asset classes are measured at cost (including all directly attributable expenditure).

Depreciation is provided by the Charity to write off the cost net of grant less the estimated residual value of tangible fixed assets in equal instalments over their estimated useful economic lives as follows:

- Freehold properties and improvements to freehold properties are depreciated over 50 years.
- Leasehold properties and improvements to leasehold properties are depreciated over the shorter of the term of the lease and the expected useful life of the asset.
- Fixtures and fittings, office equipment, software and motor vehicles are depreciated over 3 years.

Accounting policies (continued)

In accordance with the Housing SORP 2018, the overall cost of any property, fixtures and fittings, and office equipment is split between significant components to enable each component to be depreciated according to its economic useful life. The categories of components and the relevant depreciation rates are those listed above. A 'significant component' will have a:

- Cost greater than £10,000, AND
- Cost greater than 10% of the whole asset, AND
- Have a useful economic life of less than half that of the whole asset.

Where a component is replaced or restored, the carrying amount of the old component will be disposed of and the new component will be capitalised.

The Charity applies a policy to write off, in the year of acquisition, items costing less than £3,000.

2.11 Improvement to properties

Expenditure on existing housing properties is capitalised to the extent that it improves the economic benefit of the asset either through an increase in rental income, a reduction in maintenance costs or through an extension of the life of the property.

2.12 Operating leases

Rents payable, equipment and motor vehicles under operating leases are charged on a straight-line basis over the term of the lease.

Rental lease commitments are measured at the full cost of the lease payments to the date on which the Charity expects to leave each property.

2.13 Provision for liabilities

Provisions are recognised when the Group has a present obligation (legal or constructive) because of a past event, it is probable that the Group will be required to settle the obligation, and a reliable estimate can be made of the amount of the obligation. The amount recognised as a provision is the best estimate of the consideration required to settle the present obligation at the end of the reporting period, considering the risks and uncertainties surrounding the obligation.

2.14 Financial instruments

The Charity's financial instruments consist of debtors, cash and creditors and as such are all basic in nature as defined in FRS 102. They are measured at the cash consideration expected to be paid or received.

2.15 Pension costs

The Charity operated a defined benefit pension scheme, which is contracted out of the State Scheme and provides benefits based on final pensionable pay. The scheme is a multi-employer pension scheme, and it was not previously possible to identify the assets and liabilities of the scheme which are attributable to the Charity, so the scheme was accounted for as a defined contribution scheme.

Accounting policies (continued)

During 2024-25, the scheme's actuary obtained sufficient member information to accurately split the assets and liabilities between the employers. This member information can be applied to calculate the assets and liabilities attributable to the Charity on 31 March 2025, 2024, and 2023 so, in accordance with FRS 102, the scheme has been accounted for as a defined benefit scheme in 2024-25 and the opening balance and comparatives restated to apply the new accounting policy. The financial impact of the change in accounting policy is set out in note 34.

The defined benefit pension scheme's current service costs are charged to the Statement of Comprehensive Income within staff costs. The expected return on the scheme's assets less the scheme's interest costs are credited within other interest. The scheme's actuarial gains and losses are recognised immediately as other recognised gains and losses. The defined benefit scheme's assets are measured at fair value at the year-end date. The scheme's liabilities are measured on an actuarial basis at the year-end date using the projected unit method and discounted at a rate equivalent to the current rate of return on a high-quality corporate bond of equivalent term to the scheme's liabilities. The resulting defined benefit asset or liability is presented separately after other net assets on the face of the Statement of Financial Position.

The assets of the scheme are held separately from those of the Charity.

The defined benefit scheme closed on 31 March 2012 and on 1 April 2012, Turning Point started a defined contribution scheme. Contributions to the defined contribution scheme are charged to the Statement of Comprehensive Income in the period to which they relate.

The Charity also has employees who are members of Local Government Pension Schemes which are defined benefit schemes. The local authorities have indemnified the Charity against any liability which may become payable because of the termination or expiry of a contract, so the amounts charged to the Statement of Comprehensive Income represent the contributions payable to the schemes in the accounting period without any actuarial adjustment.

The Charity pays contributions to the NHS Pension Scheme in relation to employees who are members. This is a defined benefit public service scheme, and the costs are charged to the Statement of Comprehensive Income in the period to which they relate.

2.16 Designated reserves

The Charity had no designated reserves at 31 March 2025.

2.17 Investments

The only investment held by the Group is in its subsidiary, which is valued at cost less provision for impairment.

3. Judgements in applying accounting policies and key sources of estimation uncertainty

The principal risks and uncertainties of the business are set out in the Strategic Report, together with the actions taken to mitigate these risks.

The directors have considered the residual risks and have received adequate assurance that they do not cast significant doubt on the business's ability to continue as a going concern.

In the application of the entity's accounting policies, which are described in note 2, the directors are required to make judgments, estimates and assumptions about the carrying value of assets and liabilities that are not readily apparent from other sources. The estimates and underlying assumptions are based on historical experience and other factors that are relevant. Actual results may differ from these estimates.

The estimates and underlying assumptions are reviewed on an on-going basis. Revisions to accounting estimates are recognised in the period in which the estimate is revised, if the revision affects only that period, or in the period of the revision and future periods, if the revision affects the current and future periods.

The key sources of estimation uncertainty that have a significant effect on the amounts recognised in the financial statements are summarised below:

- Reinstatement provision – Turning Point has provided for its potential reinstatement liability to cover expected building costs when leased properties are returned to the landlord. The potential liability has been calculated for properties where a reinstatement requirement exists in the contract and based on a valuation of works or estimated cost per square metre.

- Defined benefit pension liability – Turning Point has adopted assumptions that are applied by the actuary to calculate the provision for the defined benefit pension scheme. These assumptions include the discount rate, inflation rate and life expectancy.

- Revaluation of freehold properties - The properties have been valued by external qualified valuers on an open market value basis with vacant possession. Turning Point has accepted the assumptions applied by the valuers.

NOTES TO THE FINANCIAL STATEMENTS FOR THE YEAR ENDED 31 MARCH 2025

4. Turnover and operating surplus - 2025 Group

	Turnover	Operating costs	Operating surplus
	£000	£000	£000
Income and expenditure from lettings			
Supported housing accommodation:			
Residential services	**71,465**	**(62,453)**	**9,012**
Non-residential services	**120,207**	**(109,506)**	**10,701**
	191,672	**(171,959)**	**19,713**
Other income and expenditure	**268**	**(18,563)**	**(18,295)**
	191,940	**(190,522)**	**1,418**

Turnover and operating surplus - 2024 Group (Restated)

	Turnover	Operating costs	Operating surplus
	£000	£000	£000
Income and expenditure from lettings			
Supported housing accommodation:			
Residential services	66,348	(59,800)	6,548
Non-residential services	98,783	(89,764)	9,019
	165,131	(149,564)	15,567
Other income and expenditure	135	(14,039)	(13,904)
	165,266	(163,603)	1,663

NOTES TO THE FINANCIAL STATEMENTS FOR THE YEAR ENDED 31 MARCH 2025

5. Turnover and operating surplus - 2025 Charity

	Turnover	Operating costs	Operating surplus
	£000	£000	£000
Income and expenditure from lettings			
Supported housing accommodation:			
Residential services	**70,865**	**(62,449)**	**8,416**
Non-residential services	**119,198**	**(109,505)**	**9,693**
	190,063	**(171,954)**	**18,109**
Other income and expenditure	**248**	**(18,563)**	**(18,315)**
	190,311	**(190,517)**	**(206)**

Turnover and operating surplus - 2024 Charity (Restated)

	Turnover	Operating costs	Operating surplus
	£000	£000	£000
Income and expenditure from lettings			
Supported housing accommodation:			
Residential services	65,749	(59,800)	5,949
Non-residential services	97,891	(89,756)	8,135
	163,640	(149,556)	14,084
Other income and expenditure	140	(14,040)	(13,900)
	163,780	(163,596)	184

The further analysis of income and expenditure from lettings in notes 6 and 7 reflects the disclosure required by the Accounting Direction for Registered Providers of Social Housing from January 2022.

NOTES TO THE FINANCIAL STATEMENTS FOR THE YEAR ENDED 31 MARCH 2025

6. Income and expenditure from lettings – Group

	Residential services 2025 £000	Non-residential services 2025 £000	Total 2025 £000	Residential services 2024 (Restated) £000	Non-residential services 2024 (Restated) £000	Total 2024 (Restated) £000
Income from lettings						
Rent receivable	**967**	**226**	**1,193**	752	136	888
Service charge receivable	**1,725**	**169**	**1,894**	1,264	180	1,444
Net rents receivable	**2,692**	**395**	**3,087**	2,016	316	2,332
Revenue grants from local authorities and other agencies	**68,773**	**119,812**	**188,585**	64,332	98,467	162,799
Total income from lettings	**71,465**	**120,207**	**191,672**	66,348	98,783	165,131
Expenditure on letting activities						
Services	**47,777**	**84,099**	**131,876**	45,862	68,842	114,704
Management	**11,671**	**20,547**	**32,218**	11,492	17,251	28,743
Routine maintenance	**563**	**1,023**	**1,586**	464	833	1,297
Planned maintenance	**207**	**49**	**256**	124	196	320
Rent losses from bad debts	**83**	**6**	**89**	34	3	37
Property lease charges	**1,783**	**3,067**	**4,850**	1,484	2,382	3,866
Depreciation of housing properties	**369**	**715**	**1,084**	340	257	597
Total expenditure on lettings	**(62,453)**	**(109,506)**	**(171,959)**	(59,800)	(89,764)	(149,564)
Operating surplus on letting activities	**9,012**	**10,701**	**19,713**	6,548	9,019	15,567
Void losses			**2,724**			3,275

NOTES TO THE FINANCIAL STATEMENTS FOR THE YEAR ENDED 31 MARCH 2025

7. Income and expenditure from lettings – Charity

	Residential services 2025 £000	Non-residential services 2025 £000	Total 2025 £000	Residential services 2024 (Restated) £000	Non-residential services 2024 (Restated) £000	Total 2024 (Restated) £000
Income from lettings						
Rent receivable	**967**	**226**	**1,193**	752	136	888
Service charge receivable	**1,602**	**170**	**1,772**	1,356	180	1,536
Net rents receivable	**2,569**	**396**	**2,965**	2,108	316	2,424
Revenue grants from local authorities and other agencies	**68,296**	**118,802**	**187,098**	63,641	97,575	161,216
Total income from lettings	**70,865**	**119,198**	**190,063**	65,749	97,891	163,640
Expenditure on letting activities						
Services	**47,777**	**84,099**	**131,876**	45,862	68,836	114,698
Management	**11,671**	**20,546**	**32,217**	11,492	17,249	28,741
Routine maintenance	**563**	**1,023**	**1,586**	464	833	1,297
Planned maintenance	**207**	**49**	**256**	124	196	320
Rent losses from bad debts	**79**	**6**	**85**	34	3	37
Property lease charges	**1,783**	**3,067**	**4,850**	1,484	2,382	3,866
Depreciation of housing properties	**369**	**715**	**1,084**	340	257	597
Total expenditure on lettings	**(62,449)**	**(109,505)**	**(171,954)**	(59,800)	(89,756)	(149,556)
Operating surplus on letting activities	**8,416**	**9,693**	**18,109**	5,949	8,135	14,084
Void losses			**2,724**			3,275

NOTES TO THE FINANCIAL STATEMENTS FOR THE YEAR ENDED 31 MARCH 2025

8. Operating surplus

The operating surplus is stated after charging:

	Group 2025 £000	Group 2024 (Restated) £000	**Charity 2025 £000**	Charity 2024 (Restated) £000
Housing depreciation	**787**	619	**787**	619
Depreciation of other tangible owned fixed assets	**265**	210	**265**	210
Amortisation of capital grant on housing properties	**(7)**	(6)	**(7)**	(6)
Audit fees payable	**73**	73	**37**	37
Hire of plant and machinery - rentals payable under operating leases	**1,024**	1,139	**1,024**	1,139

9. Auditor's remuneration

	2025 £000	2024 £000
Fees payable to the Group's auditor	**92**	92
Fees payable to the Group's auditor and its associates in respect of:		
Audit of charity	**37**	37
Audit of subsidiary	**36**	36
Tax compliance and advisory services	**4**	4
Accounts preparation fee	**15**	15
	92	92

10. Employees – Group and Charity

Staff costs were as follows:

	2025	2024 (Restated)
	£000	£000
Salaries	**126,253**	112,544
National insurance	**11,472**	9,671
Pension contributions	**4,412**	4,313
	142,137	126,528

The average monthly number of employees, including the chief executive, during the year was as follows:

	2025	2024
	No.	No.
Management and administration	**873**	801
Operational	**4,491**	3,041
	5,364	3,842

The key management personnel of the charity and the group comprises the executive directors, operating board members, and non-executive board members. The headcount of key management personnel during the year was eight executive directors and operating board members, and seven non-executive directors (2024: seven ED and seven NED).

The total employee benefits of the key management personnel of the charity and group were £1,241k paid to executive directors and operating board members and £32k paid to non-executive board members (2024: £1,167k, £32k).

During the year, 26 employees were paid a total of £189k as compensation for the termination of their employment before the normal retirement date. No employees were offered voluntary redundancy in the year. The payments are fully recognised in the Statement of Comprehensive Income for 2024-25, being the period in which the plans were finalised.

The average number of full-time equivalent persons (including the chief executive) employed during the year:

	2025	2024
	No.	No.
Management and administration	**691**	643
Operational	**2,830**	2,567
	3,521	3,210

10. Employees – Group and Charity (continued)

The full-time equivalent number of staff whose remuneration payable in relation to the period of account fell within the following bands:

	2025 No.	2024 No.
Group and Charity		
£60,001-£70,000	**41**	32
£70,001-£80,000	**18**	12
£80,001-£90,000	**12**	8
£90,001-£100,000	**9**	8
£100,001-£110,000	**3**	5
£110,001-£120,000	**2**	1
£120,001-£130,000	**2**	2
£130,001-£140,000	**2**	-
£140,001-£150,000	**1**	6
£150,001-£160,000	**6**	3
£160,001-£170,000	**-**	1
£170,001-£180,000	**1**	-
£180,001-£190,000	**-**	-
£190,001-£200,000	**-**	-
£200,001-£210,000	**-**	1
£210,001-£220,000	**1**	-
£220,001-£230,000	**-**	-
£230,001-£240,000	**-**	1
£240,001-£250,000	**1**	-
	99	80

11. Directors' and trustees' emoluments

Group and Charity	2025 £000	2024 £000
Directors' emoluments (including pension contributions and benefits in kind)	**747**	758
Directors' pension contributions (included above)	**25**	26

The headcount of directors during the year was five (2024: four).

Four directors were paid pension contributions during the year (2024: three).

	2025 £000	2024 £000
Non-executive trustees' emoluments (including expenses)	**32**	32

£Nil (2024: £Nil) of travel expenditure was reimbursed to nil (2024: nil) trustees.

The emoluments of directors disclosed above (excluding pension contributions and benefits in kind) include amounts paid to:	2025 £000	2024 £000
The highest paid director	**253**	242
Pension contributions of the highest paid director	**15**	15

The company paid emoluments of £4k to two directors of Turning Point (Services) Limited during the year (2024: £4k to two directors).

Details of the nature of the chief executive's pension arrangements:

The CEO is an 'ex defined benefit' member of the Group Personal Pension Plan with Legal & General, as she was an active member of the Turning Point Pension Scheme at 31 March 2012.

No enhanced or special terms apply.

During the year, the Group contributed 6% to the GPPP on behalf of the CEO, and did not contribute to any individual pension arrangements.

12. Interest receivable

	Group 2025 £000	Group 2024 £000	Charity 2025 £000	Charity 2024 £000
Interest receivable	**556**	381	**556**	381
	556	381	**556**	381

13. Interest payable

	Group 2025 £000	Group 2024 (Restated) £000	Charity 2025 £000	Charity 2024 (Restated) £000
Net interest on net defined benefit pension liability	**1,013**	976	**1,013**	976
	1,013	976	**1,013**	976

14. Taxation

Turning Point is a registered charity. Under Part 11 Corporation Tax Act 2010 and s.256 of the Taxation of Chargeable Gains Act 1992, it is entitled to exemption from Corporation Tax on donations, certain investment income and gains, property income, and on profits from any trading activities exercised in the course of carrying out a primary purpose of the charity, so long as they are applied to Turning Point's charitable purposes.

Turning Point (Services) Limited intends to donate a sum equivalent to any taxable profits to Turning Point, to reduce the company's tax liability to nil.

There were no factors that may affect future tax charges.

15. **Housing properties**
Group and charity
(Restated)

	Freehold properties £000	Leasehold properties £000	Work in progress £000	Total £000
Cost or valuation				
At 1 April 2024 (Restated)	**3,568**	**5,331**	**943**	**9,842**
Additions	**1,396**	**597**	**663**	**2,656**
Disposals	**-**	**(465)**	**-**	**(465)**
Transfers	**-**	**936**	**(936)**	**-**
Revaluations	**(379)**	**-**	**-**	**(379)**
At 31 March 2025	**4,585**	**6,399**	**670**	**11,654**
Depreciation				
At 1 April 2024 (Restated)	**-**	**3,523**	**-**	**3,523**
Charge for the year	**253**	**534**	**-**	**787**
Released on disposals	**-**	**(465)**	**-**	**(465)**
Released on revaluation	**(253)**	**-**	**-**	**(253)**
At 31 March 2025	**-**	**3,592**	**-**	**3,593**
Net book value				
At 31 March 2025	**4,585**	**2,807**	**670**	**8,062**
At 31 March 2024	3,568	1,808	943	6,319

The charity's freehold properties were independently valued as at March 2025 based on market value with vacant possession. The properties owned at March 2023 and March 2024 were previously measured at cost, in accordance with FRS 102, the changes to policy have been applied retrospectively and prior year adjustments have been made to comparative periods ended 31 March 2024 and 31 March 2023. The properties purchased in 2024-25 have also been valued as at March 2025 and the losses have been recognised as operating costs in the current financial year.

NOTES TO THE FINANCIAL STATEMENTS FOR THE YEAR ENDED 31 MARCH 2025

15. Housing properties (continued)

Details of the valuations:

- 6 Penywern Road in London was valued on 1 March 2025 at £3,425k. The market value at March 2023 was estimated as £3,413k, which exceeded the net book value by £1,230k and the gains have been recognised as a Revaluation Reserve in the restated comparatives. The market value at March 2024 and March 2025 exceeded the restated net book value by £228k and the gain has been recognised in the Revaluation Reserve in the each financial year.
- 351 London Road in Carlisle was valued on 1 July 2025 at £155k. The market value at March 2023 was estimated as £155k, which was less than the net book value by £42k and the loss has been recognised as an operating cost in the restated comparatives. The market value at both March 2024 and March 2025 exceeded the restated net book value by £3k and these gains have been recognised in the Revaluation Reserve in the restated comparatives and current financial year respectively."
- 32 Oxford Road in Oxford was purchased in April 2024 and valued on 12 February 2025 at £690k, which was less than the net book value at March 2025 by £27k. The loss has been recognised as an operating cost in the current financial year.
- Pembroke House in Grantham was purchased in May 2024 and valued on 20 June 2025 at £315k, which was less than the net book value at March 2025 by £330k. The loss has been recognised as an operating cost in the current financial year.

In accordance with the Housing SORP 2018, the overall cost of any property has been split between significant components to enable each component to be depreciated according to its economic useful life.

	2025	2024 (Restated)
	£000	£000
Housing properties cost or valuation comprise:		
Freeholds (Valuation)	**4,585**	3,568
Short leaseholds (less than 50 years at cost)	**6,221**	5,426
Long leaseholds (more than 50 years at cost)	**848**	848
	11,654	9,842

Expenditure on works to existing properties	**2025**	2024
	£000	£000
Capitalised in the year	**2,656**	1,269
Charged to income and expenditure	**612**	452
	3,268	1,721

16. Tangible fixed assets

Group and charity

	Motor vehicles £000	Fixtures and fittings £000	Office equipment £000	Software £000	Work in progress £000	Total £000
Cost or valuation						
At 1 April 2024	155	961	822	1,058	64	3,060
Additions	45	61	243	-	-	349
Disposals	-	(435)	(221)	(20)	-	(676)
Transfers	-	22	12	-	(34)	-
At 31 March 2025	200	609	856	1,038	30	2,733
Depreciation						
At 1 April 2024	64	836	808	977	-	2,685
Charge for the year on owned assets	50	100	75	40	-	265
Disposals	-	(435)	(221)	(20)	-	(676)
At 31 March 2025	114	501	662	997	-	2,274
Net book value						
At 31 March 2025	86	108	194	41	30	459
At 31 March 2024	91	125	14	81	64	375

17. Fixed asset investments

Turning Point the Charity owns 100% of the 100 £1 ordinary shares in Turning Point (Services) Limited amounting to £100 (2024: £100). Turning Point (Services) Limited is a company incorporated in Great Britain that provides support services to the Charity. It has total assets less current liabilities at 31 March 2025 of £2,977k (2024: £2,828k). Its trading profit for the year after Gift Aid was £149k (2024: £135k).

18. Debtors

	Group 2025 £000	Group 2024 £000	**Charity 2025 £000**	Charity 2024 £000
Rental debtors	**171**	205	**171**	205
Less: provision for bad debts	**-**	-	**-**	-
Net rental debtors	**171**	205	**171**	205
Due from statutory sources	**15,909**	15,761	**3,480**	3,034
Less: provision for bad debts	**(155)**	(122)	**(152)**	(113)
Net statutory debtors	**15,754**	15,639	**3,328**	2,921
Prepayments and accrued income	**4,538**	4,954	**3,213**	3,134
Other debtors	**145**	142	**145**	142
Amounts owed by group companies	**-**	-	**-**	1,748
	20,608	20,940	**6,857**	8,150

19. Cash and cash equivalents

	Group 2025 £000	Group 2024 £000	**Charity 2025 £000**	Charity 2024 £000
Cash at bank and in hand	**19,528**	12,765	**19,501**	12,737
	19,528	12,765	**19,501**	12,737

In October 2019, the Charity entered into a debenture with Turning Point (Services) Limited and Barclays bank, which included a cross guarantee and indemnity. This agreement was cancelled on 14 April 2025.

Turning Point holds a small number of bank accounts on behalf of clients who lack the required documents to open an account in their own name. Turning Point does not have control over the bank accounts. As a result, no amounts are recognised in the financial statements. The total held in such bank accounts as at 31 March 2025 was £70k (2024: £79k).

20. Creditors: Amounts falling due within one year

	Group 2025 £000	Group 2024 £000	Charity 2025 £000	Charity 2024 £000
Trade creditors	1,044	3,433	1,044	3,433
Amounts owed to group companies	-	-	4,427	-
Other taxation and social security costs	9,823	7,639	314	407
Other creditors	80	151	80	151
Accruals and deferred income	15,618	11,627	9,899	8,867
	26,565	22,850	15,764	12,858

21. Deferred income

	At 1 April 2024 £000	Deferred £000	Released £000	At 31 March 2025 £000
Group	6,136	8,291	(6,136)	8,291
Charity	3,377	2,570	(3,377)	2,570

Contract income and revenue grants are recognised as income in the period in which the performance criteria are met. Where funds are received for specific purposes and are potentially refundable if the conditions of the contract or grant are not satisfied, they will be deferred, with agreement of the funder, until the performance criteria are met.

22. Creditors: Amounts falling due after more than one year

	Group 2025 £000	Group 2024 £000	Charity 2025 £000	Charity 2024 £000
Social housing and other grants	44	51	44	51
	44	51	44	51

23. Financial Instruments

	Group 2025 £000	Group 2024 (Restated) £000
Financial assets		
Financial assets that are debt instruments measured at amortised cost	**38,026**	28,751
	38,026	28,751
Financial liabilities		
Financial liabilities measured at fair value through profit or loss	**2,126**	2,032
Financial liabilities measured at amortised cost	**8,332**	9,074
	10,458	11,106

Financial assets that are debt instruments measured at amortised cost comprise cash at bank, trade debtors, other debtors and accrued income.

Financial liabilities measured at fair value through profit and loss comprise the reinstatement provision and other provision.

Financial liabilities measured at amortised cost comprise bank loans, trade creditors, other creditors and accruals.

24. Provisions

Group and Charity

	Reinstatement provision £000	Other provision £000	Total £000
At 1 April 2024 (Restated)	**1,987**	**45**	**2,032**
Additions	**139**	**-**	**139**
Releases	**-**	**(45)**	**(45)**
At 31 March 2025	**2,126**	**-**	**2,126**

The reinstatement provision of £2,126k (2024: £1,987k) represents the amount set aside, based on individual property contracts, to cover expected building costs when Turning Point returns its leased properties to the landlord.

25. Restricted reserves

	2025 £000	2024 £000
At 1 April 2024	**-**	-
Restricted income	**273**	-
At 31 March 2025	**273**	-

The restricted reserves relate to legacy income that will be spent in future years in accordance with the wishes of people we had the privilege to support and their families.

26. Legislative provisions

The Charity and its subsidiaries are incorporated under the Companies Act 2006.

27. Statement of capital grant movements

	2025 £000	2024 £000
At 1 April 2024	**51**	57
Amortised in year	**(7)**	(6)
At 31 March 2025	**44**	51

28. Bedspaces

	Care Homes No.	Supported Living No.	Total No.
At 1 April 2024	**358**	**552**	**910**
Additions	**16**	**40**	**56**
Disposals	**(30)**	**(134)**	**(164)**
At 31 March 2025	**344**	**458**	**802**

29. Capital commitments

At 31 March 2025 the group had capital commitments of £nil (2024: £nil).

30. Pension commitments

The total net pension cost for the group for the year was £3,671k for the defined contribution pension scheme (2024: £3,214k) and £1,407k for the defined benefit pension scheme (2024: £1,353k).

Turning Point Pension Scheme
Turning Point participated in the Turning Point Pension Scheme which is a defined benefit pension scheme. This is a multi-employer scheme covering Turning Point and Turning Point Scotland employees (and former employees). Turning Point Scotland left the Group and became a separate entity in 1999.

During the financial year the actuary advised that an investigation into a complaint from a member of the scheme revealed that the pension benefits of 150 members who joined the scheme from 2001 have been undervalued. The additional liability of £3.4m is recognised as a past service cost within Turning Point's operating costs.

The latest completed triennial actuarial valuation took place on 31 March 2022. The results showed assets of £113.3m, liabilities of £137.1m, and a deficit of £23.8m on a technical provisions basis. In order to remove the deficit by 31 January 2031, Turning Point agreed to pay contributions of £1,449k for the year ending 31 March 2026.

Contribution levels for the next 3 years will be agreed following the triennial actuarial valuation dated 31 March 2025, which will be concluded by June 2026.

The information below relates to the scheme.

	2025	2024 (Restated)
Total cost recognised in the Statement of Comprehensive Income	**£000**	£000
Current year	**4,671**	1,297
Next year	**1,501**	4,671
Reconciliation of present value of scheme liabilities:		
At the beginning of the year	**67,263**	67,059
Interest cost	**3,198**	3,189
Actuarial (gains)	**(8,222)**	(393)
Net benefits paid	**(2,641)**	(2,592)
Past service cost	**3,388**	-
At the end of the year	**62,986**	67,263

30. Pension commitments (continued)

	2025	2024 (Restated)
Reconciliation of present value of scheme assets:	**£000**	£000
At the beginning of the year	**45,793**	46,412
Interest income	**2,185**	2,213
Actuarial (loss)	**(4,991)**	(1,272)
Employer contributions	**1,407**	1,353
Net benefits paid	**(2,641)**	(2,592)
Administration expenses	**(270)**	(321)
At the end of the year	**41,483**	45,793
Net pension scheme liability		
Fair value of plan assets	**41,483**	45,793
Present value of plan liabilities	**(62,986)**	(67,263)
Total	**(21,503)**	(21,470)
Actual returns on scheme assets		
Interest income on scheme assets	**2,185**	2,213
Remeasurement (loss) on scheme assets	**(4,991)**	(1,272)
Total	**(2,806)**	941

30. Pension commitments (continued)

Principal actuarial assumptions at the Statement of Financial Position date (expressed as weighted averages):

	2025	2024 (Restated)
	%	%
Discount rate	**5.85**	4.85
Inflation:		
- RPI	**2.80**	2.90
- CPI	**2.40**	2.50
Pension increases:		
- RPI min 0 max 2.5% p.a.	**1.85**	1.90
- RPI min 0 max 5% p.a.	**2.65**	2.70
- CPI min 0 max 3% p.a.	**1.95**	2.05
Mortality rates:		
- for a male aged 65 at accounting date	**19.3**	19.3
- at 65 for a male aged 45 at accounting date	**20.1**	20.1
- for a female aged 65 at accounting date	**22.4**	22.4
- at 65 for a female aged 45 at accounting date	**23.4**	23.4

Major categories of plan assets as a percentage of total plan assets	**2025**	2024 (Restated)
	%	%
Equities	**57**	20
Liability driven instrument	**33**	36
Diversified growth fund	**-**	11
Property and infrastructure	**9**	2
Multi asset credit	**-**	20
Cash	**-**	10
Trustee bank account	**1**	1

Local Government Pension Schemes

Turning Point employs members of Local Government Pension Schemes (LGPS) due to the takeover of services. These LGPS are funded defined benefit schemes, with assets held in separate trustee-administered funds.

At March 2024, the West Yorkshire LGPS was in surplus and Turning Point's share was valued at £663k. This surplus was not recognised as an asset in the Statement of Financial Position because it was not probable that Turning Point would receive a credit on exiting the scheme. Turning Point exited the scheme in January 2024 but only received the exit valuation in September 2024, when we received an exit credit payment of £45k.

30. Pension commitments (continued)

Contributions payable to the other LGPS in which Turning Point participates are charged to the Statement of Comprehensive Income in the accounting period to which they relate without any actuarial adjustment. The local authorities have indemnified Turning Point against any liability which may become payable because of the termination or expiry of a contract.

Turning Point has bonds totalling £62k provided to commissioners in respect of some of the LGPS.

NHS Pension Scheme

Turning Point has employees who are covered by the provisions of the NHS Pension Scheme(s). Details of the benefits payable and rules of the scheme can be found on the NHS Pensions website at www.nhsbsa.nhs.uk/pensions. The scheme is an unfunded defined benefit scheme that covers NHS employers, GP practices and other bodies, allowed under the direction of the Secretary of State for England and Wales. They are not designed to be run in a way that would enable NHS bodies to identify their share of the underlying scheme assets and liabilities. Therefore, each scheme is accounted for as if it were a defined contribution scheme. The cost to Turning Point of participating in each scheme is taken as equal to the contributions payable to that scheme for the accounting period. The contributions payable to the scheme by Turning Point for the year to 31 March 2025 were £498k (2024: £494k).

In order that the defined benefit obligations recognised in the financial statements do not differ materially from those that would be determined at the reporting date by a formal actuarial valuation, the Government Financial Reporting Manual (FReM) requires that "the period between formal valuations shall be four years, with approximate assessments in intervening years". An outline of these follows:

a) A valuation of scheme liability is carried out annually by the scheme actuary (currently the Government Actuary's Department) as at the end of the reporting period. This utilises an actuarial assessment for the previous accounting period in conjunction with updated membership and financial data for the current reporting period and accepted as providing suitably robust figures for financial reporting purposes.

The valuation of scheme liability as at 31 March 2025 is based on valuation data as 31 March 2020, updated to 31 March 2025 with summary global member and accounting data. In undertaking this actuarial assessment, the methodology prescribed in IAS 19, relevant FReM interpretations and the discount rate prescribed by HM Treasury have also been used.

The latest assessment of the liabilities of the scheme is contained in the scheme actuary report, which forms part of the annual NHS Scheme (England and Wales) Pension Accounts. These accounts can be viewed on the NHS Pensions website and are published annually.

b) The last published actuarial valuation undertaken for the NHS Pension Scheme was completed for the year 31 March 2020. The Scheme Regulations allow for the level of contribution rates to be changed by the Secretary of State for Health, with the consent of HM Treasury, and consideration of the advice of the Scheme Actuary and appropriate employee and employer representatives as deemed appropriate.

31. Leasing commitments

Future minimum lease payments under non-cancellable operating leases are as follows:

Group and Charity	2025 £000	2024 £000
Land and buildings		
Within one year	**1,335**	1,409
Within two to five years	**2,559**	2,315
After five years	**458**	622
	4,352	4,346
Other		
Within one year	**1,678**	1,001
Within two to five years	**1,838**	1,031
After five years	**-**	-
	3,516	2,032

32. Related party transactions

Group and Charity

Turning Point and Turning Point (Services) Limited are both entities incorporated in the United Kingdom. Turning Point is the only entity registered with the Regulator of Social Housing and is the parent company of Turning Point (Services) Limited, a wholly owned subsidiary. Turning Point is required to prepare consolidated financial statements that consolidate the accounts of the Charity and Turning Point (Services) Limited.

During the year, Turning Point (Services) Limited made an operating profit of £1,622k (2024: £1,479k). £1,617k (2024: £1,473k) will be gift aided to Turning Point. On 31 March 2025, Turning Point owed £4,427k to Turning Point (Services) Limited (2024: Turning Point (Services) Limited owed Turning Point £1,748k).

Turning Point incurs all the costs associated with providing health and social care services to commissioners, including the employment of staff and contracting with suppliers. Turning Point charges Turning Point (Services) Limited a percentage of the total income due to Turning Point (Services) Limited each month, which reflects the risk that costs might exceed income in the future. The total recharged in the year was £145,751k (2024: £125,179k).

NHS contracts are not deemed to be a related party transaction for 2024-25.

33. Subsidiary undertakings

The following were subsidiary undertakings of the Charity:

Name	Class of shares	Holding	Principal activity
Turning Point (Services) Limited	Ordinary	100%	The provision of health and social care services primarily to people with drug or alcohol issues, mental health issues or a learning disability. **Registered office** America House, 2 America Square, London EC3N 2LU

The aggregate of the share capital and reserves as at 31 March 2025 and of the profit or loss for the year ended on that date for the subsidiary undertakings were as follows:

	Aggregate of share capital and reserves	Profit/(loss)
	£000	£000
Turning Point (Services) Limited	2,977	1,622
	2,977	1,622

34. Prior year adjustment

During 2024-25, the board have made the decision to change two accounting policies to reflect a true and fair view of the charity's position as at 31 March 2025. In accordance with FRS 102, the changes to policy have been applied retrospectively and prior year adjustments have been made to comparative periods ended 31 March 2024 and 31 March 2023. The new accounting policies are included in notes 2.10 and 2.15.

Prior year adjustment 1 - Defined benefit pension liability.

During 2024-25, the scheme's actuary obtained sufficient member information to accurately split the assets and liabilities between the employers. This member information can be applied to calculate the assets and liabilities attributable to Turning Point on 31 March 2025, 2024, and 2023 so, in accordance with FRS 102, the scheme is now accounted for as a defined benefit scheme in 2024-25 where previously it was recorded as a defined contribution scheme. A prior year adjustment has been made to the comparatives and the opening balances have been restated to apply the new accounting policy described in note 2.15

The following adjustments have been made to financial year 2024 in these consolidated financial statements to reflect the change in accounting policy:

34. Prior year adjustment (continued)

	Original £000	Adjustment 1 £000	Restated by adjustment 1 £000
Group Statement of Comprehensive Income 2024			
Operating charges	(163,107)	(321)	(163,428)
Operating surplus	**2,159**	**(321)**	**1,838**
Interest payable	-	(976)	(976)
Impact of changing assumptions and discount rate on pension deficit reduction plan	(773)	773	-
Surplus for the financial year	**1,767**	**(524)**	**1,243**
Actuarial gains on defined benefit pension schemes	8	(879)	(871)
Total comprehensive surplus	**1,775**	**(1,403)**	**372**

	Original £000	Adjustment 1 £000	Restated by adjustment 1 £000
Consolidated Statement of Financial Position 2024			
Defined benefit pension liability	-	21,470	21,470
Pension provision	8,831	(8,831)	-
Pension reserve	(8,831)	(12,639)	(21,470)

	Original £000	Adjustment 1 £000	Restated by adjustment 1 £000
Consolidated Statement of Cash Flows 2024			
Surplus for the year	1,767	(524)	1,243
Increase/(Decrease) in provisions	(328)	(773)	(1,101)
Pension interest and service costs	8	1,297	1,305

34. Prior year adjustment (continued)

Consolidated Statement of Changes in Reserves

Original	Pension reserve £000	Unrestricted reserves £000
At 1 April 2023	(9,411)	13,027
Comprehensive income for the year		
Surplus for the year	-	1,767
Actuarial gains on pension schemes	-	8
Movement on pension deficit	580	-
Transfer from profit and loss account	-	(580)
At 31 March 2024	**(8,831)**	**14,222**

Restated by adjustment 1

At 1 April 2023	(20,647)	13,027
Comprehensive income for the year		
Surplus for the year	-	1,243
Actuarial gains on pension schemes	-	(871)
Movement on pension deficit	(823)	-
Transfer from profit and loss account	-	823
At 31 March 2024	**(21,470)**	**14,222**

Prior year adjustment 2 - Adoption of revaluation model for Freehold properties

The charity holds both freehold properties and leasehold properties. These were previously grouped into the same class of assets under housing properties and were depreciated under the policy described in note 2.10. In 2025, these were separated into individual classes of assets to reflect the adoption of revaluation model for freehold properties. Included below is the prior year adjustment made to freehold properties to apply the revaluation model retrospectively for comparative periods.

The charity's freehold properties were independently valued as at March 2025 based on market value with vacant possession. The properties owned at March 2023 and March 2024 were previously measured at cost, in accordance with FRS 102, the changes to policy have been applied retrospectively and prior year adjustments have been made to comparative periods ended 31 March 2024 and 31 March 2023.

34. Prior year adjustment (continued)

Following adoption of the revaluation model, depreciation was recalculated for the remaining useful life at the point of revaluation.

The following adjustments have been made to financial year 2024 in these consolidated financial statements to reflect the change in accounting policy:

	Restated by adjustment 1 £000	Adjustment 2 £000	Restated by adjustment 2 £000
Group Statement of Comprehensive Income 2024			
Operating charges	(163,428)	(175)	(163,603)
Operating surplus	**1,838**	**(175)**	**1,663**
Surplus for the financial year	**1,243**	**(175)**	**1,068**
Gain on revaluation of fixed assets	-	231	231
Total comprehensive surplus	**372**	**56**	**428**

Consolidated Statement of Financial Position 2024	Original £000	Adjustment 2 £000	Restated by adjustment 2 £000
Housing properties	5,075	1,244	6,319
Unrestricted reserve	14,222	(217)	14,005
Revaluation reserve	-	1,461	1,461

Consolidated Statement of Cash Flows 2024	Restated by adjustment 1 £000	Adjustment 2 £000	Restated by adjustment 2 £000
Surplus for the year	1,243	(175)	1,068
Depreciation of tangible assets	654	175	829
Increase/(Decrease) in provisions	(1,101)	-	(1,101)
Pension interest and service costs	1,305	-	1,305

34. Prior year adjustment (continued)

Consolidated Statement of Changes in Reserves

Original	Revaluation reserve £000	Unrestricted reserves £000
At 1 April 2023	-	13,027
Comprehensive income for the year		
Surplus for the year	-	1,767
Actuarial gains on pension schemes	-	8
Movement on pension deficit	-	-
Transfer from profit and loss account	-	(580)
At 31 March 2024	**-**	**14,222**
Restated by adjustment 2		
At 1 April 2023	1,230	12,985
Comprehensive income for the year		
Surplus for the year	-	1,068
Actuarial gains on pension schemes	-	(871)
Transfer from profit and loss account	-	823
Gain on revaluation	231	-
At 31 March 2024	**1,461**	**14,005**

TURNING POINT

England & Wales - Charity number 234887

Accounts

Company Number:
00793558
Charity Number:
234887
Housing RP Number:
H2509

TURNING POINT

(A company limited by guarantee)

ANNUAL REPORT AND FINANCIAL STATEMENTS

FOR THE YEAR ENDED 31 MARCH 2024

CHARITY INFORMATION

Turning Point is a private company limited by guarantee without share capital, incorporated in England on 27 February 1964.

NON-EXECUTIVE DIRECTORS
- Peter Hay (Chair)
- Nicola Gilham
- Christian Van Stolk
- Dr. Victoria Tzortziou Brown
- Dawn Kenson

EXECUTIVE DIRECTORS
- Julie Bass
- Amarjit Dhillon (resigned 31 January 2024)
- David Slegg (appointed 12 September 2023)
- Clare Taylor (appointed 12 September 2023)
- Greig Sharman (appointed 1 July 2024)

All of the above are key management personnel of Turning Point Group and the Charity

REGISTERED OFFICE
America House
2 America Square
London
EC3N 2LU

REGISTERED COMPANY NUMBER
00793558

REGISTERED CHARITY NUMBER
234887

REGISTERED PROVIDER NUMBER
H2509

AUDITORS
Crowe U.K. LLP
55 Ludgate Hill
London
EC4M 7JW

BANKERS
Barclays Bank PLC
Level 11
20 Chapel Street
Liverpool
L3 9AG

SOLICITORS
Eversheds Sutherland (International) LLP
Eversheds House
6 Stanley Street
Salford
M3 5GX

We are inspired by possibility. The possibility that every single one of us can change and grow, make choices, and live healthier and happier lives. With our expertise in working in the areas of substance use, mental health, sexual health, healthy lifestyles and learning disability, including with people with complex needs, we aim to continue to adapt to an ever changing external environment in order to extend our reach and support more people to improve their health and wellbeing.

TURNING POINT

(A company limited by guarantee)

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STRATEGIC REPORT

WHO WE ARE

At Turning Point, we constantly find ways to support more people to discover new possibilities in their lives. We are a leading social enterprise, designing and delivering health and social care services in the fields of substance use, mental health, learning disability, autism, acquired brain injury, sexual health, homelessness, healthy lifestyles, and employment. Over the last sixty years, we've grown and changed, just as the society we live and work in has too. We currently work in over 270 locations across England, empowering those we support to improve their health and wellbeing, learn, and bring about positive change in their lives.

WHAT WE DO

We are continually inspired by the stories, experiences, and possibilities created by those we meet. We have expertise in delivering innovative, integrated support in a range of places including people's homes, workplaces, communities, and specialist settings.

Most of our services are commissioned by the public sector, but increasingly we are expanding the ways in which people can access and pay for our support directly. We work closely with local authority adult social care and public health teams, the NHS, Integrated Care Boards (ICB) the Ministry of Justice, HM Prison and Probation Service, the Office for Health Improvement and Disparities (OHID), the Department for Work and Pensions and many private, benevolent and voluntary, community and social enterprise (VCSE) organisations. As a social enterprise, we invest any surplus we make back into the business, for the benefit of the people we support.

OUR YEAR IN NUMBERS

In 2023-24

Turnover	**£165m**
Total number of people supported in 2023-24	**197,594**
Total number of people supported by our mental health services	**113,032**
Total number of people supported by our drug and alcohol services	**67,176**
Total number of people supported by our healthy lifestyle's services	**14,987**
Number of colleagues	**5,177**
Total number of people supported by our sexual health services	**1,758**
Total number of people supported by our learning disability services	**641**
Total number of peer mentors	**182**
Total number of volunteers	**91**
Total number of locations	**271**
Percentage of employees with lived experience of the issues facing people we support for themselves or as a carer*	**60%**
Regulated services rated Good or Outstanding by CQC	**96%**

* Based on Employee Engagement Survey responses

VISION AND VALUES

Our Vision

To constantly find ways to support more people to discover new possibilities in their lives.

The quality of our services means everything to us. The people we work with inspire us and in turn we look for new ways to inspire change. We owe it to the people we work with to grow and shape the future, because we believe in what we do.

Our values

- We all communicate in an authentic and confident way that blends support and challenge.
- We commit to building a strong and financially viable Turning Point together.
- We deliver better outcomes by encouraging ideas and new thinking.
- We treat each other and those we support as individuals however difficult and challenging.
- We believe that everyone has the potential to grow, learn and make choices.
- We are here to embrace change even when it is complex and uncomfortable.

CHAIR'S STATEMENT

I am very proud to be the chair as Turning Point reaches its 60th year. The organisation has gone from strength to strength, having real impact on the lives of so many people. Looking across the years, we can see how the organisation has thrived from its first project in 1964 to what it has become now.

Whilst 2023-24 has continued to be a very challenging year for local government and indeed for those in need of public services, Turning Point has been able to grow to support more people than ever before. The continued pressures of the cost of living and the longer-term impact of Covid-19 have led to increased demands on services, and I am thankful that whilst some have found it hard to respond to that need, Turning Point has been able to rise to the challenge.

My board members and I have taken great pleasure in visiting the services and we have been touched by the multiple stories we have heard at firsthand about people making positive change in their lives. We have also had the pleasure of individuals coming to our Board meetings and strategy away days and indeed joining the award celebrations for colleagues, volunteers and people we support. It is this continual and sustained involvement from those Turning Point support that assists in shaping our future direction.

I thank the dedicated team led by Julie Bass who have strived to reach more people than ever before, committed to the core values that the organisation holds dear and the corporate goals it aims to fulfil. Turning Point has been able to recruit and retain dedicated colleagues, often bucking the trend across social care. That speaks volumes.

As we imagine the Turning Point of the future, what we know is that the foundations for the future are strong and we continue to deliver on our strategic intent.

Peter Hay CBE, Chair of the Turning Point Board

CHIEF EXECUTIVE'S STATEMENT

Welcome to our 60th year.

When Turning Point was founded in 1964 as the Camberwell Alcohol Project, attitudes and perceptions were very different to how they are now. The multi-layered reasons behind substance dependency were not yet understood, the importance of mental health was not widely discussed, and the approach to supporting people with a learning disability was often through segregation, not inclusion.

Since we first opened our doors to a handful of people in Camberwell, we now support over 197,594 people a year across the whole country. Back then, our entire team could sit around the kitchen table. Today over 5,100 Turning Point colleagues – many with some form of lived experience in our areas of support – continue the same powerful blend of empathy, understanding and expertise.

Those early colleagues would be amazed at the organisation we have become. But as we take the time to reflect on all we have learnt, we know there has never been a greater need to support people to live the lives they want.

Our story has always been about the people we support, so in January 2024 we launched our campaign to tell the 'Story of Turning Point in 60 objects'. Everyday objects can help us tell amazing stories about ourselves. They can represent an experience that meant something or was a significant turning point. We asked people to submit their story using an everyday object, as an accessible and vital way to learn and share moments of hope and inspiration. Over 100 of you shared your object and story with us. We will be exhibiting some of these in an exhibition at Kensington Palace in June.

When I look back at the work we have done in 2023-24, I am proud to see a range of initiatives that have truly improved the experience of people who need support. We have expanded our network of services in Nottingham, gained new services in Lincolnshire and Wakefield, achieved micro-elimination of Hepatitis C in our Oxfordshire and Slough Substance Use services, and launched the Blue Light Together platform to support the wellbeing of the Blue Light Community. 96% of our regulated services are now rated good or outstanding by the CQC, which is testament to the skill and energy of colleagues across England. Our efforts are making a real difference.

We are focussed on using our expertise and leveraging that of our partners in the sector to drive positive change. We hosted 200 delegates at our second Safer Lives conference in Birmingham, reinforcing the importance of harm reduction. Clare Taylor, our Chief Operating Officer, gave important evidence to the Public Accounts Committee Review into alcohol treatment services.

I am also encouraged to see the number of colleagues taking part in our annual engagement survey which increased by 2% since last year, with a 5% improvement in colleagues feeling their contribution is valued at Turning Point. By making sure colleagues have the right tools at the right time to support their health and wellbeing, we have seen fewer colleagues leave Turning Point than the previous year.

As this year ends, I reflect on how Turning Point continues to grow and innovate so that we can support even more people. In our 60 years, we have seen huge changes in societal values, but there is an ever present need to support people so that they can lead a fulfilled life. We are well placed to respond to this challenge and look forward to many more years of being inspired by possibility.

Julie Bass, Chief Executive of Turning Point

NAVIGATING THE HEALTH & SOCIAL CARE LANDSCAPE

2023-24 was a period of relative political stability compared to the previous year. However, with continued economic difficulties, an ongoing row over migration policy and the opposition polling consistently higher than the government in the run up to a general election, there was little sustained focus on addressing the systemic challenges facing the health and social care sector, with NHS waiting lists in England climbing to a record high in 2023[1], despite both parties stating the NHS was a top five priority.

The cost-of-living crisis continued to bite in 2023. Research from the Joseph Rowntree Foundation published in June highlighted that record food inflation, which peaked at 19% at the beginning of the year[2], replaced energy prices as one of the biggest contributors to inflation in April 2023. As a result, 2.7 million low-income households (23%) experienced a poor diet, such as eating less nutritious meals. Almost 1.5 million low-income households, more than four in ten of those on Universal Credit, experienced a poor diet in 2023. The overall number of low-income households going hungry, cutting or skipping meals was 5.7 million (48%), and the number of households going without other essentials like showers, transport and toiletries was 6.5 million (56%)[3].

During 2023-24, the economy flatlined, briefly moving into a slight recession in quarter three, and interest rates and inflation fell. In the Autumn Statement, the chancellor announced a series of cuts to both workers' taxes and taxes on business investment. However, the overall tax burden is the highest it has been in the post war period[4]. Despite this, and despite the high priority afforded to the NHS, the health and social care sector continues to face financial challenges.

The Care Quality Commission's (CQC) 2023 State of Care report highlighted record numbers of people waiting for planned care and treatment, with over 7 million people on elective care waiting lists in June 2023. However, the true number of people could be much higher, as some people who need treatment are struggling to get a referral from their GP[5].

During 2023-24, Integrated Care Systems (ICS) marked their first anniversary as formal partnerships. A report from the NHS Confederation noted the difficult operating environment marked by one of the most challenging winters on record, rising demand for care, a cost-of-living crisis, ongoing industrial action, and cuts in the running costs of Integrated Care Boards (ICBs) that materialised just seven months into their existence as statutory bodies. ICS leaders report several barriers impeding their progress including staff shortages, the lack of an equivalent long-term workforce plan for social care, a lack of funding for social care, and NHS finances, including unexpected cuts to ICB running costs and an ineffective capital regime. The NHS Confederation concluded that: *"these barriers are compounded by a short-termism approach within government that is dragging ICSs into more immediate operational priorities over the long-term shift towards integration, equity and prevention that they have been tasked with delivering."*[6]

[1] https://www.bbc.co.uk/news/health-66188529
[2] https://www.fdf.org.uk/fdf/news-media/news/2023-news/economic-insights/lowest-food-inflation-since-april-2022/
[3] https://www.jrf.org.uk/news/57-million-low-income-households-having-to-cut-down-or-skip-meals-as-jrfs-cost-ofliving
[4] https://www.theguardian.com/business/2023/dec/29/five-charts-explaining-the-uks-economic-prospects-in-2024
[5] https://www.cqc.org.uk/publications/major-report/state-care/2022-2023
[6] https://www.nhsconfed.org/system/files/2023-08/the-state-of-integrated-care-systems-2022-23-%285969%29.pdf

The learning disability sector

The health inequalities facing people with a learning disability remain stark. The 7th LeDeR (Learning from lives and deaths) annual report shows the rate of avoidable deaths in 2022 was nearly twice as high (42% compared to 22.8%) for people with a learning disability than for the general population[7].

And yet funding for the learning disability sector is problematic. The CQC 2023 State of Care Report particularly highlighted concerns around funding for supported living services. It reported a significant fall in profitability in 'specialist services', which includes supported living services and other residential and homecare services for autistic people and people with a learning disability. Higher staff costs have been the key factor in profit reduction for specialist services. This is further exacerbated in residential settings, which have a higher use of agency staff and are more affected by inflationary increases in non-staff costs, such as heating and food, with some providers having to hand back unsustainable packages of care. Although specialist providers have achieved some efficiencies using rostering systems and overtime, the CQC are concerned that these alone are not enough to guarantee financial sustainability in the long term.

In April, the government set out next steps to support social care including an investment of £250 million for the social care workforce[8]. This was half the amount promised, which sparked disappointment within the sector, coming at a time when there were more than 165,000 care worker job vacancies. At the same time, the government opened a call to evidence on a 'Care workforce pathway for adult social care' aimed at improving retention within adult social care via sector-wide defined career pathways.

Later in the year, the government unveiled the Market Sustainability and Improvement Fund providing local authorities with a further £570 million of ringfenced funding across the 2023-24 and 2024-25 financial years to improve and increase adult social care provision, with a particular focus on workforce pay[9].

An Association of Directors of Adult Social Services (ADASS) report, Time To Act published in 2023[10], identified significant consensus about how social care needs to change, calling out the political failure to drive through reform. The report set out a 'roadmap' for reform of adult social care backed by a long-term commitment to fund transformation.

Despite successive government commitments, the number of people with a learning disability and/or autism in long stay hospitals remains high, at around 2,000[11]. In January, NHS England, Local Government Association (LGA) and ADASS published guidance for Integrated Care Systems, setting out how partners in local systems can work together to improve the lives and outcomes of people with a learning disability and autistic people, of all ages[12]. The guidance was accompanied by an open letter which identified the five key actions that will have the biggest impact on supporting people with a learning disability and autistic people to leave mental health hospitals[13].

[7] https://www.kcl.ac.uk/ioppn/assets/fans-dept/leder-2022-v2.0.pdf
[8] https://www.gov.uk/government/news/government-sets-out-next-steps-to-support-social-care
[9] https://www.gov.uk/government/publications/market-sustainability-and-improvement-fund-workforce-fund/marketsustainability-and-improvement-fund-workforce-fund-policy-statement
[10] https://www.adass.org.uk/media/9685/adass-time-to-act-april-2023.pdf
[11] https://lordslibrary.parliament.uk/people-with-learning-disabilities-and-autism-in-inpatient-mental-health-care/
[12] https://www.england.nhs.uk/long-read/learning-disability-and-autism-joint-guiding-principles-2/
[13] https://www.england.nhs.uk/publication/five-key-elements-for-discharge-supporting-people-with-a-learningdisability-and-autistic-people-to-leave-hospital/

The public health and substance use sector

2023-24 was year two of a three-year funding commitment attached to the 10-year drug strategy: *From Harm to Hope.* As a result of additional investment in the sector, numbers in treatment have increased. However, there is considerable nervousness in the sector that there is currently no commitment to continue this investment beyond three years.

In February 2024, the Public Accounts Committee published a report on reducing the harm from illegal drugs. The report highlighted the ongoing harm and costs associated with drug use, the reduction in funding for substance use services since 2014 (even with the additional investment since 2021), and the overall mixed progress of the government's drug strategy. Whilst collaboration between localities, partnerships and government departments has improved, and workforce numbers have increased, progress on outcomes has been slow to follow. The report urges for long-term funding commitments[14].

The most recent drug related deaths data shows that in England and Wales, 4,907 deaths related to drug poisoning were registered in 2022. This is similar to the rate recorded in 2021 (84.0 deaths per million or 4,859 deaths). The age-standardised mortality rate for deaths related to drug poisoning has risen every year since 2012[15]. There is considerable concern about the likely impact of the emergence of synthetic opioids in the UK drug market on the number of drug related deaths. In response the government announced proposals to widen access to take-home supplies of naloxone, without a prescription in January 2024. Named services able to distribute the life-saving medication will now include police, prison and probation staff, and paramedics. The proposals also outline the provision of network coordinators to distribute naloxone to services and staff not named but who are in regular contact with people at risk such as registered housing providers and homeless charities.

At the end of 2023-24, a restructure at the Office for Health Improvement and Disparities (OHID), the national body responsible for implementation of the drugs strategy, was announced, involving a 40 – 50% reduction in headcount. This included the loss of several senior and experienced officials. In response, public health leaders expressed worries about diminishing expert advice, lack of independence, and the potential impact on the nation's health priorities and programmes[16].

2023-24 saw growing interest in alcohol related harm. In May, the Public Accounts Committee published a review of alcohol treatment highlighting the impact of alcohol-related harm and the need for greater focus on this issue[17]. Clare Taylor, Turning Point's Chief Operating Officer and Vice Chair at Collective Voice gave oral evidence to the Committee as part of the review. In December, OHID published the first ever UK clinical guidelines for alcohol treatment for consultation. These aim to develop a clear consensus on good practice and help services to implement the interventions for harmful drinking and alcohol dependence recommended by NICE.

In other areas of public health, England saw record high levels of gonorrhoea and syphilis sexually transmitted infections, following a dip during the Covid years[18]. In December, the government announced the roll out of opt-out blood tests for HIV, Hepatitis B and Hepatitis C to a further 46 hospitals across England, following a successful 18-month trial in 33 hospitals in London, Greater Manchester, Sussex, and Blackpool. There has been much discussion of the harm caused by smoking and vaping with the government introducing a generational ban on buying smoking products which will gradually see the age requirement for buying smoking products rise to 25[19].

[14] https://committees.parliament.uk/publications/43217/documents/215094/default/
[15] https://www.ons.gov.uk/releases/deathsrelatedtodrugpoisoninginenglandandwales2022registrations
[16] https://www.hsj.co.uk/policy-and-regulation/exclusive-national-agency-decimated-in-dhscrestructure/7036541.article
[17] https://committees.parliament.uk/publications/40045/documents/195525/default/
[18] https://www.bbc.co.uk/news/health-65810160
[19] https://www.gov.uk/government/news/prime-minister-to-create-smokefree-generation-by-ending-cigarette-sales-tothose-born-on-or-after-1-january-20099

The mental health sector

Despite sustained investment in the mental health sector, rising demand continued to place pressure on services during 2023-24. The CQC 2023 State of Care report found the quality of mental health services is an ongoing area of concern, with recruitment and retention of staff still one of the biggest challenges for this sector[20].

Government policy in this area was in limbo with several changes of direction during the year. At the beginning of the year, the government put out a call for evidence for a new Major Conditions Strategy which aimed to combine existing government commitments on six health conditions, including mental health, cancer, dementia, and health disparities 'into a single, powerful strategy'. In August 2023, the Department for Health and Social Care published an interim case for change and a strategic framework for the Major Conditions Strategy focused on primary and secondary prevention, early diagnosis, prompt and urgent care and long-term care and treatment[21].

Turning Point, with others in the sector, expressed concern over the abandonment of a bespoke mental health strategy and the potential for mental health to be side-lined with this new approach. In September, the government did publish a stand-alone five-year Suicide prevention strategy for England[22]. Disappointingly, the King's Speech did not include any mention of reform of the Mental Health Act

The Centre for Mental Health has called for all political parties to commit to a ten-year, cross-government plan for mental health, and to include commitments to prevention, equality and improved and accessible support in their manifestoes ahead of the forthcoming general election. The manifesto is supported by 60 organisations across health and social care, including Turning Poinzt[23].

In May 2023, Sir Mark Rowley, Commissioner of the Metropolitan Police, announced plans to stop police officers from attending mental health 999 calls[24]. There was a major backlash from the mental health sector and in response, the Home Office and the Department of Health and Social Care have published a National Partnership Agreement, signed by the key national policing bodies and NHS England. Under this framework, there is a national commitment to a 'Right Care, Right Person' approach to mental health crises, aiming to ensure that individuals in this position are seen by the right professional with a phased implementation[25].

One area of concern is the large numbers of people leaving the labour market because of mental health issues. In February, the government announced a new Occupational Health Taskforce to tackle in-work sickness and drive down inactivity. The taskforce, which is led by Professor Dame Carol Black, is part of the government's drive to tackle in-work sickness and help grow the economy. Businesses will be urged to tackle in-work sickness and stop people falling out of the workforce. This includes setting out minimum levels of occupational health needed to stop sickness-related job losses and help businesses better support those returning to work after a period of ill-health[26].

[20] https://www.cqc.org.uk/publications/major-report/state-care/2022-2023
[21] https://www.gov.uk/government/publications/major-conditions-strategy-case-for-change-and-our-strategicframework/major-conditions-strategy-case-for-change-and-our-strategic-framework--2
[22] https://www.gov.uk/government/publications/suicide-prevention-strategy-for-england-2023-to-2028
[23] https://www.centreformentalhealth.org.uk/publications/manifesto-for-a-mentally-healthier-nation/
[24] https://www.theguardian.com/uk-news/2023/may/28/met-police-to-stop-attending-emergency-mental-health-calls
[25] https://www.gov.uk/government/publications/national-partnership-agreement-right-care-right-person/nationalpartnership-agreement-right-care-right-person-rcrp
[26] https://www.gov.uk/government/news/new-occupational-health-taskforce-to-tackle-in-work-sickness-and-drivedown-inactivity

Public health and substance use perspective

Nat Travis, National Head of Service

It has been another exciting year for public health and substance use. We have had a number of areas of focus throughout the year including our continued work to maximise additional funding to support the realisation of the Drug Strategy 2021. Two years into the initial three-year funding commitment, our services, and the people we support are experiencing the benefit. We have added a further 50 roles across our services, including front line Recovery Workers, clinicians including doctors and nurses, and several specialist roles focusing on training and development and improving the quality of our offer. We have reduced caseloads and bedded in our Recovery Worker career pathway with entry level trainee posts to encourage those with lived experience, graduates, or those wanting a career change to enter the sector. Our new Advanced Recovery Practitioner roles offer our colleagues the option to develop and progress as an alternative to a management role.

A key focus from the government has been to build the number of treatment places available, with an aim of increasing the number of people accessing services by 20%. We have had some real success in this with some services meeting or exceeding this ambition.

We are continuing our focus on harm reduction and provision of naloxone. We showcased this at our second annual Safer Lives conference in November 2023 which was double the size of our first conference. We have increased our provision of naloxone by over 300%, working with partner agencies, service users, and significant others to give our communities access to this life saving drug.

As we get ready for the final confirmed year of additional funding, we are continuing to focus on increasing the number of people in treatment, developing our workforce and demonstrating to the government that this funding really does have an impact across our communities.

Learning disability perspective

Davinder Jhuty, National Head of Service

We reflect on a year where we laid solid foundations to deliver homes and services in which people with disabilities will thrive and where their strengths and voices will increasingly direct decisions and actions.

Our front-line teams embraced a new digital social care records system which has enabled us to build richer profiles of the people we support. This reinforces their strengths-based, person-centred care plans with real-time knowledge and feedback resulting in a more responsive, flexible service. Using this system means we are confident in setting and achieving ambitious goals with the full involvement of people with disabilities and their families. We are excited about the next stage of system development. This will drive multi-stakeholder access and collaboration and enable us to achieve the best outcomes by coordinating ideas, aligning actions and sharing our learning.

Following our successful NHS England and Improvement funding bid, we developed and trialled a paradigm-shifting health and wellbeing programme which addresses the health inequalities experienced by marginalised people with disabilities. Using a suite of guides and templates, our teams are equipped to have structured conversations which are personalised for each individual and prompt preventative action, promote equity in healthcare, and steer our desire to achieve superior holistic health and wellbeing outcomes.

Public sector budget constraints have been a feature of the past year. We have sought to counter this pressure by operating more efficiently whilst remaining focused on sustaining the high quality of services and homes we provide. We continue to invest in our workforce, ensuring we attract and retain highly skilled, experienced, and values-driven colleagues who will deliver continuity for the people we support and work capably with new initiatives. We are proud to

have retained 100% of our contracts out for retender this year. Our growth programme continues to be very successful, and we have seen significant growth across England.

We are trailblazers in our inclusion activities. This year we laid the foundation to further embed a culture of fully inclusive co-production through our services. We look forward to the next year when ideas and initiatives will start to come to fruition, building on the meaningful relationships we already have with the people we support and their families.

Mental health perspective

Stephen Parker, National Head of Service

Mental health has never been more in the spotlight than during and after the pandemic. The number of people reported as suffering from mental ill health or distress has risen by about a third since Covid first reached our shores.

With the Long-Term Plan coming to an end, the lack of an announcement in the King's Speech around the new Mental Health Act, and mental health being rolled into a Major Conditions Strategy, the commitment to parity of esteem between physical and mental health and the national focus on crisis and prevention has changed.

To meet these challenges, we have been working on several small projects to help improve physical wellness and mental wellbeing, including a climbing project in Nottingham, a co-produced fitness group with a personal trainer in one of our hospitals in Manchester, and several healthy lifestyle services in Total Wellbeing Luton supporting people with cancer, respiratory or cardiac conditions.

We opened another Crisis House in West Sussex, working with the NHS to help people manage their situation without the need to go into hospital. We ran a successful pilot in A&E at the Manchester Royal Infirmary where our staff intervene quickly to try to stop peoples' conditions escalating to the point where they need access to secondary care.

We have been working on aligning our diverse portfolio of services into groups and enhancing our digital platform to maximise the efficiency of our interventions. From there, we hope to track the outcomes of these interventions for the people we support in a meaningful way.

As 2024 is our 60th anniversary year, it is important to look back and see how far we have come. Since opening our first mental health services in 1985, we have gone on to develop a huge range of services to provide support to people with a whole spectrum of mental health needs. In the last year we supported 113,032 people.

Clinical perspective

Dr David Bremner – Medical Director

This year we have increased our clinical offer within substance use, expanding our scope and roles. This includes wound care to support earlier intervention and treatment, increased provision of depot buprenorphine, and improved pathways to ensure the people we support have access to the whole treatment system.

We have continued with our commitment to improving quality through our governance processes, including developing an improved young person's operating procedure with the support of the young people who use our services, to consistently deliver high quality interventions.

Our attention to the reduction of drug and alcohol related deaths has continued, including the development of a proactive response and guidance on the emerging threat of the impact of synthetic opioids which results in the increase of risk of overdose. The introduction of safety plans, working with service users to provide harm reduction interventions to promote safety, helps reduce the risk of death by overdose.

We have enhanced our clinical workforce, employing associate nurses, advanced clinical practitioners, and associate psychologist apprentices. We're investing in developing our own workforce from entry level positions through to senior clinical level. And we're recognising the excellence of our clinical colleagues, and those who wish to develop their clinical expertise, to support recruitment and retention.

We work with many medical students and doctors in substance use to improve the knowledge and skills of the wider treatment system and to reduce the stigma our service users experience. All our integrated substance use services employ medical students, and three of our integrated services have GP trainees. One service currently provides the full year placement for medical speciality training in substance use. Many Clinical Leads lecture or provide clinical skills training within substance use, as well as leading case-based discussions to support the wider treatment system.

For people that we support with their mental health or a learning disability, we have developed a new policy to improve the safety and effectiveness of clinically delegated tasks from local clinicians. We've also been working with the Chief Nurse for Social Care to develop the national policy approach on this.

OUR STRATEGIC INTENT

Our new strategic period runs from April 2022 to March 2027. The current strategy continues to see Turning Point forging new opportunities to integrate health and social care, while extending our reach, effectiveness, and use of technology.

Our vision and values remain an important constant in an uncertain world, while our strategic intent is now represented through the following strategic goals:

1. Support people to improve their health & wellbeing and bring about positive change in their lives;
2. Seek to reach more people and provide support at the earliest opportunity;
3. Prevent the escalation of need and reduce demand on the wider health and social care system; and
4. Thereby create enduring value for communities and society as a whole.

Our Stakeholders

Section 172 (1) statement

In decision-making and discussions during the year ended 31 March 2024, the Directors of Turning Point have acted in the way that is considered, in good faith, to be most likely to promote the success of the Company for the benefits of the people we support (recognised beneficiaries under company and charity law), with regards to all its stakeholders and to the matters set out in section 172 (1) (a-f) of the Companies Act 2006.

Strategy & Vision

The Turning Point Board met in November 2023 for discussions on strategic matters relating to the new strategic period that started in April 2022. The charitable objects (last reviewed and updated in 2021) align with the strategic period. The Board regularly monitors and reviews progress against the strategic intent through reports presented on operating and financial performance.

Our Stakeholders

The stakeholders of the company include the people we support, local communities, our employees, the purchasers of our services (public sector commissioners, businesses, and private pay clients), our regulators and our suppliers. Through active engagement the views of stakeholders are gathered throughout the annual business cycle. This knowledge is considered when taking principal decisions throughout the year.

Our approach to stakeholder engagement during 2023-24

The people we support (the beneficiaries)

The company is a registered charity and under charity law has beneficiaries to whom public benefit is delivered in accordance with the charitable purpose of the company. At Turning Point, we support 197,594 people each year. We provide health & social care services in a range of markets, including the health, care, employment, and criminal justice sectors.

Our engagement channels include:

- Regular Board and senior leadership visits to our services.
- Individuals we support attending Operating Board meetings to share their experiences.
- Local forums and our national involvement groups bringing together the people we support to provide feedback and work in partnership to improve services.
- An annual survey gathers feedback from the people we support.
- A national involvement network brings together representatives from each service to share feedback and learning.

Outcomes of engagement:

- Central activities and initiatives developed collaboratively with people we support. Recent examples include co-designing consent documentation for medical treatment in substance use and reviewing psychosocial pathways and developing our DNACPR information pack for people with a learning disability.
- Our voice in external policies and campaigns is informed by the views of people we support. Recent examples include people we support bringing their voice to Learning Disability England's Good Lives Manifesto and Office for Health Improvement and Disparities government's consultation on the clinical guideline for alcohol treatment.
- Co-designing our services through involvement initiatives with people we support. Recent examples include co-production of our new Stafford and Nottingham mental health supported accommodation services, through collaboration with people with lived experience.

Communities and local partners

Turning Point operates nationally, and our services are embedded within the wider community. We work closely with local partners to engage communities, signposting important local resources to people wherever possible. As part of our service user involvement programme of work, service users are supported and empowered to have a voice within local community initiatives that matter to them. Engagement with the local community forms an integral part of our approach to person centred support.

Our engagement channels include:

- Supporting local events and community initiatives.
- Social media engagement with local organisations.
- Building relationships with other community charities.
- Working in partnership with other local organisations.
- Promoting our National Community Innovation Fund.

Outcomes of engagement:

Services work positively and collaboratively with partners in local systems and communities to meet the needs of their local population, improve access for underrepresented groups and involve service users in improving services.

Environment

Due to the impacts of climate change, it is vital that the company has due regard of its activities and the impact these have on the environment. The Company is committed to achieving Net Zero by 2050.

Our engagement channels include:

- Green Heart of Turning Point intranet site encouraging an environmentally conscious workplace.
- The introduction of a new Green Heart Viva Engage channel to engage employees in environmental matters and encourage individual action both at work and at home; and
- The Director of Corporate Governance is the Net Zero Lead for the organisation for the purpose of NHS contracts.

Outcomes of engagement:

Environmental objectives are achieved through a clear policy and environmental management system. The Green Plan is approved by the board and sets out the commitment to minimising the impact on the environment from the business activities of the organisation.

For further details see Environment and energy reporting on page 61.

Our people

Colleagues at Turning Point strive to achieve a meaningful positive impact in people's lives. Our ability to provide high quality services is made possible by the dedication, diversity and skill found within our teams, and a culture in which we are continuously learning from the experiences of those around us.

Our team of over 5,100 people is made up of employees, peer mentors and volunteers, spread across 271 sites and supporting over 197,594 people a year across England. We rely on our people to deliver health and social care outcomes under contract to commissioning authorities.

For further details see People report on page 40.

Principal Decisions in 2023-24

For each matter that comes before the Board of Directors, the board considers the likely consequences of any decision in the long term, identifies stakeholders who may be affected, and carefully considers their interests and any potential impact as part of the decision-making process.

The board made the following principal decisions during the year:

1. A revised and newly developed approach to board effectiveness self-assessment questionnaire.

2. Changes to the Remuneration Committee meaning it is no longer a standing committee.

3. The appointment of Crowe UK LLP as the Turning Point group external audit service provider following a procurement exercise.

4. The extension of "Relevant Qualifying Posts" in accordance with Article 50 of the Articles of Association adopted on 22 September 2021 to include the Chief Operating Officer.

5. The re-appointment of Christian Van Stolk for a second three-year term as a non-executive director on 16 January 2024, and the reappointment of Victoria Tzortziou Brown and Nicola Gilham for second and third terms respectively on 14 May 2024.

6. The approval of a deed of variation to the inter-company agreement between Turning Point and its wholly owned trading subsidiary Turning Point (Services) Limited on 16 January 2024 thereby changing the recharge rate between the two legal entities and updating the registered offices.

Progress and Impact

Welcome to our sixtieth year

With the health and social care landscape becoming increasingly complex, it is more important than ever to ensure the people we support are at the heart of everything we do. That's why we have chosen to take the time and space in 2024 to reflect and celebrate moments of humanity, hope, and inspiration over the past 60 years.

To do so, we are telling 'The story of Turning Point in 60 objects.' We asked people to share their story with us using an everyday object. Over 100 individuals took part. We are preparing to exhibit some of their objects and stories in an exhibition at Kensington Palace in June, alongside 20 selected by us. You can see all these objects on the www.tp60.co.uk website, including Kelvin and his house keys.

TP60 - House keys and key rings - Kelvin's story

Kelvin was diagnosed with bipolar disorder at the age of 18. It was 1972. He spent the next two years in a secure hospital, where he was given no say in the treatment he was given. Episodes of electroconvulsive therapy (ECT), which involves sending an electric current through the brain, followed. And Lithium, a mood stabiliser, which Kelvin remembers as being "bloody horrible".

In 2016, Kelvin moved into one of our supported-living homes, finally finding independence, friends, and hope. To begin with, Kelvin had a single room. We supported him as he developed more skills to look after himself and his living space, and he soon progressed to his own flat with a front room, kitchen, bathroom, and bedroom.

"When I first arrived, I was nervous, but my support worker helped me make a smooth transition. I've been working hard to improve my cleaning skills. I've got a rota of the things I need to clean from Monday-Saturday. It's been a challenge for me, but I've worked hard to improve."

Kelvin describes Turning Point as a supportive community, where he is able to join in lots of activities and courses. "I enjoy current affairs, art group, and games club. My favourite is music mapping because I get to express myself: you divide a sheet of paper into four, the leader plays 4 pieces of music, and you draw what the music makes you think or feel."

He has also enjoyed going to Recovery College, where he has studied 'Wellbeing through writing', 'Understanding bipolar disorder', and, his favourite, 'The Habit of Happiness'. He says that having his own space gives him a sense of power, as does making own plans: "Today I went out to see my friend, Richard, who has a birthday at the weekend, so we talked and listened to music together."

These days, Kelvin is more involved in his treatment than ever before. He speaks regularly with his doctor and has noticed a positive change in how he's treated, both in terms of his medical and non-medical care. He has even spoken to local students to help them understand the support he needs to live an independent life.

He says he feels more optimistic than ever about the future and is already making plans for more independence. "My next stage is to move to lower support accommodation. Hopefully, then I can move to a council flat. Next year I'd like to go to college to study A-level History. I'm looking forward to it."

Strategic Goal #1

Support people to improve their health and wellbeing and bring about positive change in their lives

This section showcases just a few of the many ways our services support people to improve their health and wellbeing.

We are very proud to have achieved accreditation by the Royal College of Psychiatrists for our psychological services. This is a significant achievement and gives the people who use the service assurance of the high standard they will receive. Elsewhere, we continue to expand our services into communities to support people to improve their health and wellbeing and bring about positive change in their lives.

Achieving the Accreditation Programme for Psychological Therapies Services (APPTS)

In February, we were delighted to announce our accreditation by the Royal College of Psychiatrists (RC Psych). The accreditation recognises the excellent quality of evidence-based interventions our Talking Therapies Services deliver in both our Wakefield and Luton Talking Therapies Services. We are two of sixteen Talking Therapy Services across the country to have received this accreditation. It stands as a testament of our dedication to delivering high-quality care and upholding the highest standards in the field of primary care mental health services.

The APPTS was developed in partnership with the Royal College of Psychiatrists Centre for Quality Improvement and the British Psychological Society (BPS). This accreditation is designed to recognise and promote excellence in the provision of psychological therapy services, ensuring they meet rigorous standards of quality, safety, and effectiveness. The accreditation process involves a thorough external evaluation of various aspects of the service, including clinical governance, service delivery, staff training and qualifications, clinical supervision, and adherence to evidence-based practices. It also asks the people we support about their experience of the services they receive.

This accreditation is a significant achievement that aims to provide assurance to the people we support, commissioners, and other stakeholders that our services offer high-quality evidence-based, person-centred therapies delivered by appropriately trained and supervised professionals. It also encourages continuous improvement and innovation within services to enhance the quality and effectiveness of care provided to individuals accessing psychological interventions.

While achieving the accreditation is a significant milestone, our services view it as an ongoing commitment to continuous improvement and innovation. We remain steadfast in our pursuit of excellence, continually evaluating and refining our practices to better meet the evolving needs of the people we support, and the standards set by the Royal College of Psychiatrists.

Marking World Mental Health Day in Wakefield Talking Therapies

October 10th 2023 marked World Mental Health Day (WMHD). To celebrate this, Wakefield Talking Therapies hosted an event at Pontefract Town Hall with the aim of raising awareness about mental health and promoting access to the service. Members of the public were invited to attend and engage with various local service providers to learn about available resources and support options that could support their wellbeing.

During the event, the service facilitated two interactive workshops on Managing Anxiety and Worry, as well as on Social Media Pressures. These workshops provided valuable insights and strategies for coping with common mental health challenges we often see. People could also refer themselves to the service there and then.

In addition to the workshops our colleagues, Peer Mentors, and partners were invited to participate in a bake-off competition. We were honoured to have Karen Wright, a contestant from the Great British Bake Off in 2018, as a special guest judge for the competition.

During the event, one of the Peer Mentors from the service courageously shared her personal journey about accessing Wakefield Talking Therapies as a new mother. She talked about the support it provided her with and the confidence she gained which has helped her to develop into the role of a Peer Mentor. The story she shared resonated with attendees and highlighted how important peer support is in mental health recovery.

The event featured stalls from various local services, offering information and resources to attendees. Participating organisations included Kidz Aware, Youth Association, Castleford Tigers, Wakefield Council's Money Smart and Energy Team, Turning Point Inspiring Recovery, and many more. The stalls provided attendees with valuable information about community resources and support networks they could access.

The WMHD event was a great success, bringing together members of the community to raise awareness about mental health and promote access to local support services. Through engaging workshops, personal storytelling, and community engagement, the event fostered connections and highlighted the importance of mental health and well-being.

Opening St Barts Road Supported Living Service in Kent

St Barts Road is a new Supported Living Service in Kent that was developed in partnership with Specialist Supported Living Ltd (SSL) and Kent County Council (KCC) to support people with learning disabilities and autism. Some people may also have additional complexity of need, such as mental health or physical health needs.

The service is 15 self-contained apartments which are all on the ground floor with level access, widened corridors and turning circles throughout. They all have a bedroom, wet room, and open plan kitchen-lounge. Each apartment has its own entrance, as well as a communal entrance, and access to outdoor space.

Four apartments have been specifically designed for people to transition from long-stay hospitals to their own home in the community, supporting the NHS Homes not Hospital Plan. Five apartments have been designed to support people with physical disabilities and include adapted kitchens.

All residents have their own tenancies, which will help them achieve greater independence, have greater quality of life, dignity, choice, and respect in their daily living. There will be a support team onsite to support residents inside and outside of the home, including taking part in a range of activities to reflect their interests.

The building caters for the future needs of residents with the installation of a new telecare system allowing individuals to add personal telecare devices in the future if they need to.
The first residents will move in in late March 2024, and we're excited to meet them!

Providing support for the people of Nottingham

Nottingham is a well-integrated, diverse, and vibrant city with a proud heritage. Despite recent economic challenges, it has many reasons to be confident about its future.

We have expanded our network of services in Nottingham over the past 12 months. As the economic climate continues to be challenging, we have embraced place-based approaches to respond to the continued rise in demand for mental health services that support people with complex conditions and those experiencing difficult circumstances. We have used our substantial footprint in both Nottingham and Nottinghamshire to optimise efficiencies, enhance our offer, and mitigate some impacts of the cost-of-living crisis.

We have trusted relationships with local authority and NHS Commissioning Teams and have worked with them and with community partners to establish new services. We have also evolved and retained existing contracts and leveraged our VCSE identity to attract grant funding to drive innovative work. As a result of increasingly symbiotic relationships, we have seen improved processes evolve between cooperative partner organisations that reflect the intention and direction of Integrated Care Systems.

Over the past year, we successfully retained our Rehabilitation Service at Beacon Lodge, the Crisis Service at Haven House, and the Complex Emotional Needs Service. These all support people in Nottingham and Nottinghamshire. Our Mental Health Helpline was set up in the early days of the Covid-19 pandemic. It is co-located with NHS partners and has doubled in scale over the past year.

This year we developed new supported living communities at Mansfield Street and Hall Street and others are due to follow. Our forensic mental health services continue to deliver excellent outcomes and we provide a valuable crisis sanctuary service in partnership with VCSEs in Nottinghamshire. We are looking forward to opening our first supported living community in Mansfield, and for further developments to follow elsewhere in Nottinghamshire.

Our frontline teams demonstrate a sincere desire to bring new opportunities and choices to people in Nottingham. One grant funded initiative used climbing walls to help people combat fears and anxieties through both therapeutic sessions and climbing. National Lottery backed Sport England has now funded phase two of this initiative. A new cohort is using climbing walls while the first cohort are climbing real rocks in the Peak District.

Another initiative saw people interacting with each other in creative ceramic making sessions that allowed conversations to flow in a natural setting through shared experiences. We are ambitious for phase two of this initiative and for other ideas in the forthcoming year.

Launching new sexual health services for young people

Young Hounslow Sexual Health

Turning Point were thrilled to be commissioned by the London Borough of Hounslow to run sexual health services for young people. We launched the new Young Person's Outreach Service in April 2023. Young people were given a poll of suggestions and chose to name the service Young Hounslow Sexual Health. The service, previously run by Brook, works remotely to provide a youth friendly and easily accessible community engagement programme. Our team provide young people (up to age 24, and age 25 for people who have SEND) with the skills and education to practice safer sexual health and positive well-being for the rest of their lives, whoever they are, and wherever they are in the community. In the last quarter, our small service actively engaged over 1,179 young people, providing valuable education through school presentations, community outreach, youth led events, and non-educational settings like youth clubs.

Working with schools and other local organisations, we are integral to the delivery of relationships and sex education (RSE), adopting a spiral style approach to ensure age-appropriate content. We also provide training for professionals in how to teach RSE as well as providing a highly demanded awareness session on Gender and Sexual Diversity. The team reach the far corners of the community to provide sexual health promotion, championing that all young people should have access to comprehensive relationships and sex education. Our practitioners champion sex positivity, with the attitude that RSE should be taught with a shame-free, open minded, inclusive and intersectional approach, equipping young people with the knowledge and skills they need to make informed decisions about their relationships and lives.

The service is an outlet for the C-Card scheme, a free condom scheme for the young people of Hounslow. It also runs the National Chlamydia Screening Programme (NCSP), which tests young people aged 16+ for chlamydia and gonorrhoea on outreach.

The service works to target young people for early intervention one-to-one support across Hounslow, providing a truly needs-based support service to achieve better outcomes for young people in Hounslow.

Young Southwark Sexual Health

Beginning our mobilisation at the end of 2023, Young Southwark Sexual Health (YSSH) provides support to young people aged 16-25 in Southwark. Like its sister organisations, YSSH provides RSE style workshops, one-to-one interventions, and drop-in services to young people around their sexual health and relationship needs. Our workshops consist of a standard RSE curriculum covering a wide selection of topics in accordance with government guidelines. These range from sessions on healthy relationships and contraception, to consent and online safety.

Our service supports young people in minimising risks, ensuring they are aware of other services within the borough that can help them with any additional needs they have. As part of our effort to minimise risk in the community, we have a partnership with Sexual Health London to provide young people with the opportunity to sign up for STI kits online. So far, we have introduced over 50 organisations to the new service and are expanding our outreach to include schools, youth clubs, universities, supported accommodation and other statutory services.

TP60 - Bus Pass and Mouse Ears – Rachel's story

Rachel moved into her new home in 2015. For a long time, she avoided participating in activities with the staff and restricted her interactions with the community. She distanced herself from her co-tenants and avoided acknowledging them. The only activities she felt comfortable with were playing kerplunk and making lists with staff support. Over time, Rachel started to develop trust in her support team, allowing them into her flat more often. But she still struggled to accept it as her home and any outings needed 2:1 staffing.

In 2018, Rachel finally unpacked her belongings and started to buy some new furniture with the support of staff. She had strong attachments to certain staff members and resisted allowing new people into her flat. By 2022, Rachel was more involved in community activities. She joined trips and discovered her thrill-seeking side, developing a passion for theme parks and anywhere with exciting rides and slides. She also enrolled in college, which was a huge step considering her past struggles with educational settings. She's now in her third year and has built positive relationships with her fellow students, even attending the college prom.

Today, Rachel gets along with most of the staff and her co-tenants too. Her trip to Disneyland was an amazing achievement for someone who'd not been on a plane since she was a child, especially given her previous struggles with shared activities. And everyone gets to enjoy her kind heart, infectious laugh, and wicked sense of humour.

Strategic Goal #2

Seek to reach more people and provide support at the earliest opportunity

We continue raising awareness of our services and delivering new and expanded services in accessible ways, so that we can reach those who need us, when they need us.

We aim to get support and information to people who need us as quickly and easily as possible, in the way that is best for them. We have redesigned our website to make it easier to access our services, and Rightsteps and livelife continue to reach more people. We recognised the success of our youth services in a weeklong celebration of youth involvement. We continue tackling homelessness by reaching out to people where they are to make sure we reach people who would not otherwise access our services.

Launching our new website to get people to the support they need

In July 2023, we launched a brand-new website, redesigned to make it as easy as possible for people to get the support they need, as quickly as possible.

Throughout the process we asked for experiences, feedback, and ideas from a group of people we support, as well as from a number of colleagues. As a result, we have seen a steady and significant increase in the number of online referrals into our substance use services.

It is important to us to provide people with accurate, reliable, and safe information to support their health and wellbeing, so we added new content across a range of topics, including anxiety, mental wellbeing, sleep and more.

We know how powerful stories of hope and inspiration can be to people wanting to make a positive change in their lives, so our new website also offers a hub of Real Stories, shared by some of the people we have supported. You can find more stories like Oscar's on the website www.turning-point.co.uk/real-stories

Oscar, a Peer Mentor at the sexual health service SASH, shares his personal experience of living with HIV

Life can deal us a hand that feels insurmountable. For me, my journey with HIV began on the backdrop of a childhood filled with neglect and abuse, leading to a search for love in the most perilous places. This HIV testing week, I share my story - a testament to the trials, tribulations, and triumphs that come with living with HIV.

What is HIV?

Human Immunodeficiency Virus (HIV) is a virus that attacks and weakens the immune system. If left untreated, it can progress to Acquired Immunodeficiency Syndrome (AIDS) significantly impairing the body's ability to fight infections. HIV is transmitted through:

- Unprotected sexual contact with an infected person;
- Sharing needles or syringes;
- From mother to child during pregnancy, childbirth, or breastfeeding; and
- Through blood transfusions or organ transplants.

My early years were incredibly chaotic, with drug-addicted parents and a broken home situation. Abuse masqueraded as affection, steering me towards substance use and risky behaviours, all before I reached adulthood. On my 18th birthday, I received the most harrowing gift: an HIV positive diagnosis. Receiving this diagnosis through community outreach in a London local brothel, I felt like the word "positive" echoed in a void, signalling a descent into denial. I refused treatment, letting my health and hope wither away. I believed HIV was the end - my life seemed inconsequential, confirmed by the virus coursing through me.

The importance of getting tested

Knowing your HIV status is empowering. Early detection through testing can lead to early treatment, which can significantly slow the disease's progression, improve quality of life, and reduce the risk of transmitting the virus to others. Testing is essential because:

- It's the gateway to treatment and managing HIV effectively;
- It helps protect your partner(s) from the virus; and
- It's an act of self-care and responsibility towards your health and community.

Even after finding love with a caring partner, my shame kept my status veiled, and my fear of rejection dictated lies that nearly shattered us. My condition worsened, and in a cruel twist, I transmitted the virus to him. With newfound courage, I sought support, connected with others living with HIV, and began to heal. Diagnosis may have left me feeling like nothing, but being loved and learning the facts around the condition empowered me to make a difference in society. I realised that I could have realised this through peer groups, and peer support and that started my journey to a psychology degree.

The power of Peer Support

Peer support, as I've personally experienced, is transformative. It's about individuals coming together to share experiences, strength, and hope. This kind of support can:

- Provide a sense of community and belonging;
- Offer practical advice from people who've faced similar challenges; and
- Empower and educate on managing health and wellbeing post-diagnosis.

Embracing sobriety and health, I reclaimed my narrative. This led to my role as a peer support worker and I became a channel for change, showing others that HIV is not the end, but a different beginning. Now, I share my journey not as a tale of sorrow, but as one of resilience. As a lived experience practitioner with the NHS, I offer a hand to those still in the grip of stigma. Through workshops and storytelling, I strive to dismantle the stigma surrounding HIV, one story at a time. HIV thrust me into a battle I never anticipated, but it also unveiled a strength I never knew I had. Get tested, reach out for support, and remember, whether positive or negative, your worth is immeasurable. Together, we can turn any diagnosis into a journey of empowerment.

My journey with HIV has taught me that while the diagnosis can be daunting, there is immense power in taking that first step towards testing and accepting support. SASH and the peer community stand ready to provide that support, embodying the message that an HIV diagnosis is the start of a different kind of journey, not the end of the road.

Celebrating Turning Point Youth Involvement Week

This year we launched our first ever national Youth Involvement Week, running from 9th to 13th October 2023. We have amazing youth services across the country that support young people to deal with the challenges they face around drugs, alcohol, sexual health and surrounding issues. All our services are young person centred, delivering holistic support tailored to individuals' needs. The young people we support engage in our programmes as active participants, but we wanted to expand on this.

The aim of the week was to raise awareness among young people and professionals of the support we offer. We wanted to increase our visibility and demonstrate how young people are engaged with and involved in our services. The week was a great success and our youth teams had great fun. We highlighted some of the projects our services provide to young people, for example, equine therapy, outreach support in hospital A&E's, and preventative/ harm reduction interventions in schools and colleges. We heard from young people about the impact of these interventions, the challenges they face, how they view our services. They also told us what we could do differently.

Over the week, we invited young people to help to develop new posters, merchandise, and content to share with other young people. We know the benefits of the energy, fresh ideas and enthusiasm young people can bring, and we also know services developed in partnership with young people are more likely to be effective in engaging them and so will have a greater impact.

The week's finale was a webinar with a young person who had accessed support from our young person service in Somerset. She spoke about her journey and the importance of the support and unique relationship she developed with her young person worker. It was lovely that over 80 people from across Turning Point services joined to listen and engage with her about her experiences.

The Youth Involvement Week is now a yearly event, and we are looking forward to seeing what 2024 brings.

Supporting people experiencing homelessness

Levels of household homelessness and rough sleeping have continued to increase across the UK. Homelessness and the risk of homelessness is a key issue for many people who use Turning Point services. We are committed to playing our part in addressing homelessness and ending the need to sleep rough in every area where we operate as part of the Government's 'Ending Rough Sleeping for Good (2022)' strategy.

To do this, we have developed our 'Starting Point' strategy. The strategy focuses on five areas to help end Rough Sleeping in each location that we operate.

- A place-based approach, ensuring treatment is integrated with provisions from Housing and Health.
- Psychologically Informed Environments (PIE) that encourage engagement from those who have experienced trauma through exposing them to calm and empowering support services.
- Assertive outreach encourages accountable and persistent engagement work.
- Transitions, which looks to combat the constant changes that people experiencing homelessness go through as they move between various stages of recovery and stability of housing.
- Systems Change, where we can be part of the wider response to Rough Sleeping and supporting partners in combatting the issue.

Other ways we tackle homelessness:

- By working in partnership to ensure every plan we make with every individual is joined up with housing and health care services in each local authority where we operate. Turning Point has a critical role to play in addressing homelessness, but we can't do it alone.
- By creating an empowering, friendly, and safe environment here at Turning Point, we can engage people who have experienced trauma in their lives and had multiple unsuccessful engagements with support services before coming to us.
- By reaching out to homeless people where they are and not relying on appointment-based provision, we reach people who have historically not been able to access other services.
- By integrating our support with the multiple transitions homeless people go through, including from street to hostel to home, from area to area, in and out of institutions. Homelessness is characterised by instability. We are a thread of stability.
- By taking a lead in much needed systemic change. Homelessness is a sign of system failure. There is no need for people to be homeless in this country. Turning Point provides integrated support to local authorities and local services, and not just to the individuals who choose to enter support or treatment with us. As such, we have a central role both in supporting our partners and communities to better meet the needs of vulnerable people, and in building skills and resilience in services. This means the impact of what we do goes beyond the work we do with individuals.

As part of the Government's 'Ending Rough Sleeping for Good' strategy, we have received funding from the Rough Sleepers Drug and Alcohol Targeted Grant to provide specialist substance use treatment for homeless people in 12 areas of England. This grant acknowledges that the integration of housing and health care treatment, including substance issue treatment, is essential in addressing homelessness. Our services operate in the City of London, Hackney, Westminster, Oxford, the Royal Borough of Kensington and Chelsea, Wiltshire, Rochdale, Oldham, Leicester, Somerset, Hereford, and Slough providing both outpatient treatment and access to residential rehabilitation.

Seb's story

Seb grew up in a small town in Poland and began experimenting with drugs from the age of 15. He started with cannabis and after a few weeks started taking much harder drugs. He experienced homelessness in several different countries including Poland, Germany, Belgium, and the UK. Seb moved to the UK to join his father five years ago and became homeless after two weeks.

It was in 2020 just before the pandemic that Seb first met Alia from Turning Point. Seb said it was the kindness and human connection that he fostered with Alia that helped him start his journey of change. He said that having one-to-one support and building a relationship with someone was key to his recovery.

"After that everything just sped up! If I hadn't had met Alia and met someone who understood me, I think I'd still be on the street now."

Seb talked about his journey to becoming a peer mentor at Turning Point.

"I met a Polish guy in the street, who didn't speak English. I helped him by taking him to the hospital, his GP appointments, to get help from the hostels, food etc. I showed him where the support was, and it felt amazing to help someone else!

When my key worker told me about the opportunity to be a peer mentor, I thought about how I felt when I gave back to others, and it motivated me to get on the course. I had some setbacks, for example on my first day of the course I got there and struggled to understand what people were saying, they were using technical language around drug use. English isn't my first language, so I struggled to understand. I didn't want to disappoint myself, so I came back again, and I finished the course.

Now I'm planning groups and activities specifically for the Polish community who don't speak English. I want to help them get the help they need. My ambition is to get a full-time job at Turning Point. I just really want to help other people!"

Expanding our mental health offerings from Rightsteps and livelife

Rightsteps and livelife have continued to reach more people in different markets and sectors over 2023-24. Rightsteps, Turning Point's Business-to-Business brand, continues to work with employers to support their workforce directly, as well as providing more specialist therapeutic interventions for Employee Assistance Providers (EAP) to meet their demand. This mainly involves provision of more bespoke types of therapy, such as Low-Intensity cognitive behavioural therapy (CBT) or High-Intensity CBT.

We have noticed significant demand from employers and organisations for our menopause-specific CBT. This includes a blended approach, using our online menopause-specific CBT content alongside therapist support. It also includes a purely therapist-led approach to manage menopausal symptoms, such as hot flushes, night sweats, anxiety, low mood, or sleep problems.

We have also seen increasing demand for our Mental Health First Aid Assurance service, where our therapists provide a reflective space for individuals and groups of trained Mental Health First Aiders (MHFA). Participants and employers have given us great feedback about the quality of this service and the value they receive. We have had several new contracts and our partnership with St John Ambulance, as a trainer of MHFA, is working well.

Rightsteps has started to provide business and executive coaching for several companies, using its permanently employed ILM Level 7 coaches. Rightsteps' therapy services renew over 90% of its contracts year-on-year. We regularly

on-board new customers, such as Vets for Pets. We also create commercial partnerships, such as with the insurer, QBE and with Health Assured, an Employee Assistance Programme (EAP).

Rightsteps' presence in the benevolent sector continues to grow with new benevolent organisations such as The Lighthouse Trust being contracted in 2023-24.

Rightsteps has provided therapy for Turning Point colleagues for the last eight years. Each year we provide therapy to between 8% and 10% of Turning Point's entire workforce. This is in addition to our EAP provision.

livelife, Turning Point's private pay therapy service, continues to attract new customers. livelife is building incrementally through repeat referrals, friend, and family recommendations and when Rightsteps therapy clients want to continue therapy with the same therapist when their quota of sessions runs out. livelife also continues to accept partner referrals from companies that want to provide access to a high-quality therapy service for their staff/members.

"I just want a normal life"

Caia's story

Caia is in treatment with the Herefordshire Recovery Service, and she has experienced a lot of ups and downs in her short life. Caia grew up with a mother who was dependent on drugs, and this led to Caia seeing drug use as a normal part of day-to-day life. She began self-harming, using many different drugs and became involved in unhealthy relationships.

"I don't like doing drugs, it's not fun, I do it to get away from that horrible feeling inside me."

In 2023, Caia took part in the Recovery Street Film Festival, a national competition telling the stories of people in recovery through the medium of film. These short films (under 3 minutes) help break down stigma and shine a light on the incredible effort that people in recovery make to achieve their goals, as well as the struggles they face and the skills they have developed to overcome barriers.

Out of a shortlist of 20 films from across the UK, Caia won 3rd place.

As part of her treatment with Turning Point, Caia was funded to attend an extended residential detox and rehab programme in a mother and baby unit while pregnant, which aimed to provide her with the best opportunity for her and her daughter.

In Caia's film, 'just want a normal life', she talks openly and bravely about her childhood, growing up with a mum who was struggling with drug use, the impact this trauma has on her experience of using drugs, and why rehab and having her daughter was a turning point in her life.

"My daughter has saved my life, even though she is not with me full time, I see her, and she comes out and gives me a big hug. I wouldn't be here if it weren't for her".

Caia continues to engage in treatment. She is having contact with her daughter and has managed to stop her illicit drug use, she is engaging with a range of professionals to access support and has recently talked about her ambitions to attend art college in the future, and we are excited to see what her creativity produces.

Strategic Goal #3

Prevent the escalation of need and reduce demand on the wider health and social care system

We take our role in the wider healthcare system very seriously with a focus on providing services that help to ease pressure on the system.

From achieving micro-elimination of Hepatitis C to expanding mental health services to reporting on hazardous drinking, we provide a range of effective interventions that prevent the escalation of need and reduce demand elsewhere in the wider health and social care system.

Our Safer Lives conference focussed on reducing drug deaths and our A Sobering Thought report made key recommendations about the routine delivery of free liver checks. We were proud to achieve the micro-elimination of Hepatitis C in Slough and Oxfordshire, enabling life extending treatment and saving lives. We expanded our mental health services with the opening of our Recovery Lounge in Manchester and launched a new training resource to increase awareness and understanding of co-existing substance use and mental health conditions.

Focussing on harm reduction

In November 2023, Turning Point returned to Birmingham for our second Safer Lives Conference. The event was bigger this year and we invited two hundred delegates from across England, Scotland, and Wales, including colleagues from across the substance use sector and representatives from the police, NHS providers and public health.

The theme for the event was 'Drug deaths are all of our business'. In the face of changing drug markets, with synthetic opioids and other contaminants entering the drug supply, we felt it was important to come together and explore the role we can all play in reducing drug deaths. Speakers from Turning Point and the wider sector presented on a range of topics including the current issue with synthetic opioids, the importance of increasing naloxone carriage, the experiences of those directly impacted by drug deaths and support for families and carers. Feedback from delegates described the event as insightful and informative with lots of relevant information to be shared and used to plan service delivery in local areas.

Throughout the year, a major part of the Turning Point's Safer Lives strategy is widening naloxone provision. In response to the issues with synthetic opioids, we have increased our focus on ensuring that anyone who may need to use a naloxone kit has one. Everyone we support who uses an opiate is now provided with two naloxone kits as standard. We also offer kits to family members and others who may witness an overdose. We have continued our work to raise awareness of naloxone across partner organisations and the wider community. Our staff have continued their excellent work providing training for external agencies including outreach and housing providers, homelessness and nursing teams, probation staff, Community Mental Health services, local Councillors and many other professionals and community organisations.

As a result of our Somerset and Leicester services working closely with their local police, officers in both forces now carry nasal naloxone.

We are committed to ensuring people using opiates who are not engaged with our services have naloxone. We have implemented peer to peer projects in our Westminster and Slough services which train people with lived and living experience of substance use to distribute naloxone within their own community. We will be implementing these 'Naloxone Community Champion' projects in all Turning Point services throughout 2024.

We gave out 30,000 naloxone kits in 2023. This is a 300% increase in the number of kits issued by Turning Point and a testimony to the many ways staff are working to ensure that naloxone is available when it is needed.

Releasing our A Sobering Thought report

In September 2023, a new report published by Turning Point revealed that harmful drinking costs the NHS over £1 billion per year. The report, titled A Sobering Thought, highlighted the devastating impact of alcohol-related harm and called for urgent action to address the issue.

One of the key recommendations made in the report is the routine availability of free liver checks, including at GP practices. These checks can identify individuals who are drinking at dangerous levels and detect liver disease before any physical symptoms develop. By implementing this measure, the report argues that prevention and early intervention can be improved.

The statistics presented in the report are alarming. Official figures show that in 2021, 9,641 people died from causes specifically related to alcohol. This is the highest number recorded and 7.4% higher than in 2020. Furthermore, deaths from liver disease alone have increased by 400% since the 1970s and account for the majority of alcohol-related deaths. Turning Point supports over 14,000 people annually for alcohol-related problems and has seen a rise in referrals for those with end-stage liver disease. This demonstrates the urgent need for wider availability of liver testing to reach individuals before their condition deteriorates, and to reduce the strain on the NHS.

The report suggests using FibroScan tests as a quick and painless method of detecting liver damage. These tests can be carried out by healthcare professionals and measure inflammation of the liver. Conducting such tests on a larger scale would enable treatment services to intervene earlier and potentially prevent serious illness.

In addition to liver testing, the report calls for a comprehensive national alcohol strategy. This strategy should include dedicated expertise within the wider healthcare system, covering areas such as mental health and primary care and not just community drug and alcohol treatment services.

To raise awareness and support hazardous drinkers, the report proposes a government health campaign. This campaign could provide a self-help tool accessible digitally, educating individuals about the negative impact of alcohol and assisting them in reducing or stopping their drinking habits.

"This report lays bare the unacceptably high levels of harm we are facing from alcohol, the costs of which reverberate throughout the NHS and the wider economy. This is felt the most in areas already suffering with the highest levels of deprivation. The broader commissioning of liver checks could help reach people who at higher risk of harm but not yet engaged in treatment."

Professor Sir Ian Gilmore, Chair of the Alcohol Health Alliance

Drug and alcohol recovery services in Oxfordshire and Slough achieve micro-elimination of Hepatitis C

Hepatitis C is a bloodborne virus that damages the liver. Over time, persistent infection can lead to cirrhosis, liver failure or cancer. Globally, Hepatitis C causes around 290,000 deaths and 1.5 million new infections each year. Injecting drug use (previous or current) continues to be the most important risk factor for Hepatitis C infection in the UK. The World Health Organization has set an aim of eliminating the virus as a major public health threat by 2030.

Deaths from Hepatitis C, including liver disease and cancer, have fallen by 35% since NHS England struck a five-year deal worth almost £1bn to buy antiviral drugs for thousands of patients in 2018. NHS England set micro-elimination targets to eliminate Hepatitis C as a major health concern in the UK by 2025. Micro-elimination of Hepatitis C is a strategy to

incrementally achieve national elimination through initiatives that eliminate Hepatitis C for defined segments of the population, such as within settings, geographic areas, sub-populations, and age cohorts.

The Turning Point services in Oxfordshire and Slough achieved micro-elimination by meeting three targets set out by the NHS. These targets were: 100% of people using the service were offered a Hepatitis C test; 90% of these people were then tested in the last 12 months; and 90% of people who were diagnosed with Hepatitis C have started treatment.

"We are incredibly proud to achieve Hep C micro-elimination in Oxfordshire ahead of the NHS England target of 2025. Our wonderful collaboration with the John Radcliffe Hepatology Dept and the Hepatitis C Trust has successfully treated over 250 people within drug treatment services, enabling life extending treatment, saving lives, and protecting communities in Oxfordshire."

Andy Symons, Senior Operations Manager, Turning Point Oxfordshire Roads to Recovery

"I have cleared my Hep C after being positive for the last 10 years which is great. My Turning Point worker Michael has been fantastic, I was given Hep C meds twice before but was too scared to take them. Michael gave me the confidence to take them, he came to my house every day to encourage me to stick at it and I am so pleased to be given the all the clear. It's changed my life."

Tim, Oxfordshire

Launching professional training to support people who have a co-existing or a co-occurring mental health condition or substance use condition

In June 2023, Turning Point launched a new training resource, designed to increase awareness and understanding of substance use and mental health. The initiative started with a donation from a mother whose daughter Joanna, an NHS nurse, lost her life after a long history of mental health illness and alcohol addiction.

The online course was designed by experienced specialists and is available for anyone to access for free, regardless of their level of knowledge. It has information and guidance on how to recognise and support people who have a co-existing or a co-occurring condition.

The Office for Health Improvement and Disparities revealed that nearly two thirds of adults (63%), starting treatment for substance use from 2020 to 2021, said they had a mental health need.

In 2002, the Department of Health reported that supporting those with both substance use and mental health issues, was one of the biggest problems frontline mental health services faced and highlighted that fragmented care leads to people falling between the cracks in services.

One of these people was Joanna, a specialist mental health nurse who worked for the NHS for 25 years. She was a politics graduate, a talented writer and ran three London Marathons for charitable causes.

However, since her teenage years, Joanna had suffered from bouts of mental illness, leading eventually to alcohol addiction. Joanna fought bravely to try and overcome her struggles with several hospital admissions and periods of rehab.

In 2019, she was given a place at a rehab facility, but following five successful months of a six-month programme, despite protesting her innocence, she was summarily discharged after being accused of 'illegally obtaining mind altering substances'. This was due to miscommunication of a medication prescription between the rehab facility and its designated GP surgery, which provided prescriptions to all the rehab patients.

With her mental health deteriorating, and still battling her addiction, Joanna visited an organisation which had helped her previously and was prescribed new medication.

Sadly, before the new medication could start to take effect, severely weakened by her long struggle, she died of alcohol poisoning in nearby sheltered accommodation.

"If this could happen to her, a highly qualified mental health professional, what hope is there for others?" said Joanna's mother, Helen.

"At the inquest, the document submitted by the hospital trust stated that although prior to Joanna's death they had been unable to fund dual diagnosis nurses, they were now employing two. I see this as my daughter's legacy, but it does not lessen the pain of losing her. I firmly believe that all NHS trusts should have this resource.

"Another failure was the chaotic and piecemeal approach to Joanna's condition. Vulnerable children with complex needs have a single key worker co-ordinating the support and care provided by various agencies. There is no such provision for vulnerable adults.

"Joanna was supported by some wonderful people such as A&E staff, who focused professionally on the immediate problem in front of them, but the lack of any joined-up thinking meant the severity and complexity of her situation was completely overlooked. At one point, after going missing for several days she was found with seven different hospital wrist bands yet, as these accumulated, no one thought to look at the bigger picture."

Since its launch, over 1,200 people have taken part in the online course.

Expanding our mental health support in Manchester

Opened as a 'crisis café' pilot project back in May 2021, our Recovery Lounge is now becoming well established in the referral pathway for mental health crisis services in Manchester. So far we have supported over 1,000 people. As well as taking self-referrals, any professional working in local statutory mental health teams can refer someone to us.

A significant new development over the past 12 months is working in partnership with Greater Manchester Police and Greater Manchester Mental Health NHS Trust to provide a genuine alternative option for local emergency services to divert people in mental distress away from busy and overstretched hospital A&E departments.

Located within a few minutes' walk of the city centre and very close to the inner ring road and other transport links, our Recovery Lounge is ideally situated for quick and easy access for anyone in Manchester to attend. We are open every day from late afternoon through to midnight. Visitors always get a friendly and supportive welcome from our culturally diverse staff team. They are given plenty of time to talk and 'offload', opportunities to learn some mental health coping skills, and a non-judgmental approach to finding solutions to problems that may feel overwhelming. This includes guidance on taking next steps, including safety planning and signposting to other services.

Some people will visit just once for support around a very specific issue that is causing them distress, but many now use our service as part of their ongoing support plan from month to month. They know they can phone us any afternoon and arrange to come in within a couple of hours to talk with friendly staff, feel listened to, and hopefully avert their crisis so that they can return home feeling safe.

"I'm extremely proud to be in such an important role"

Alex, Peer support worker

I love my job.

As Peer Support Worker, I am extremely lucky to meet incredible people every day, whom I support with practical issues such as housing, and emotional and mental issues, such as anxiety.

I started my career in mental health and substance use 10 years ago working for a supported housing scheme in Chippenham, and since then my working life has led me through work with the police, social services, schools, hospitals, mental health charities and organisations to Turning Point, where I now work as part of the Mental Health Treatment team.

My job means an awful lot to me. I have a lot of first-hand experience with my own mental health which has affected my life as a woman and as a mother, and this job means that every day I come to work I can support someone going through the same struggles I went through. I have the most amazing team behind me, they bring a wealth of experience, knowledge, insight, and empathy to me personally, which is hugely validating and makes my job that much more enjoyable.

I wouldn't trade my role for any other. Peer Support is crucial, especially within mental health and substance use, knowing someone has stood where you are now is something which cannot be found at university or in a textbook, and I'm extremely proud to be in such an important role.

Strategic Goal #4

Create enduring value for communities and society as a whole

In this section, we share examples of how we are creating enduring value for the communities we work in, as well as for wider society.

Our teams deliver real value to communities and society. This year saw our Chief Operating Officer give evidence to the Public Accounts Committee review into alcohol treatment services. We launched our Blue Light Together wellbeing platform to provide support for workers in the emergency services and set up our 5-step digital support for those affected by others' substance use.

Supporting the Blue Light Foundation and the wellbeing of the community

November 2023 saw the launch of the new Blue Light Together wellbeing platform developed by Rightsteps. Commissioned by The Blue Light Card Foundation with the support of The Royal Foundation, the platform supports the police, fire and ambulance services, plus other emergency responders such as mountain rescue and the Royal National Lifeboat Institution (RNLI). It provides access to wellbeing information, guidance, and support for those experiencing challenges in their lives, including families and friends, as well as information for those who manage people in the blue light community.

The Rightsteps team works alongside a range of partner agencies to develop and curate a suite of resources tailored to the community's needs. Working particularly closely with The Ambulance Staff Charity, The Firefighters Charity, and Police Care UK, the platform brings together existing resources in a single, easily navigable place that can help individuals find out more about a particular wellbeing need. In addition, bespoke content is developed with subject matter experts and people with lived experience to share stories and experiences, building a sense of community, and supporting

people so they feel less alone. Individuals who may be struggling to access the support they need are signposted to existing support available from our benevolent organisation partners and other sources.

Being responsive to need sits at the heart of the programme. Research with members of the blue light community, stakeholder groups and direct feedback from users informs the areas of need supported to make sure they encompass challenges directly related to the emergency services, such as vicarious trauma and post-traumatic stress disorder (PTSD). It also supports the wider wellbeing needs of particular groups, including women's health, sleep challenges, and transitioning from the services when careers come to an end.

Evidence to Public Accounts Committee Review into alcohol treatment services

Chief Operating Officer, Clare Taylor, attended an oral evidence session of the Public Accounts Committee in parliament as part of their Alcohol Inquiry. She answered questions from the committee about alcohol treatment services in her role as Vice Chair of Collective Voice, the umbrella group representing third sector drug and alcohol treatment providers. Professor Dame Carol Black, Independent Advisor to the Government on Drugs, and Professor Sir Ian Gilmore, Hepatologist and Chair of the Alcohol Health Alliance were also part of the session.

Following the publication of the report, Clare appeared on BBC Breakfast to talk about the need for the government to have a new alcohol strategy. Tammy, a peer mentor at our City and Hackney recovery service was also featured in the programme.

Launch of our 5-step online digital programme for those affected by others' substance use

Since 2010, we have been developing our reach to support family and friends affected by others' substance use. We recognise that harm reduction extends from the individual using substances to those closest to them and to their communities. We have increased both the number of Family Workers in services and our capacity to offer the 5-step intervention to affected others, both in groups and on an individual basis. Family Workers receive robust training and supervision from the psychology team.

International research tells us that many family members are reluctant to approach substance use services for support, due to stigma and often not knowing dedicated support exists. Our Head of Psychology and Consultant Clinical Psychologist have worked with the Addictions and the Family International Network (AFiNET) to produce a digital version of the 5-step intervention.

It is designed to be used in a flexible and self-guided way, drawing on the evidence base and empowering family members to make choices about coping strategies and increasing social support. The material is brought to life using a range of culturally and demographically diverse personas to engage interest and promote continued reflection and skills practice.

The 5-step digital intervention is easily accessed by family members through the Turning Point website. They are encouraged to complete the Family Members Questionnaire at the beginning and end of the intervention to establish changes in how they cope, their physical and psychological health and social support.

Since launch over a thousand people have registered to use the intervention and we have examined data on those who have completed a number of the stepped sessions. Data reveals a reduction in physical and psychological symptomatology and a reduced impact of the substance use on the family member. Feedback from those who have completed the programme suggests that people benefited from thinking more about their situation and having information about further sources of support.

We continue to learn from feedback and recognise that motivation to complete self-guided interventions can be difficult

to maintain. Further developments to encourage continued engagement will include motivational prompts in the form of emails and texts and building more content into the 'family and friends' section of the Turning Point website. Innovation and implementation of evidence-based approaches are central to our approach to supporting family and friends. Learning from those with lived experience has been an integral part of developing 5-step online and we will continue extending our support to reach people who may not want to, or be able to, engage with local substance use services.

Welcoming Lincolnshire Recovery Partnership and Horizon

We were delighted to welcome over 150 staff and nearly 2,000 people who are currently being supported to Turning Point on 1st April 2024, having been awarded a contract by Lincolnshire County Council for the delivery of Substance Use services for adults and young people across Lincolnshire.

The 'Lincolnshire Recovery Partnership' is delivered from six hubs and a range of satellite locations in partnership with Framework Housing (an East Midlands based charity) and Double Impact (a Lived Experience Recovery Organisation). The hubs are in Gainsborough, Lincoln, Grantham, Boston, Spalding, and Skegness. We will also take the service out into Lincolnshire's rural communities using clinical outreach vans and a recovery minibus. The partnership's investment in an innovative 'Recovery First Model' will see lived experience recovery fully integrated and visible in all aspects of service delivery, alongside a significant increase in the service's clinical capacity.

Lincolnshire's young people have named their part of the service 'Horizon'. It will work closely with schools as part of Lincolnshire's 'Stay Safe Partnership' which offers a one stop shop programme of staff support, education and assemblies aimed at helping young people improve decision making and wellbeing, as well as reducing risk-taking behaviour.

TP60 - 100th birthday letter from His Majesty the King

Tommy's story

Tommy was born on the 9th August 1923.

He lived at home with his parents until the start of World War II, when he went to live with his grandma. At the end of the war, he went to live at Westwood Hospital, Bradford. In 2006, at the age of 83, Tommy moved to Weaver Court, Bradford, which is a Turning Point supported living home for people with a learning disability. There he enjoyed a pint, a singalong, and going to church.

Being around people was always what appeared to make Tommy happiest. He was very sociable and always had a smile for everyone. He loved to look smart, always wearing a shirt and tie, and proudly sporting his watch. Even in his advanced years, Tommy clearly enjoyed to party and took great delight in having his friends and family with him for his 100th birthday celebrations.

Sadly, we lost Tommy late in 2023, just a few months after he'd celebrated his 100th birthday.

When life expectancy for men with a learning disability is just 66, Tommy will always be an inspiration to us.
People with learning disabilities experience many health and social care inequalities and have worse physical and mental health than people without a learning disability. Compared to the general population, they are 3 to 4 times as likely to die from an avoidable medical cause of death. And most of the avoidable deaths in people with a learning disability are because timely and effective treatment is not given.

Such inequalities are both unfair and avoidable.

There are many factors that lead to such inequalities. Lack of knowledge and awareness of the issues and the importance of person-centred support among general clinical staff are key contributors.

Failure to recognise that a person with a learning disability is unwell also influences the quality-of-care people with a learning disability receive. While anxiety or a lack of confidence for people with a learning disability and the poor employment of reasonable adjustments can also result in poor care – or even no care at all.

Many people with a learning disability also have considerable physical and mental health conditions and are at increased risk of developing chronic conditions from both genetic and lifestyle factors. Lack of access to healthcare results in conditions worsening, including problems associated with being over- or under-weight, epilepsy, mental health, dementia, and respiratory and heart conditions.

We are committed to supporting people to lead the healthiest and most enriching lives they can, increasing their health, life chances and quality of life.

The Turning Point Approach

Involvement and engagement

Our approach to involvement

Involvement is key to ensuring the high quality of services we provide. This year we have evolved our person-centred approach by launching our involvement strategy which aims to involve all our people in shaping and improving our services, and to embed the lived experiences of the people we support in central activities and decision making. By working together across all we do, and enabling voices to be heard and have impact, we learn and grow, and the care and support we provide becomes the best it can be.

Evolving our person-centred approach

Ensuring that the people we support are truly empowered in their own support, and that their voices impact all we do at Turning Point, continues to be a priority for us.

We launched a new involvement strategy this year and have set our ambitions high: to involve all our services in shaping and improving the support we provide, whilst making sure our central activities and decision-making are also guided by the lived and living experience of people we support. We will strengthen our involvement with the people we support using co-production principles to achieve true and equal collaboration with them.

Colleagues have risen to this challenge, developing plans and initiatives to strengthen involvement already happening and try new approaches. To support this, we launched an involvement hub, a microsite of tools and resources to help plan and deliver high-quality involvement and co-production. The hub also showcases examples of great involvement from across Turning Point such as case studies where service user voices have enhanced person-centred support and improved quality. This helps other services learn from good practice and inspires them to try doing something similar.

All our services now have a colleague responsible for driving involvement within their service. Our central support around this has increased this year through the growth of our colleague involvement networks. These allow skills and knowledge development around involvement, as well as peer support, so our leads have the tools and confidence they need to continue embedding a culture of involvement and co-production in every aspect of their service.

Our involvement networks of people we support are also growing. These groups provide the chance for individuals from services across the country to come together to feed in their expertise by experience and influence the national picture.

The National Service User Council is our network of people with experience of our substance use services. We collaborated with them on a range of initiatives this year. Our Speaking without Stigma project was developed in collaboration with the group, guided by Council members' understanding of stigmatising words and phrases and the impact these can have when living with challenging drug and alcohol use, and alternative, more inclusive language options. The group has also raised its voice outside of Turning Point, contributing to our submissions on national consultations and strengthening our organisational positions on national drug and alcohol policy.

Our Learning Disability People's Network, a new forum of people from our learning disability services, was formed this year. It is beginning to have an impactful voice. Members have been involved in important work including a partnership project with Learning Disability England to update our do not attempt cardiopulmonary resuscitation (DNACPR) support pack. The resource was originally developed during the Covid-19 pandemic to help people with a learning disability and their families understand DNACPR and challenge them if they were being wrongly applied. This year we held workshops with people we support, their loved ones and professional advocates to review and redesign the materials. We co-developed the content and format of the refreshed materials, so they are as accessible and useful as they can be. The

pack is undoubtedly a higher quality resource because of this collaboration.

The role of Lived Experience in medical training

In 2023, our Drug and Alcohol Wellbeing Service (DAWS) in London developed a 90-minute, interactive workshop delivered by people with lived experience for trainee medics and paramedics. It is designed by service users to educate trainees about substance use and dependency, so the next generation of healthcare professionals is well informed. The sessions are provided to students at University College London (UCL) and St George's hospital medical schools.

Originating in 2015, this partnership was established to enhance medical students' understanding of drug and alcohol dependency which features minimally within the medical training curriculum.

The first part of the workshop is presentation-based and outlines the support available at DAWS. Then two or three service users share their stories to give a lived experience perspective. There is then a Q&A opportunity for students to ask presenters about their experience.

Presentations were originally made by the Service User Involvement Co-ordinator, but the training is now fully coordinated and delivered by peers. Peers include those in recovery, family, and carers, some of whom are Peer Mentors.

The workshops are delivered collaboratively and everyone who takes part has the freedom to tell their personal story in their own way, through their own presenting style.

The training session is delivered to year five medical students at UCL medical school as part of a module provided by the division of psychiatry. At St George's the training is delivered for year two paramedics. It has been re-commissioned over several years and generated positive feedback from participants, via a feedback survey and through the course directors.

The service users involved in the presentations find their involvement reinforces and supports their own recovery. As the initiative is now completely peer-led from coordination through to delivery, there is significant empowerment and ownership of the workshops. Peers feel they have a real impact on the understanding medics of the future will have around the challenges and factors that can influence someone's experiences of drugs and alcohol.

Peers and service user reps involved feel valued and recognised through the recommissioning of this workshop. It is a real confidence-boost for everyone and shows the sessions are having an impact on the medical students. Those involved feel their voices are not only valued by Turning Point, but outside too, and will inform future practice.

Launching our Easy Read health and wellbeing handbook for people with a learning disability

In June, we launched a new version of the health and wellbeing handbook, including new Easy Read versions, aimed at empowering people with learning disabilities to make informed choices about their health. The handbook contains information and practical tips on healthy lifestyles to staying safe, emotional health, physical health, sexual health, and relationships.

The resource, which is available as a hard copy as well as a digital version, has been developed collaboratively with colleagues from across Turning Point, bringing together expertise in the areas of drugs, alcohol, mental health, sexual health, healthy lifestyles, and learning disability to develop a tool which can be used across services.

It is also being used as a resource to support the health action plan, which is a personal plan to stay healthy, developed by the person with a learning disability with their practitioner.

Whilst the health action plan has an official annual review between practitioner and service user, Turning Point support staff have a monthly review with service users to give them short-term goals related to their health and wellbeing. These goals are often set by looking through and discussing information provided in the health and wellbeing handbook.

Christine, who is supported by Turning Point's learning disability service in Bradford, has been using the handbook to understand her own health and wellbeing. She said: *"I think it's good. If people can't read, it will be more suitable for them because of the pictures. If they want to find out more, staff can help. It gives good talking points about my health. The staff encourage me to talk about my health, learn about what is going right and what might not be going so well. I can use the handbook and the staff's advice to work on improving my health and wellbeing."*

People with a learning disability have poorer physical and mental health than people without a learning disability, and they die significantly earlier than the general population from preventable causes of death, according to the National Institute for Health and Care Excellence (NICE).

The life expectancy of women with a learning disability is 27 years less than the average population. For men with a learning disability, it's 23 years less. NICE add that many people with a learning disability have a lifestyle which isn't as healthy as it could be.

Supporting Equity, Diversity, and Inclusion

At Turning Point, we embrace diversity because it matters; it improves decision making, enables us to co-create better working environments, delivers better outcomes and supports growth and innovation. This year, we have continued to promote Equity, Diversity, and Inclusion (EDI) through a range of different activities, a few of which are highlighted below.

We have been collaborating with Inclusive Employers, a leading EDI organisation, who have supported us to look at how we can be as inclusive as possible. Inclusive Employers facilitated some sessions with our board members to discuss a range of EDI topics. These sessions were illuminating, fostered some candid conversations, and have helped shape our thinking.

Our commitment extends beyond dialogue. We undertook the Inclusive Employers Foundation Assessment, evaluating our practices across dimensions like leadership commitment, policies, workplace culture, recruitment, and learning. This assessment has helped guide our journey towards a more inclusive workplace, through helping to shape our EDI strategy.

To amplify diverse voices, we have appointed senior sponsors for our Diversity Networks. The sponsors are there to listen to the network, raise their profile and support the network to drive their agenda. Our networks have continued their great work in supporting inclusion across Turning Point.

The Autism and Neurodiverse Allies Forum has supported our Public Health and Substance Use services to complete the Autism Friendly Standards. This has included creating a network of allies across the services and creating a tag system that helps recovery workers quickly make reasonable adjustments for the people they support.

The LGBTQI+ Network has supported sessions with our Operating Board to discuss gender and sexual identity. They have also continued to support several local Pride events within the communities of our services. The network covers a wide variety of different topics each month. This has included a trans person we support sharing her experience of recovery. The BPOC Network offered up a safe conversation space for black women during Black History Month. This created an opportunity for black women to come together and talk about their shared experiences.

The Menopause Network have created an area within our learning platform to help raise awareness of menopause and give support to colleagues and managers. They have also contributed to the Blue Light Together dedicated page on women's health.

Our Culture

In a challenging year for the health and social care sector, we continue to successfully recruit, retain and engage colleagues. We believe this is down to our culture of empowering, rewarding, and developing our people and those we support. We care about our people, and we want to support them to thrive and to feel inspired in roles that offer exciting career opportunities. Finding, attracting, developing, and keeping the right people with the right values, behaviours and skills makes Turning Point the organisation it is.

Improving our colleague experience

Each day, Turning Point colleagues work alongside people seeking our support, focusing on their needs and wishes. They lean on their knowledge and skills, bring their diverse backgrounds and experiences, and build meaningful relationships in support of our clients' wellbeing. Our colleagues are central to our ability to provide quality services. With this in mind, we are committed to continuously improving the colleague experience.

We routinely listen to feedback, promote open communication, and take our complex responsibilities as an employer in the modern health and social care system very seriously. From our action group on the cost-of-living crisis to our routine national employee voice forums, we create space to focus on the issues that affect our teams. We continue to invest time in optimising our communication channels. We support our cultural development through shared learning and curiosity, colleague voice and inclusion, leadership visibility and clear direction.

By measuring the performance of our channels, we continuously evaluate their impact on the engagement of our teams. Our 'Spark' intranet stories were read over 15,000 times in 2023-24 and Our All Company Viva Engage community recorded an average of 2,281 engagements each week. Views of our Chief Executive's monthly video update more than doubled on the prior year, and we continued to support multiple awareness campaigns on topics of deep personal importance to our colleagues.

One key measure of our progress is our annual colleague engagement survey. In 2023, we recorded a 77% organisation-wide engagement rate, a 2% improvement from 2022.

Top-scoring engagement themes in 2023:

1. Strategic alignment (91%)
2. Line manager relationships (85%)
3. Motivation (81%)
4. Inclusion (81%)
5. Strategic direction (80%)

We saw a 7% improvement in colleagues' perception of competitive pay compared to other similar organisations, and a 5% improvement in colleagues feeling they are rewarded fairly in comparison to others in organisations doing similar work. Colleagues also reported a 5% improvement in feeling that their contribution is valued at Turning Point.
Survey results have been shared with every manager in Turning Point, enabling them to create local action plans based on the responses of their colleagues. We promote a co-production approach to action planning and encourage shared accountability. Plans are then monitored at a national level to ensure momentum and provide additional support where required.

Against a backdrop of continued cost of living pressure, we are committed to understanding our teams and supporting them as much as possible through diverse pay and reward mechanisms. We recognise their contributions through our Inspired by Possibility awards scheme.

We are greatly encouraged by another year of progress in colleague engagement and have a keen focus on further improvement.

Recognition

Our Inspired by Possibility award scheme aims to recognise the achievements of our contracted employees, peer mentors and volunteers, and the people we support. Nominations are designed to shine the spotlight on those who have inspired others, and colleagues who have demonstrably put our values into action. We celebrate each group with a virtual celebration which is open for all colleagues to join online and a recognition lunch for winners hosted by senior leaders.

With six recognition events each year, and nominations always open, there are lots of opportunities to celebrate our people. Each year, recipients of Inspired by Possibility awards tell us how special the recognition made them feel. 475 nominations were submitted in 2023-24 across our three categories. We would love you to hear some of our winners' stories:

Julie, support worker in Learning Disabilities: Julie, you're chosen in this year's awards for being a motivated, enthusiastic member of the team who doesn't shy away from hard work and brings a natural zest for life into all you do.

You'll always push for new and exciting experiences for the people you support, through listening to and respecting what they have to say – and you'll encourage others to follow your lead and become involved.

Recently, you became keyworker to a lady who arrived in difficult circumstances and, not through choice, you responded to this challenge in a proactive and positive way, creating a support network to suit her needs and finding ways to enrich her life while continuing to listen.

Many are satisfied once something is 'good enough', but for you, it doesn't stop there because often 'good enough' simply isn't enough.

Victoria, team leader in Mental Health: Victoria, you were chosen in this year's awards for being wonderful, caring and resilient, and never shying away from challenge.

When you were promoted to Team Leader, you were a constant source of support for the team, facing whatever was thrown at you with a calm, grounded approach and a smile.

The team experienced a very challenging time when a resident relapsed and was admitted to an acute ward. You were responsive to this ever-changing situation, keeping everyone safe and making yourself available day and night.
And when the service took a direct monitoring call with the CQC, you performed brilliantly, despite having no prior experience of this. You have become a strong and confident leader in a short amount of time, and displayed enormous commitment to the service, the team and the people you support.

Dilesh, advanced substance use practitioner: Dilesh, you were chosen in this year's awards for your community engagement work that has helped increase our reach to diverse communities.

You have worked alongside, and together with, faith groups and community leaders in Leicester to bring expertise and knowledge together and ultimately support Turning Point's engagement efforts, enabling us to develop our approach and reach more people.

Through partnerships with local organisations, your efforts have been instrumental to improve our reach and engagement with some of Leicester's more diverse communities.

You have developed expertise in working with those who are using poppy seeds and have managed to engage a significant number of them into treatment. On the back of this hard work, a Diverse Communities Team has been set up to which you have become Team Leader.

This means we can continue to increase our reach to diverse communities, and it all began with your personal approach to community engagement.

Clare, clinical lead in talking therapies: Clare, you were chosen in this year's awards for being an inspiration to everyone at the service, many of whom consider you 'a superwoman'.

Your door is always open to your colleagues, and you always take the time to check in with people and ask how they are as their friend, despite having such a heavy workload.

You consistently demonstrate a strong commitment to the values of Turning Point: communicating clearly, empowering colleagues, showing compassion for the people we support, striving for excellence, embracing change and fostering a culture of innovation across the whole service.

The level of commitment and passion you show on a daily basis is nothing short of outstanding.

Inspired by the people we work alongside every day

This has been another very challenging year in the sector in relation to attraction and retention. However, Turning Point has once again bucked the trend of high rates of attrition, welcoming and retaining more colleagues and helping them to thrive.

Our roles offer exciting and rewarding career opportunities to all who join us, and our focus remains on supporting our colleagues to get what they want and need from their careers. Many colleagues apply to Turning Point because of their passion for supporting others and their community. We aim to meet their ambition with a solid and exciting career, rewarded fairly, and with multiple opportunities for the future.

We offer a wide range of benefits to all colleagues including financial, emotional, and physical support. We aim to continuously evolve and improve on these benefits fully recognising the multiple challenges that many of us face in our lives. Colleague wellbeing is important to us. We are delighted that our ongoing efforts have been reflected in our recent engagement survey results.

We collectively create a workplace environment with our colleagues, focusing on the design of 'good work', including open, authentic, and inspiring leadership, a sense of psychological safety, and cohesive, active teams that work well together with common goals and aims.

We are proud that our colleague retention is significantly better than the industry average, meaning more people are choosing to join us and stay with us for longer.

How we approach workforce shortages

We continue to invest in our people, and we endeavour to enable them to develop and thrive in their careers at Turning Point whilst fully recognising some tough market pressures. We focus on providing fair and competitive rates of pay alongside other development opportunities and ways to show our appreciation and recognition of their hard work and commitment.

Recruiting the very best talent is important to us and we do this through building strong relationships in local communities and with universities, attending job fairs, leaflet drops, liaising with job centres, and local advertising.

We continue to leverage technology to enable us to reach more into communities and offer rewarding roles to more people. We are working with Inclusive Employers, demonstrating our continued commitment to Equity, Diversity and Inclusion.

We regularly refresh our attraction campaigns, adjusting them to different roles and different audiences, showcasing the great opportunities we have and displaying our ever evolving and exciting Employee Value Proposition.

Our voluntary colleague turnover reached 21.7% by the end of 2023-24, 6% lower than the sector average of 28.3% (Skills for Care). In this period, we continued to see fewer colleagues leaving Turning Point than the previous year.

We are increasing our apprenticeships, sponsorships, and traineeships as well as engaging people to work for us in the way that works best for them be that through typical working patterns or more flexible / different hours and ways of working.

We have made potential career pathway options clearer to colleagues, enabling them to understand how they can progress with us through a range of routes.

Our temporary workforce is a key part of our colleague mix and adopting different approaches to working relationships enables individuals to have the flexibility they need in the work they do. We continue to build a rich variety of different ways to engage with us as a colleague and see significant mutual benefit in this approach.

Keeping people healthy, well and in work

We have a clear and ambitious Health and Wellbeing strategy with strong executive sponsorship. The strategy harnesses the broad range of skills and capabilities Turning Point's colleagues have to develop interventions for the people we support, as well as for colleagues. This includes smoking cessation, menopause support, and stress at work.

We are focusing increasingly on the colleague and manager experience and reviewing how work gets done, how people are supported, and making sure colleagues have the right tools at the right time to support their health and wellbeing.

We have further developed our wide range of health and wellbeing offerings to our colleagues and have introduced:

- myStrength™ App which provides tools for emotional health in addition to the support which is already available via our Rightsteps wellbeing service and our Employee Assistance Programme (EAP).
- Toothfairy™ App which is the first UK regulated smart dental app which provides 24/7 unlimited instant access to advice, guidance, and prescriptions, as well as discounts on cosmetic dentistry all from the comfort of home.
- A Care Concierge service for members of our Group Pension Plan which provides free expert guidance on care and support options that might be available for colleagues supporting or caring for older family members or friends. We know more of our colleagues are becoming carers and there is a greater ageing population.

Our MyBenefits platform remains popular, and colleagues are making great use of the benefits we have. This includes Financial Education; Blue Light Card; Discounts Marketplace; Mobile discounts; Life Cover; Pensions; and Refer a Friend Bonus Scheme. We also offer Salary Finance, where colleagues can 'Save as you earn', access advanced pay and affordable loans, in addition to accessing webinars, guides and other resources to support financial wellbeing.

Through our Employee Assistance Programme (EAP), colleagues and family members have access to 24/7 Online GP, Second Medical Opinion, Diet Support and Fitness Plans, Smoking Cessation, Legal guidance and much more, to support them at their time of need.

We often receive feedback from colleagues about how our benefits are having a positive impact on them, whether it is making good use of our employee assistance programme or through our own Rightsteps and livelife products which each have free or discounted access to therapy.

We have again delivered a successful seasonal flu vaccine scheme which is open to all our colleagues. This runs alongside NHS schemes which give access to vaccinations to certain groups of individuals, and this year allowed for a Covid vaccine for those who wanted it.

We continue to support our group of Mental Health First Aiders (MHFA), who recognise and support colleagues experiencing symptoms of mental ill-health.

In October 2023, we saw a 4% increase in respondents to our colleague engagement survey stating that Turning Point gives a high priority to colleague wellbeing.

Learning is a lifelong journey

At Turning Point we believe learning is a lifelong journey. Whether our colleagues are experienced professionals or just starting their careers, we have continued to develop a wide range of learning and development opportunities to help everyone thrive and make a positive impact.

This year we refreshed our induction to give everyone a great start to their new role. Our My New Role area takes a new starter through everything they need to know in their first few months. All our new starters can come along to a Welcome to Turning Point session where they hear more about our vision and values and the breadth of work we do. They also get to meet and question our leadership team.

We recognise the need to develop great digital skills, so this year we launched our Explore Digital pages. Here colleagues can access a wealth of learning and support, whether that is assessing their own digital skills and starting their digital journey or just getting training on Excel.

The Peer Mentor programme has been a key part of our Substance Use provision for the past ten years. This year, we expanded our provision of the Peer Mentor programme into Mental Health services and are currently coming to the end of our second pilot cohort of the Level 3 Substance Use qualification with a view to rolling this out across the organisation.

Our leaders and managers have also had a refreshed learning offer. We developed Aspire to support colleagues who want to step up into a management role to get the skills they need so they are ready to make this leap. Our Inspire programme encourages existing leaders to continually reflect and develop their leadership skills.

To help our colleagues deal with the changes happening across the sector, we have developed a suite of learning and support that helps them prepare themselves for change, and leaders to enable change across Turning Point.

Recognition for the nursing team at Turning Point Rochdale and Oldham

In April 2023, the nursing team at Turning Point Rochdale and Oldham (ROAR) received the 'Public Health Nursing Team of The Year' in Turning Point's national nursing awards. They were also shortlisted in the Public Health Nursing category for the national Nursing Times Awards in October 2023.

Nurses at ROAR not only provide day-to-day support to service users, but they also find innovative ways to reach people struggling with drug and alcohol use. Within the service, they have increased access to screening for blood borne viruses (BBV) and deliver Hepatitis B vaccinations and Hepatitis C treatment.

Some of their out-of-service work includes piloting outreach into homeless hostels, delivering mobile Hepatitis C testing and treatment in the community, introducing novel opiate substitute therapies, and providing system leadership on services for people with complex needs.

A recent audit of randomised cases identified that over 90% of ROAR's clients had either current or past suicidal thoughts. Over 80% of these clients had an unmet mental health need.

As a result, a new specialist nurse post was created to foster closer links with local mental health providers. The specialist nurse works with Turning Point clients providing mental health interventions. As well as creating a 'team around a client' approach and providing a system leadership role, the role drives quality improvements.

The team's ambitions for the future include achieving micro-elimination of Hepatitis C, extending the hostel outreach programme to increase the numbers in treatment and expanding health screening, such as Fibroscan for liver ailments to reduce the pressure on primary care.

David a male 58-year-old client at ROAR said the nurses had helped him accept help for his substance use.

"I have had substance use issues for over 15 years. I've used illicit substances like heroin, crack cocaine, diazepam and pregabalin. I am currently homeless after being evicted from my previous residence. I haven't liked engaging with services in the past. I have seen the nurses at Turning Point for reviews of my medicine and health check. I've seen them both in the service and hostels as well.

Their mental health nurse also completed a safety plan with me because I was having suicidal thoughts. They have put a plan in place for ongoing support and will talk to my GP if my mood deteriorates. The relationship I have with the nurses means I will go and talk to them about any physical health concerns. They talk to my GP and come with me to appointments when I need them."

Delivering Social Value

Social value is the added value services can deliver to the economy, community life, the health of the local population and the environment. It is an integral part of everything we do and increasingly important to Commissioners, who are now more than ever taking social value into account when making their procurement decisions.

Our commitment to being 'inspired by possibility' and improving the health and wellbeing of the people we support, the communities we work in and our teams, is what makes this so important to us.

A year of innovation

During 2023, our Community Innovation Fund helped inspire the people we support, staff, local organisations, and residents to come together to create projects that improve wellbeing, reduce isolation, and have a positive lasting legacy in our services and the wider community.

We had 35 applications to the fund over two rounds of funding, one in spring and one in autumn. Our rotating panel, made up of people we support, staff and previous recipients, had the difficult challenge of shortlisting applications for the 15 projects we can fund.

We have continued following these projects to offer support and share their successes throughout our organisation. The applicants to the fund have demonstrated an ability to co-produce with community stakeholders, resilience and determination to overcome challenges and a dedication to the work they do. At the start of 2024 over 400 people had

benefitted from the projects either by being part of the development and delivery or through participation. Examples of projects we have funded include;

- Storytelling Dads – Chapter 82
- Open Mic project – Suffolk Sober Spaces
- Counselling for Everyone – Turning Point Learning Disability Services in Salford and Bolton
- Visit from Epiphany – Turning Point West Riding House
- Notts Potts – Alfred Minto House
- Upskilling Peer Mentors – Turning Point Hertfordshire Complex Needs
- Sensory Gardens – Turning Point Aldbanks and Avondale
- 1 in 5 Film project – John Taylor
- Fitness for the Recovery Community – Be Sober
- A year of activities – Turning Point Angel Lace and Beacon Lodge
- Summer House project – Alfred Deller Court
- Community Garden project – Turning Point Crisis Point
- Jammin Point – Beaumont House
- Filming project – Suffolk Sober Spaces

Visit from Epiphany

West Riding House in Bradford provides 24-hour support for adults with learning disabilities giving them the necessary support and encouragement to enable them to live happy and fulfilled lives.

This project supported a group of musicians to provide improvised music and individual sound portraits for residents and local community members over two events during the year.

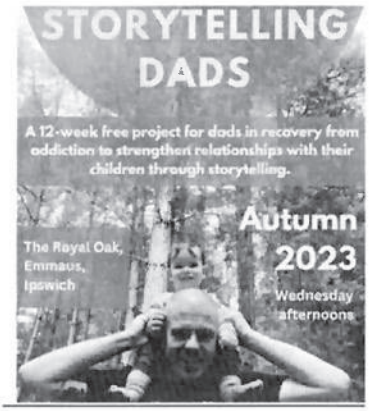
Residents and community members came together to develop the project which was attended by 44 people. Feedback included: "I was filled with joy" and "It was so powerful". In terms of response, 96% of attendants who attended and completed the feedback form showed a positive response.

Sensory Garden

Aldbank service in Dunstable is a home that provides the transition or the next step for people to become more independent and to be able to live in their community. They applied to the Innovation fund to create an interactive multipurpose sensory garden for their residents.

19 people have supported the development of the garden, including staff, people we support and their families. Feedback from the project manager was that "The garden project has encouraged people we support to focus on something to get up for in the morning...."

Storytelling Dads – Chapter 82



Chapter 82 are a non-profit community interest company who applied to the Innovation fund for their Storytelling Dads project. It was aimed at Dads in recovery from drug and alcohol use and supported them to connect with their children through the art of storytelling.

Eight Dads engaged in the project over a 12-week period. Feedback included: "I find the Storytelling Dads group has become an important part of my week'" and "I know when I come here I can share anything that's on my mind".

We will continue our search for the next round of Innovation fund projects with decision panels sitting in April and September 2024.

Continued investment in apprenticeships

In 2023 we had a lot to celebrate after our first National Apprenticeship Week. We have continued to support colleagues through their apprenticeship with:

We developed our Apprenticeship model ***Growth, Equity, Develop and Educate & Engage.*** These four pillars will develop our programme over the next three years, with each year focusing on pillars and how they relate to wider workstreams. In 2023, we focused on **Growth and Develop** but we did not forget the other pillars and continued to develop our Equity and Educate & Engage pillars throughout the year.

Growth

The programme grew in 2023 from 13 to 26 apprenticeship standards and aligned the apprenticeships to our career and job role mapping to provide colleagues with career progression. This includes our new leadership programmes, Aspire and Inspire, for future and existing leaders and managers across Turning Point. We added Health to our apprenticeship programme. We have begun to look at our clinical apprenticeships and introduced a level 3 Senior Healthcare Worker apprenticeship for our HCAs and level 5 Nurse Associates who want to start their journey into nursing. We grew our Leadership programme by adding coaching and launched our first cohort in October 2023.

Equity

Throughout the development of our apprenticeship programme, we have threaded EDI into the programme. As no two people are the same, our programme is not the same for everyone. We have worked with our Diversity Networks to develop an inspiring person-centred programme that challenges the barriers colleagues may face.
Our apprenticeship programme also aims to support under-represented groups to gain more visibility in different industries by removing barriers to enable access to qualifications. Our Rising Star Award Winner 2024, Vicky is completing their level 6 Digital and Technology Solution Professional within our IMT team which supports our work in STEM (Science, Technology, Engineering and Mathematics).

Develop

In 2023, we launched our one-stop-shop for apprenticeships. It brings all our information together on our Learning Management System (LMS) under Explore Apprenticeships. This allows colleagues to research apprenticeships and our ever-growing apprenticeship programme.

We piloted a peer-to-peer apprenticeship community in October 2023 for our level 5 Coaching apprentices and level 7 Clinical Associate in Psychology apprentices with subject matter experts and mentors. This has enabled:

- Peer to peer learning and support;
- Access to subject matter experts;
- Health and wellbeing support;
- Access to learning resources;
- Opportunities to collaborate;

- Networking with colleagues;
- Quality checks ins; and
- Innovation.

As part of our approach to the innovation of apprenticeships, we worked with apprenticeship providers to develop a multi-disciplinary apprenticeship that covers all the core markets where we have representation: learning disabilities, public health, substance use and mental health. This apprenticeship allows an apprentice to work in each market during the apprenticeship to identify their preferred market. The apprenticeship has two levels apprentices could complete to support their development.

Trailblazers

We are part of the trailblazer group for two apprenticeship standards. This allows us to work collaboratively with organisations in or outside health and social care, and to develop the apprenticeship for current times, sharing our 60 years of knowledge and experience to support the future of these standards. The two apprenticeship standards are:

- Level 3 Team Leader/ Supervisor
- Level 5 Operations/Department manager

Colleagues in Nottingham supported with the development of the new Peer Worker apprenticeship developed by Skills for Health which recognises lived experience within mental health and substance use.

Educate & Engage

We continued to engage with colleagues and managers by putting on 23 spotlight events to share information about apprenticeships and showcase specific apprenticeship standards.

Turning Point's apprenticeship programme was featured in Jobs & Careers Magazine over the summer. The article looked at our programme and how we support colleagues' ongoing development and performance.

In February, we launched our National Apprenticeship week with our second virtual apprenticeship graduation and Star Awards. We held events throughout February to give colleagues the opportunity to attend and engage with training providers. We were delighted to welcome 110 colleagues to our events.

Our Star Award winners

- Apprentices Star of the Year – Kirsty.
- Manager Star Award – Katie and Sophie.
- Rising Star of the Year – Vicky.

13 colleagues completed their apprenticeship and attended the graduation ceremony. Colleagues completed apprenticeships in Care, Leadership, Psychological Wellbeing Practitioner from level 2 (equivalent to GCSE) to level 6, (equivalent to a degree).

Congratulations to Alona, Felista, Jonathan, Jonida, Jason, Kirsty, Lakhwinder, Carol, Emily, Kelly, Lorna, Kristy, and Rosie!

Risk management

The company operates in a business with significant risks. The people we support can have mental health conditions and learning disabilities requiring intensive support, or substance dependency requiring clinical prescribing of medicines.

Principal risk or uncertainty	Mitigation & Controls
Financial risk: Possible loss of contract income due to highly competitive operational environment.	Monitoring of cost base and exploring other income opportunities. Monitoring of pipeline for new contract opportunities to replace any lost income. Investment in cost control measures and robust financial monitoring. Regular assessment and monitoring of the quality of service and performance.
Operational risk: By the very nature of the contracts undertaken the people supported through those service contracts are often adults at risk of self-harm, injury, abuse and even death.	Investment in robust governance frameworks, policies and procedures (including health & safety) that meet or exceed legal and regulatory requirements. Comprehensive risk management, incident reporting and monitoring systems.
Cyber Security: Increasing dependency on technology systems gives rise to cyber risk comprising the risk of financial loss, disruption to business operations or potential damage to the reputation of the organisation from a failure of information technology systems. **Information security:** Increasing reliance on data, information held in systems gives rise to information security risk leading to potential Data Protection Act breaches and harm to data subjects as well as potential damage to the reputation of the organisation.	Maintaining a robust Information Security Management System certified to the ISO27001 standard and Cyber Essentials Plus.

Strategic: Changes in government policy, continuing public sector funding cuts in a challenging economic trading environment.	PESTLE analysis Commitment to the principles of emergent strategy, being agile and responsive to market risks and opportunities.
People: Our people are our most important asset and the primary means through which we are able to add value to the lives of the people we support. Within a low margin business and increasingly competitive market, this presents risks around recruitment, retention and colleagues development.	Benchmarking our pay and benefits across the sector. Continually developing appropriate recognition and development opportunities for colleagues. Succession planning and talent mapping for critical roles. Recruitment and attraction strategy aligned with outcomes of talent management. Ongoing market reviews to ensure local pay is appropriate for geography and roles.

Emerging Risks

The Operating Board considers long term trends in the health and social care sector that could present both risk and opportunity for the company. Any new emerging risks identified by the management are considered and acted on as appropriate.

Internal Controls Assurance

The board recognises that no system of internal control can provide absolute assurance or eliminate all risk. The system of internal controls is designed to manage risk to an acceptable level and to provide reasonable assurance that key business goals and expected strategic outcomes will be achieved.

The board confirms that the process for identifying, evaluating and managing the significant risks faced by the company is on-going, has been in place for the whole of the financial year and up to the date of approval of the annual financial statements, and is regularly reviewed by the board.

The company adopts a "three lines of assurance" model for risk management. The board has reviewed the effectiveness of the system of internal controls in existence for the year ended March 2024 and through to the date of approval of these accounts. No significant weaknesses were found in the internal controls that resulted in material losses, contingencies or uncertainties that required disclosure in the financial statements or in the auditor's report on the financial statements.

Directors' Report

Chair's introduction

The Turning Point Board of Directors presents their annual report and accounts for the year ending 31 March 2024.

The board adopted the Wates Corporate Governance Principles for large private companies in April 2019 as the governance framework for the company. The table on page 58 summarises how we have applied the Wates Principles.

The board has ensured with management that the views of the people we support, the communities in which they live, employees, and our suppliers drive the work of the board and the decisions that it makes.

The board was provided with an inspirational account of the experiences of some of the people we support at its Away Day in November 2023.

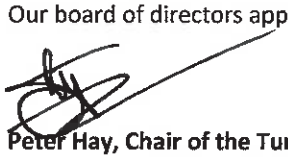
The Directors' Report sets out the composition of board of directors and the Operating Board as well as our corporate governance arrangements, processes and activities throughout the year for the board and the committees.

We have continued to strengthen our Board through the appointment of Dawn Kenson who joined the Board in January 2023 and the re-appointment of Christian Van Stolk in January 2024, and Victoria Tzortziou Brown and Nicola Gilham in May 2024.

During 2023, the board embarked on a new approach to board effectiveness. A number of self-assessment questions have been agreed upon that align to the board annual agenda plan. Feedback on each self-assessment questionnaire is discussed at the relevant board meeting with an annual review of board effectiveness based on the aggregated feedback throughout the year.

The board also had an externally facilitated review on 23 October 2023 discussing ways of thinking about complexity and approaches to organisational change.

Our board of directors approved this report on 23 July 2024.



Peter Hay, Chair of the Turning Point Board

OUR BOARD OF DIRECTORS

Executive Board Members

Julie Bass, Chief Executive - Julie has been an executive board director at Turning Point since 2009 and Chief Executive since 1st April 2020. Prior to this Julie worked in financial services in the UK and overseas in a wide variety of roles including holding responsibility for corporate strategy, organisational performance and development and people related functions. She is passionate about supporting individuals to discover new possibilities in their lives through the provision of high quality, constantly evolving services, and interactions. Julie has a strong focus on the co-creation of conditions in which colleagues from a wide diversity of backgrounds can thrive. In September 2022, Julie was appointed an associate non-executive director at Surrey and Sussex Healthcare NHS Trust. Julie is a Chartered Insurer, a fellow of the Chartered Institute of Personnel and Development and has a PGC in executive coaching.

Amarjit Dhillon, Chief Information Officer - Amarjit joined Turning Point in March 2014 as Chief Information Officer with accountability for Commercial Ventures since September 2018 and was appointed as an executive board member in April 2020. He is a Chartered Engineer, a Chartered IT Professional and a Fellow of the British Computer Society and a Member of the Institution of Engineering and Technology. Amarjit left the company on 31 January 2024.

David Slegg, Chief Financial Officer - David joined Turning Point as Chief Financial Officer in June 2020 and was appointed as an executive board member in September 2023. David has previously worked for 27 years in finance director roles in the NHS in commissioning and provider organisations and brings to Turning Point extensive experience of financial strategy and financial management. His last NHS role was a Director of Finance for the London Region of NHS England working across a wide range of stakeholders in and outside of the NHS. In addition to his financial responsibilities at Turning Point, David manages the Property and Procurement teams.

Clare Taylor, Chief Operating Officer - Clare has overall responsibility for Turning Point's service delivery across its different areas of work and was appointed as an executive board member in September 2023. She has worked in health and social care for over 26 years including roles within universities, service providers, local authority commissioning and public health. She is Vice-Chair of Collective Voice, the umbrella body for third sector drug and alcohol treatment providers, and is passionate about improving access to services, particularly for those who need help the most. Clare has an MSc in Addiction Studies and through her varied leadership roles has a keen interest in supporting the development of women leaders within the wider system.

Non-Executive Board Members

Peter Hay, CBE, Chair of the Board - Peter was appointed Chair of Turning Point Board in September 2018. After a long career as a director of social care services, and a past president of the Association of Directors of Adult Social Services, Peter is now pursuing a range of interests in different roles across social care, housing and wellbeing. Peter is curious about ways of developing people's control over their own health and wellbeing, passionate about building good lives and fascinated by the leadership styles that support these aims. Peter was awarded a CBE in 2012 for services to health and care.

Nicola Gilham - Nicola joined the Turning Point Board in May 2018. She is Vice-Chair of the Board and Chair of the Audit, Risk and Quality Committee. As a qualified chartered accountant, Nicola enjoyed her first career with Arthur Andersen where, for many years, she led consulting assignments, both in the UK and overseas. Whilst living in Australia, she moved into recruitment and worked in the sector for over twenty years. Nicola now pursues a portfolio non-executive career working for businesses across health and social care. She also has a long-standing interest in her local community. As such, currently, she is non-executive director for Brighter Futures for Children in Reading, which runs Children's Services for the borough, and non-executive member of the Buckinghamshire Healthcare NHS Trust. She is Vice Chair of Child Bereavement UK, and separately she spent several years, in a voluntary capacity, as a telephone counsellor for emotional support services.

Dawn Kenson - Dawn joined the Turning Point Board in January 2023. After a career where she was responsible for the combined regulated sales forces of The Woolwich and Barclays Bank, Dawn moved into non-executive work and built a portfolio in, and supporting, the public sector.

Dawn has held roles in a wide variety of organisations spanning central government, Arms Length Bodies, a housing association and the NHS. She was the Senior Independent Director at Frimley Health NHS Foundation Trust for the eight years to March 2024, and currently sits on the NHS Lincolnshire Integrated Care Board, with a special interest in service delivery.

Dawn holds a degree in Mathematics and Statistics and qualified as an Associate of the Chartered Insurance Institute.

Dr. Victoria Tzortziou Brown - Victoria joined the Turning Point Board in May 2021. Victoria is a GP in east London and the Research Lead of East London Health and Care Partnership. In her academic role at Barts and The London School of Medicine and Dentistry, Victoria undertakes research on the design and evaluation of healthcare interventions and their impact on professional behaviour and health inequalities.

Victoria is also the Royal College of General Practitioners joint Honorary Secretary, a director at Healthcare Quality Improvement Partnership (HQIP) and a Founding Senior Fellow and Council member of the Faculty of Medical Leadership and Management. She has extensive clinical commissioning experience and served as a board member and clinical vice chair of the Tower Hamlets Clinical Commissioning Group.

Victoria is a Council member of the Faculty of Sexual and Reproductive Health. She also sits at the Council of the Faculty of Sport and Exercise Medicine and has a clinical and research interest in musculoskeletal medicine and education. Victoria is also a member of the Audit, Risk and Quality Committee

Dr. Christian Van Stolk – Christian joined the board in December 2020. He is a member of the Audit, Risk and Quality Committee. He has worked extensively on health and wellbeing in the workplace including research on improving the health and wellbeing of staff in the National Health Service in the UK, maintaining and gaining employment for those with common mental health conditions, building an evidence base for health interventions in workplace settings, and looking at the relationship between productivity and health and wellbeing outcomes.

Christian sits on several expert panels for the UK government including those on occupational health, mental health, and employee health and wellbeing in the NHS. He holds a Ph.D. from the London School of Economics and Political Science and fellowships at the Royal Society of Medicine and Royal Society of the Arts.

Our Operating Board

Our operating board oversees the day-to-day operations of the organisation. The operating board is chaired by **Chief Executive, Julie Bass** and also includes **Clare Taylor (Chief Operating Officer)** and **David Slegg (Chief Financial Officer)** both of whom are executive board members. Amarjit Dhillon was a member of the Operating Board until leaving the company on 31 January 2024. In addition the operating board includes:

David Foord – Director of Quality & Risk – David joined Turning Point in December 2021 and comes with a wealth of experience as a qualified clinician. He is a registered mental health nurse and has worked at board level for over a decade leading quality, risk, safeguarding and clinical governance teams.

Sarah Kennedy – Director of External Affairs and Marketing – Sarah joined Turning Point in 2009, having previously spent 8 years working with the National Lottery operator, Camelot, and Breast Cancer Care. Sarah has also worked in politics in numerous roles and was a local government councillor in an inner-city London Borough. Sarah is a Member of the Chartered Institute of Public Relations.

Philip Newton – Director of Corporate Governance – Philip joined Turning Point in 2007 after many years working for British Telecommunications PLC. He supports the board, executives and senior management teams to shape the organisation from the perspective of corporate governance and strategy development. Philip is a Fellow of the Chartered Institute of Management.

Structure, governance & management

Turning Point is a registered charity incorporated under Companies Act 2006, being a private company limited by guarantee without share capital. The governing document is the Articles of Association adopted on 22 September 2021.

Subsidiary companies

Turning Point has one wholly owned subsidiary, Turning Point (Services) Limited which is the trading subsidiary of the parent charity. The subsidiary board meets twice a year and as of 31 March 2024 has a board composition of four directors from the Turning Point board and two independent directors.

Turning Point board meetings

The Turning Point Board met formally six times between April 2023 and March 2024.

Board attendance in 2023-24	Turning Point
Number of meetings in 2023-24	6
Numbers attended:	
Peter Hay (Chairman)	6
Nicola Gilham	6
Julie Bass	6
Amarjit Dhillon	5 of 5
Christian Van Stolk	5
Victoria Tzortziou Brown	6
Dawn Kenson	6
David Slegg	2 of 2
Clare Taylor	1 of 2

Board appointment

The directors of Turning Point form a unitary board of non-executive and executive members as defined by the Articles of Association. The directors are also the trustees for the purpose of charity law. Executive members are appointed according to the terms of their employment with the company and article 50 of the Articles of Association relating to Relevant Qualifying Positions. Non-executive members are appointed by the board following a recruitment process overseen by the Nomination Committee and supported by a recruitment agency. Directors are appointed for a three-year term with the option to be reappointed for a second term on a resolution of the Board. Directors can, following sufficient review, be appointed for a third and final three-year term should circumstances require this. Newly appointed directors go through an induction process that includes service visits, meetings with key senior managers and other directors of the board. There is also an introduction to the regulatory and market environment, the strategic intent of the company and the associated risks and opportunities.

Christian Van Stolk was re-appointed for a second term on 16 January 2024.

Victoria Tzortziou Brown and Nicola Gilham were reappointed for second and third terms respectively on 14 May 2024.

Statement of Directors' Responsibilities

The directors are responsible for preparing the Annual Report and the Financial Statements in accordance with applicable law and regulation.

Company law requires directors to prepare financial statements for each year which give a true and fair view of the state of affairs of the company and of the income and expenditure for the period of account.

In preparing these financial statements, the Board is required to:

- Select suitable accounting policies and then apply them consistently;
- Make judgements and estimates that are reasonable and prudent;
- State whether applicable accounting standards have been followed, subject to any material departures disclosed and explained in the financial statements; and
- Prepare the financial statements on the going concern basis, unless it is inappropriate to presume that the charity will continue in business.

The board is responsible for keeping proper accounting records which disclose with reasonable accuracy at any time the financial position of the Charity and enable it to ensure that the financial statements comply with the Companies Act 2006, Charities Act 2011 & 2022 and the Housing and Regeneration Act 2008, Housing SORP 2022 and the Accounting Direction for Private Registered Providers of Social Housing 2022. The Directors are also responsible for safeguarding the assets of the company and hence for taking reasonable steps for the prevention and detection of fraud and other irregularities.

Board effectiveness

During 2023, the board embarked on a new approach to board effectiveness. A number of self-assessment questions have been agreed upon that align to the board annual agenda plan. Feedback on each self-assessment questionnaire is discussed at the relevant board meeting with an annual review of board effectiveness based on the aggregated feedback throughout the year.

The board also had an externally facilitated review on 23 October 2023 discussing ways of thinking about complexity and approaches to organisational change.

Conflicts of interest

Turning Point has a policy in place to manage conflicts of interest. Upon appointment, all directors are required to declare their interests. On an annual basis, all members are required to update the register of interests, which includes the fit and proper persons requirements. At each meeting of the board and Audit Risk & Quality Committee, members and attendees are required to state any transactional interests with regard to specific items on the agenda in line with their duties under the Companies Act 2006.

Payments to Directors

Non-Executive Directors of Turning Point receive remuneration of £7,500 per year for the Chair and £5,000 per year for

the other Non-Executive Directors. There has been no increase in Non-Executive Director remuneration during the year. Executive Directors are paid for their functional roles and do not receive additional payment for their responsibilities as company directors and trustees of the organisation. Apart from the reimbursement of expenses entailed in the course of company business, there have been no other payments to directors in 2023-24.

Corporate Governance report

For the year ended 31 March 2024, under the Companies (Miscellaneous Reporting) Regulations 2018, the Company has applied the Wates Corporate Governance Principles for Large Private Companies.

Each of the six Wates Principles has been considered individually within the context of the company's specific circumstances and a short supporting statement is set out below to explain how each principle has been applied to achieve better outcomes.

PRINCIPAL	SUMMARY
PURPOSE AND LEADERSHIP An effective Board develops and promotes the purpose of a company, and ensures that its values, strategy and culture align with that purpose.	The Board promotes the purpose of the Company through strategic intent and emergent strategy.
BOARD COMPOSITION Effective Board composition requires an effective chair and a balance of skills, backgrounds, experience and knowledge, with individual Directors having sufficient capacity to make a valuable contribution. The size of a Board should be guided by the scale and complexity of the company.	As of 31 March 2024, the Turning Point Board comprised of an independent Non-Executive Chair, four independent Non-Executive Directors, and Executive Directors comprising the Chief Executive, Chief Financial Officer and Chief Operating Officer. The size and composition of the board is considered appropriate to the size, nature and complexity of the company. The board has delegated some functions to the Audit, Risk & Quality Committee which is the only standing board committee. Other board committees such as the Remuneration Committee and Nomination Committee are stood up as required. More information regarding committees is included on page 60 There is process in place for appropriate board effectiveness reviews. More information regarding board effectiveness is included on page 57.
DIRECTOR RESPONSIBILITIES The Board and individual Directors should have a clear understanding of their accountability and responsibilities. The Board's policies and procedures should support effective decision-making and independent challenge.	The board receives regular reports on strategic performance, financial performance, stakeholder engagement, and management of key business risks along with updates on activities and decisions of its committees. In addition, certain responsibilities are delegated to the board committees in accordance with the approved Governance Standing Orders. At each board meeting, all directors are asked to declare any potential conflict of interest. Any declaration is noted and where there are potential conflicts, appropriate safeguards

	are implemented.
OPPORTUNITY AND RISK A Board should promote the long-term sustainable success of the company by identifying opportunities to create and preserve value, and establishing oversight for the identification and mitigation of risks	The board seeks out opportunity while mitigating risk. The board engages with the strategy dialogue and organisational performance at Board meetings throughout the year and specifically through the annual strategy away day. The Audit Risk & Quality Committee, consisting of Independent Non-Executive Directors, receives assurance reports from the internal and external auditors. Materially significant risks are identified and managed and where required the substantive issues are escalated to the board. The principal risks of the company are set out on page 50.
REMUNERATION A Board should promote executive remuneration structures aligned to the long-term sustainable success of the company, taking into account pay and conditions elsewhere in the company	The Remuneration Committee has clearly defined terms of reference set out in the Governance Standing Orders and is responsible for determining remuneration. The committee considers benchmarking data and where appropriate advice from external consultants. The Remuneration Committee did not sit during the 2023-24 year. More information regarding committees is included on page 60.
STAKEHOLDER RELATIONSHIPS AND ENGAGEMENT Directors should foster effective shareholder relationships aligned to the company's purpose. The Board is responsible for overseeing meaningful engagement with stakeholders, including the workforce, and having regard to their views when taking decisions.	Accountability and transparency with stakeholders is key to the long term success of the Turning Point group. The Section 172(1) Statement and more information on some of the engagements that take place at the operational or group level with the key stakeholders is included on pages 15 to 17.

Our people

Accountability and transparency with stakeholders is key to the long term success of the Turning Point group.

The Section 172(1) Statement and more information on some of the engagements that take place at the operational or group level with the key stakeholders is included on pages 15 to 17.

This has been another very challenging year in the sector in relation to attraction and retention. However, Turning Point has once again bucked the trend of high rates of attrition, welcoming and retaining more colleagues and helping them to thrive.

Our roles offer exciting and rewarding career opportunities to all who join us, and our focus remains on supporting our colleagues to get what they need from their careers. Many colleagues apply to Turning Point because of their passion for supporting others and their community. We aim to meet their ambition with a solid and exciting career, rewarded fairly, and with multiple opportunities for the future.

We are focusing increasingly on the colleague and manager experience and reviewing how work gets done, how people are supported, and making sure colleagues have the right tools at the right time to support their health and wellbeing.

As well as developing our reward offer, launching new benefits through the year. Our MyBenefits platform is popular, and colleagues are making great use of the benefits we have. Testament to this, in October 2023 we saw a 4% increase in respondents to our colleague engagement survey stating that Turning Point gives a high priority to colleague wellbeing.

OUR SUPPLIERS

We work with a range of suppliers throughout the year for the delivery of many essential services, including harm reduction products, facilities management, technology, and agency staff cover. We have good working relationships with all our suppliers and value the contribution they make. Central to our procurement process is the assured delivery of value for money, social impact, and environmental commitments.

BOARD COMMITTEES

Audit Risk & Quality Committee (the "ARQ Committee")

The ARQ Committee is a standing board committee and it supports the Board by providing assurance that robust and effective systems are in place to manage risks and ensure standards in financial management, internal & external audit, quality, safeguarding and clinical governance. The ARQ Committee receives reports from both internal and external auditors as well as executives and senior managers.

As at 31 March 2024, the members of the Audit Risk & Quality Committee were as follows:

- Nicola Gilham, non-executive director (Chair)
- Victoria Tzortziou Brown, non-executive director
- Christian Van Stolk, non-executive director

The Chief Financial Officer is invited to ARQ Committee meetings as a matter of course. Other executives and senior managers are invited to ARQ Committee meetings as required. The committee met four times between April 2023 and March 2024. All meetings were quorate. The Chief Financial Officer attended all ARQ Committee meetings.

Nomination Committee

When required, the Nomination Committee is convened to make recommendations to the Board on recruitment, membership and succession planning.

The Nomination Committee did not meet during the 2023-24 year.

Remuneration Committee

In July 2023, the Board resolved to revert to the principle of a non-standing Remuneration Committee for both executive and non-executive remuneration. The Executive Directors are subject to the benefits of the company annual pay review in the same manner as all employees. The Board dissolved the current Remuneration Committee and stood down the current members which comprised Nicola Gilham, Peter Hay and Victoria Tzortziou Brown.

It was agreed by the board that moving forward, the Remuneration Committee would be stood up and dissolved for both executive and non-executive remuneration on an 'as required basis' via the means of passing a board resolution including the appointment of committee members.

The Remuneration Committee did not meet in the 2023-24 year.

REVIEW OF OBJECTIVES

The charitable objects of the company are for the public benefit, to promote or assist in promoting the protection of health of those with learning disability; and / or those at risk of, or with mental health conditions; and / or drug or alcohol use, misuse or dependency, and/or other addictive behaviours.

The charitable objects are met through the provision of services across England for people to improve their health and wellbeing whether that is at home, within the workplace or through specialist services. In doing so the company builds upon sixty years of experience in substance use, mental health, learning disability, autism, acquired brain injury, sexual health, healthy lifestyles and employment services.

The board of directors who are also the trustees under charity law has given careful consideration and due regard to the Charity Commission's general guidance on public benefit in reviewing the activities of the Turning Point group. The directors are satisfied that the objects of the charity and the activities it undertakes remain entirely for the public benefit in accordance with Section 17 of the Charities Act 2011.

ENVIRONMENTAL & ENERGY REPORTING

Turning Point's location-based greenhouse gas emissions, reportable under SECR in 2023-24 were 1,763 tonnes of carbon dioxide equivalent emissions (tCO2e). These include the emissions associated with electricity and natural gas consumption, kerosene combustion, and travel in company-operated transport and employee-owned vehicles used for company business. Turning Point's greenhouse gas emissions here were 3% higher than in 2022-23. The intensity of 10.67 tCO2e per £m revenue is 5% lower than last year.

With respect to the market-based total, this amounted to 1,346 tCO2e and an intensity of 8.15 tCO2e per £m – and in each case was 7% higher and 1% lower than the market-based emissions in 2022-23 respectively.

Greenhouse Gas Emissions by Source & Scope

GREENHOUSE GAS EMISSIONS BY SOURCE (TONNES CO_2E) – LOCATION BASED

Emissions Source	2022-23	2023-24	Share (%)	Annual Change (%)
Fuel combustion: Natural gas	868	893	51%	3%
Purchased electricity	517	505	29%	-2%
Fuel combustion: Kerosene	No data	16*	1%	N/A
Fuel combustion: Transport	335	348	20%	4%
Total emissions (tCO_2e)	**1,720**	**1,763**	**100%**	**3%**
Revenue (£m)	153	165	–	8%
Intensity: (tCO2e per £m)	**11.25**	**10.67**	–	**-5%**

GREENHOUSE GAS EMISSIONS BY SCOPE (TONNES CO_2E) – LOCATION BASED

Emissions Source	2022-23	2023-24	Share (%)	Annual Change (%)

Scope 1	921	958*	54%	4%
Scope 2	473	465	26%	-2%
Scope 3	326	340	19%	4%
Total emissions (tCO_2e)	**1,720**	**1,763**	**100%**	**3%**

Scope 1: Natural gas combustion and company-operated transport. Scope 2: Electricity generated and consumed in the UK. Scope 3: Losses from electricity distribution and transmission, and employee-owned vehicles used for company business.

*This above emissions tables only include emissions reportable under SECR and may not reflect the entire carbon footprint of the organisation. *There are two sites which make use of kerosene, however, collating the data for one was not possible.*

Energy Consumption

FIGURE 1 ENERGY CONSUMPTION BY YEAR (KWH)

Emissions source	2022-23	2023-24	Share (%)	Annual Change (%)
Natural gas	4,757,390	4,883,013	57%	3%
Electricity	2,448,336	2,243,449	26%	-8%
Transport fuel	1,367,576	1,447,255	17%	6%
Kerosene	No data	66,843*	1%	N/A
Total consumption (kWh)	**8,573,302**	**8,640,560**	**100%**	**1%**
Revenue (£)	153	165	-	**8%**
Intensity: (kWh per £m)	**56,109**	**52,284**	-	**-7%**

*This only includes energy reportable under SECR and may not reflect the entire energy footprint of the organisation. *There are two sites which make use of kerosene, however, collating the data for one was not possible.*

Boundary, Methodology, and Exclusions

An 'operational control' approach has been used to define the Greenhouse Gas emissions boundary.
This approach captures emissions associated with the operation of all buildings such as offices and other relevant premises, plus company-owned and leased transport as well as employee-owned vehicles used for company business.
This report covers UK operations only, as required by SECR for Non-Quoted Large Companies.

This information was collected and reported in line with the methodology set out in the UK Government's Environmental Reporting Guidelines, 2019. The GHG Protocol Corporate Accounting and Reporting Standard (revised edition) and emission factors from the UK Government's GHG Conversion Factors for Company Reporting 2023 have been used calculate the SECR disclosures. The reporting period is April 2023 to March 2024, as per the financial accounts.

Energy Efficiency Initiatives

In the period covered by this SECR report the company has undertaken/completed the following energy efficiency actions:

- Turning Point's commitment to achieve Net Zero and exploring the project management elements of developing a Net Zero strategy;
- Turning Point's current emissions as reported in the annual report each year in line with the Streamlined Energy Carbon Reporting (SECR);

- Prioritising those suppliers with a robust environmental management system such as ISO14001;
- Ensuring suppliers can provide suitable assurance on the economic, social, and environmental sustainability of their supply chain;
- Where practical, favouring products and services with a lower environmental impact and avoiding products and services which contain substances harmful to the environment.
- Reviewing high impact ongoing contracts to identify potential opportunities to reduce negatives and enhance positive sustainability outcomes; and
- Encouraging existing suppliers to bring forward options to enhance sustainability outcomes.

ACHIEVEMENTS AND PERFORMANCE

In this financial year we have implemented a range of initiatives that have improved the experience of people who need support. We have expanded our network of services in Nottingham, gained new services in Lincolnshire and Wakefield, achieved micro-elimination of Hepatitis C in our Oxfordshire and Slough Substance Use services, and launched the Blue Light Together platform to support the wellbeing of the Blue Light Community. We hosted 200 delegates at our second Safer Lives conference in Birmingham, reinforcing the importance of harm reduction. We achieved the Accreditation Programme for Psychological Therapies Services (APPTS) for our Luton and Wakefield Talking Therapy Services. We redesigned and relaunched our www.Turning-Point.co.uk website, increasing the number of online substance use referrals to our highest ever numbers.

Governance & financial viability

The company has carried out an annual assessment of compliance with the Governance & Viability Standard and the board confirms continued compliance.

Value for money

For Turning Point value for money means delivering the best possible health and social care outcomes for the service price. We deliver value by continually improving the efficiency and effectiveness of our people, processes and systems to drive ever better outcomes. This means we need to ensure there is money available to invest in our people and our technology infrastructure. We understand value for money along the lines of the National Audit Office definition which assesses value across three criteria:

- **Economy:** minimising the cost of resources used or required
- **Efficiency:** the relationship between the outcomes delivered through our services and the resources needed to produce them
- **Effectiveness:** the relationship between the intended and actual outcomes delivered through our services.

This approach is governed through our Governance Framework and provides us with the means of achieving cost effectiveness, which we define as the optimal use of resources to achieve the intended health and social care outcomes. As a provider of health and social care services Turning Point benchmarks its Care Quality Commission (CQC) regulated services against other providers to ensure that service effectiveness compares favourably and serves as an indicator of value we deliver through the quality of our services.

Turning Point Overall Ratings – 96% Good or Outstanding
Our overall rating for our CQC regulated services is 96% Good or Outstanding. We are regulated by the CQC for our care home services with and without nursing; community-based services for people who use substances; domiciliary care services; hospital services for people with mental health needs; rehabilitation services; residential substance use treatment and/or rehabilitation services and our supported living services.

CQC Service Type	Outstanding	Good	Requires Improvement	Inadequate
Care home service with nursing	5.0%	72.5%	21%	1.6%
Turning Point – 2 (all rated)	-	**100%**	-	-
Care home service without nursing	4.0%	77.5%	21.0%	1.4%
Turning Point – 16 (all rated)	-	**100%**	-	-
Domiciliary care service	4.5%	80.5%	14.2%	0.8%
Turning Point – 9 (all rated)	-	**100%**	-	-
Supported living service	5.2%	83.5%	10.4%	0.9%
Turning Point – 6 (all rated)	-	**83%**	**17%**	-

Our substance use services are also benchmarked on the basis of successful completion outcomes for each Public Health England Partnership Area compared to other Partnership Areas that share the same client characteristics. This information forms part of the Public Health England official statistics and is therefore subject to reporting restrictions beyond internal use for management, quality assurance and briefing purposes.

Turning Point is first and foremost a national provider of health and social care services and therefore provides little social housing and where it does so this is only in conjunction with, and for the purpose of health and social care provision. Most of the value for money metrics required of a typical Registered Provider by the Regulator of Social Housing do not provide meaningful information for the annual report and are therefore not included. The metrics that are relevant to the organisation are as follows:

	2024	2023
Return on Capital Employed	13%	9%
Operating Margin	1%	1%

FINANCIAL REVIEW

Turning Point has returned another year of income growth and sustained positive contribution. The operating environment for the financial year has been challenging and characterised by difficult economic conditions including high levels of inflation and constraints on public expenditure. This has been reflected in the commissioner environment with local authorities and NHS bodies facing challenging financial conditions. The financial results for the year show that Turning Point has adapted to the changed operating environment, and financial performance remains strong. Income for the year was £165.3m an increase of 8% compared to the financial year 2022-23. The operating profit before exceptional items was £2.9m (1.8% of turnover). Reserves increased by £1.8m to £5.4m at 31st March 2024.

As an organisation, Turning Point continues to grow and during the last 10 years income has increased by 77%. Within the Public Health and Substance Use business unit we have worked closely with many of our commissioners to utilise monies from Public Health England to extend our activities via Universal, Rough Sleepers and ADDER funding totalling £6.9m. Last year we also secured funding from the Office for Health Improvement and Disparities (OHID), launched in October 2021, which is enabling Turning Point to support even more people. This initiative has an initial timeframe of the 3 years to March 2025, and in 2023-24 we received income of £8.7m. We are using the extra income to reduce caseloads for our employees and increase the number of clients in treatment.

Turning Point has been successful in retaining retendered contracts with effect from April 2024, including substance use services in Suffolk and learning disabilities services in Rotherham. The Wakefield learning disabilities contract has been retained and increased in value and a contract extension has been awarded for the North Tyneside substance use contract from April 2025.

At the start of the financial year 2024-25 a new learning disabilities service opened in Kent and substance use service in Lincolnshire. These services demonstrate Turning Point's ambition to continue with sustainable growth of the business, which is evidenced by the year-on-year increase of both turnover and operating surplus.

Our Commercial Ventures arm continues to develop its Rightsteps and livelife brands, supporting business to business and direct to customer activity respectively. The product range has extended, with market exploration and customer engagement increasing.

A corner stone to the strategic period 2022 to 2027 is the continued improvement to financial sustainability, and Turning Point enters the financial year 2024-25 in a stronger position compared to 2023-24 and better placed to face the challenges ahead.

RESERVES

Reserves are that part of a charity's unrestricted income funds that are freely available to spend to further the charity's objects and have been set aside for future use. Turning Point has no designated and no restricted funds.

Unrestricted reserves have increased by £7.7m over the last 4 years to reach £14.2m at March 2024.

In the financial year 2023-24 total reserves improved by £1.8m and Turning Point will enter the financial year 2024-25 with total reserves of £5.4m. The ambition is to continue to build reserves and the 2024-25 budget shows continued improvement in this area. The budget for 2024-25 was approved by the board in March 2024 with a planned increase in reserve balances of £2.1m.

The pension reserve represents the discounted value of the Group's future contributions to the defined benefit pension scheme and is provided for on the Group's balance sheet in compliance with FRS 102. This is an accounting adjustment and does not directly impact our operating cashflows.

We are ambitious for the years ahead and aim to continue building our reserves through a determined focus on key priorities, including:

- Further development of our Equity, Diversity and Inclusion strategy, family friendly and annual leave policies and communication channels.
- Network upgrade to enhance information security, develop a digital service delivery roadmap and increase automation of our People and Finance processes.
- Continue to develop our involvement, including a 'first of its kind' Lived Experience Event for people we support, their families and carers.
- Explore local and national partnerships to enhance service delivery and growth opportunities.

The board assesses the risks to the organisation annually and sets the target level of unrestricted funds. In 2008-09 the directors established a target for unrestricted reserves of 8.3% of income, which is £13.8m based on the income from operations in 2023-24. This target has been achieved in the last 2 years, but it will be an ongoing target as it will be affected by income growth and profitability in future years.

The board has reviewed the budgets and cashflow forecasts for 2024-25 and 2025-26, which reflect all the known opportunities and challenges, both internally and in the external environment. They consider the cash balance to be adequate for the purpose of meeting the working capital requirements for the foreseeable future and coping with the financial impacts of the risks faced by the organisation. The approach to reserves is approved with input from the Audit, Risk & Quality Committee.

This report was approved by the board on 23 July 2024 and signed on its behalf.

Peter Hay (Chair)
Director

INDEPENDENT AUDITOR'S REPORT TO THE MEMBERS OF TURNING POINT

Opinion

We have audited the financial statements of Turning Point (the 'Charitable company') and its subsidiary together (the 'Group') for the year ended 31 March 2024, which comprise the Group and Charity Statements of comprehensive income and the consolidated and charity Statements of financial position, the Group Statement of cash flows, the Group Statement of changes in reserves and the related notes, including a summary of significant accounting policies. The financial reporting framework that has been applied in their preparation is applicable law and United Kingdom Accounting Standards, including Financial Reporting Standard 102 'The Financial Reporting Standard applicable in the UK and Republic of Ireland' (United Kingdom Generally Accepted Accounting Practice).

In our opinion the financial statements:

- give a true and fair view of the state of the Group's and of the charitable company's affairs as at 31 March 2024 and of the Group's and charitable company's incoming resources and application of resources, including its income and expenditure for the year then ended;
- have been properly prepared in accordance with United Kingdom Generally Accepted Accounting Practice; and
- have been prepared in accordance with the requirements of the Companies Act 2006, Housing and Regeneration Act 2008 and The Accounting Direction for Registered Providers of Social Housing from April 2022.

Basis for opinion

We conducted our audit in accordance with International Standards on Auditing (UK) (ISAs (UK)) and applicable law. Our responsibilities under those standards are further described in the Auditor's responsibilities for the audit of the financial statements section of our report. We are independent of the Group in accordance with the ethical requirements that are relevant to our audit of the financial statements in the United Kingdom, including the Financial Reporting Council's Ethical Standard, and we have fulfilled our other ethical responsibilities in accordance with these requirements. We believe that the audit evidence we have obtained is sufficient and appropriate to provide a basis for our opinion.

Conclusions relating to going concern

In auditing the financial statements, we have concluded that the Board's use of the going concern basis of accounting in the preparation of the financial statements is appropriate.

Based on the work we have performed, we have not identified any material uncertainties relating to events or conditions that, individually or collectively, may cast significant doubt on the Group's or charitable company's ability to continue as a going concern for a period of at least twelve months from when the financial statements are authorised for issue.

Our responsibilities and the responsibilities of the Board with respect to going concern are described in the relevant sections of this report.

Other information

The trustees are responsible for the other information within the Annual Report. The other information comprises the information included in the Annual Report, other than the financial statements and our Auditor's report thereon. Our opinion on the financial statements does not cover the other information and, except to the extent otherwise explicitly stated in our report, we do not express any form of assurance conclusion thereon.

In connection with our audit of the financial statements, our responsibility is to read the other information and, in doing so, consider whether the other information is materially inconsistent with the financial statements or our knowledge obtained in the audit or otherwise appears to be materially misstated. If we identify such material inconsistencies or apparent material misstatements, we are required to determine whether there is a material misstatement in the financial statements or a material misstatement of the other information. If, based on the work we have performed, we conclude that there is a material misstatement of this other information, we are required to report that fact.

We have nothing to report in this regard.

Opinion on other matters prescribed by the Companies Act 2006

In our opinion, based on the work undertaken in the course of the audit:

- the information given in the Group strategic report and the Directors' report for the financial year for which the financial statements are prepared is consistent with the financial statements; and
- the Group strategic report and the Directors' report have been prepared in accordance with applicable legal requirements.

Matters on which we are required to report by exception

In the light of the knowledge and understanding of the Group and the parent Charity and its environment obtained in the course of the audit, we have not identified material misstatements in the Group strategic report or the Directors' report.

We have nothing to report in respect of the following matters in relation to which the Companies Act 2006 requires us to report to you if, in our opinion:

- adequate accounting records have not been kept; or
- the financial statements are not in agreement with the accounting records and returns; or
- certain disclosures of trustees' remuneration specified by law are not made; or
- we have not received all the information and explanations we require for our audit.

Responsibilities of directors

As explained more fully in the directors' responsibilities statement on page 57, the trustees are responsible for the preparation of the financial statements and for being satisfied that they give a true and fair view, and for such internal control as the trustees determine is necessary to enable the preparation of financial statements that are free from material misstatement, whether due to fraud or error.

In preparing the financial statements, the directors are responsible for assessing the Group's and the Charitable Company's ability to continue as a going concern, disclosing, as applicable, matters related to going concern and using the going concern basis of accounting unless the trustees either intend to liquidate the Group or the Charitable Company to cease operations, or have no realistic alternative but to do so.

Auditor's responsibilities for the audit of the financial statements

Our objectives are to obtain reasonable assurance about whether the financial statements as a whole are free from material misstatement, whether due to fraud or error, and to issue an Auditor's report that includes our opinion. Reasonable assurance is a high level of assurance, but is not a guarantee that an audit conducted in accordance with ISAs (UK) will always detect a material misstatement when it exists. Misstatements can arise from fraud or error and are considered material if, individually or in the aggregate, they could reasonably be expected to influence the economic decisions of users taken on the basis of these financial statements.

A further description of our responsibilities for the audit of the financial statements is located on the Financial Reporting Council's website at: www.frc.org.uk/auditorsresponsibilities. This description forms part of our Auditor's report.

Extent to which the audit was considered capable of detecting irregularities, including fraud

Irregularities, including fraud, are instances of non-compliance with laws and regulations. We identified and assessed the risks of material misstatement of the financial statements from irregularities, whether due to fraud or error, and discussed these between our audit team members. We then designed and performed audit procedures responsive to those risks, including obtaining audit evidence sufficient and appropriate to provide a basis for our opinion.

We obtained an understanding of the legal and regulatory frameworks within which the charitable company and group operates, focusing on those laws and regulations that have a direct effect on the determination of material amounts and disclosures in the financial statements. The laws and regulations we considered in this context were the Companies Act 2006, the Charities Act 2011, the Housing and Regeneration Act 2008 and The Accounting Direction for Registered Providers of Social Housing from April 2022 together with the Housing SORP. We assessed the required compliance with these laws and regulations as part of our audit procedures on the related financial statement items.

In addition, we considered provisions of other laws and regulations that do not have a direct effect on the financial statements but compliance with which might be fundamental to the charitable company's and the group's ability to operate or to avoid a material penalty. We also considered the opportunities and incentives that may exist within the charitable company and the group for fraud. The laws and regulations we considered in this context for the UK operations were CQC Regulations for service providers and managers, Employment legislation, Health and Safety legislation and requirements imposed by the Regulator of Social Housing.

Auditing standards limit the required audit procedures to identify non-compliance with these laws and regulations to enquiry of the Trustees and other management and inspection of regulatory and legal correspondence, if any.

We identified the greatest risk of material impact on the financial statements from irregularities, including fraud, to be within the timing of recognition of contract income, the override of controls by management and the assumptions used to estimate the pension liability. Our audit procedures to respond to these risks included reviewing the income recognition policy, sample testing the funding agreements and reviewing for restrictions and clawbacks, tracing the income receipts to bank, reviewing the controls in place for income recognition, enquiries with management, review of internal audit reports, review of the fraud reports made to the Audit Committee, sample testing on the posting of journals and contract income, reviewing correspondence with the regulators, reading minutes of meetings of those charged with governance, reviewing accounting estimates for biases and testing the assumptions used to estimate the pension liability.

Owing to the inherent limitations of an audit, there is an unavoidable risk that we may not have detected some material misstatements in the financial statements, even though we have properly planned and performed our audit in accordance with auditing standards. For example, the further removed non-compliance with laws and regulations (irregularities) is from the events and transactions reflected in the financial statements, the less likely the inherently limited procedures required by auditing standards would identify it. In addition, as with any audit, there remained a higher risk of non-

detection of irregularities, as these may involve collusion, forgery, intentional omissions, misrepresentations, or the override of internal controls. We are not responsible for preventing non-compliance and cannot be expected to detect non-compliance with all laws and regulations.

Use of our report

This report is made solely to the Charity's members, as a body, in accordance with Chapter 3 of Part 16 of the Companies Act 2006 and Section 128 of the Housing and Regeneration Act 2008. Our audit work has been undertaken so that we might state to the Charity's members those matters we are required to state to them in an Auditor's report and for no other purpose. To the fullest extent permitted by law, we do not accept or assume responsibility to anyone other than the Charity and the Charity's members, as a body, for our audit work, for this report, or for the opinions we have formed.

J Poulter (Senior statutory auditor)

for and on behalf of
Crowe U.K. LLP

Statutory Auditor

55 Ludgate Hill
London
EC4M 7JW

Date: 6 September 2024

GROUP STATEMENT OF COMPREHENSIVE INCOME
FOR THE YEAR ENDED 31 MARCH 2024

	Note	2024 £000	2023 £000
Turnover	4	**165,266**	152,774
Operating charges	4	**(163,107)**	(151,427)
Operating surplus		**2,159**	1,347
Interest receivable and similar income	12	**381**	162
Loss on disposal of investment	16	**-**	(1)
Impact of changing assumptions and discount rate on pension deficit reduction plan	23	**(773)**	3,803
Surplus for the financial year		**1,767**	5,311
Actuarial gains on defined benefit pension schemes	29	**8**	918
Other comprehensive income for the year		**8**	918
Total comprehensive surplus		**1,775**	6,229

All 2024 activities relate to continuing operations.

CHARITY STATEMENT OF COMPREHENSIVE INCOME
FOR THE YEAR ENDED 31 MARCH 2024

	Note	2024 £000	2023 £000
Turnover	5	**163,780**	151,322
Operating charges	5	**(163,100)**	(151,326)
Operating surplus		**680**	(4)
Interest receivable and similar income	12	**381**	162
Loss on disposal of investment	16	**-**	(1)
Impact of changing assumptions and discount rate on pension deficit reduction plan	23	**(773)**	3,803
Surplus for the financial year		**288**	3,960
Actuarial gains on defined benefit pension schemes	29	**8**	918
Gift aid from subsidiary	31	**1,344**	1,232
Other comprehensive income for the year		**1,352**	2,150
Total comprehensive surplus		**1,640**	6,110

All 2024 activities relate to continuing operations.

Gift aid from the subsidiary of £1,344k relates to gift aid arising on profits generated in the previous accounting period (2023: £1,232k).

CONSOLIDATED STATEMENT OF FINANCIAL POSITION
AS AT 31 MARCH 2024

	Note		2024 £000		2023 £000
Fixed assets					
Housing properties	14		**5,075**		4,250
Other fixed assets	15		**375**		249
Investments	16		**-**		-
			5,450		4,499
Current assets					
Debtors	17	**20,940**		21,483	
Cash and cash equivalents	18	**12,765**		10,817	
		33,705		32,300	
Creditors: amounts falling due within one year	19	**(22,850)**		(21,935)	
Net current assets			**10,855**		10,365
Total assets less current liabilities			**16,305**		14,864
Creditors: amounts falling due after more than one year	21		**(51)**		(57)
Provisions for liabilities					
Defined benefit pension liability	29	-		-	
Pension provision	23	**(8,831)**		(9,411)	
Reinstatement provision	23	**(1,987)**		(1,735)	
Other provision	23	**(45)**		(45)	
			(10,863)		(11,191)
Net assets			**5,391**		3,616
Reserves					
Unrestricted reserves			**14,222**		13,027
Pension reserve			**(8,831)**		(9,411)
Restricted reserves			**-**		-
			5,391		3,616

The financial statements were approved and authorised for issue by the board and were signed on its behalf on 23/07/2024.

Peter Hay (Chair)
Director
Turning Point
Company number: 00793558

The notes on pages 76 to 107 form part of these financial statements.

CHARITY STATEMENT OF FINANCIAL POSITION
AS AT 31 MARCH 2024

	Note		2024 £000		2023 £000
Fixed assets					
Housing properties	14		**5,075**		4,250
Other fixed assets	15		**375**		249
Investments	16		**-**		-
			5,450		4,499
Current assets					
Debtors	17	**8,150**		7,692	
Cash and cash equivalents	18	**12,737**		10,789	
		20,887		18,481	
Creditors: amounts falling due within one year	19	**(12,858)**		(10,808)	
Net current assets			**8,029**		7,673
Total assets less current liabilities			**13,479**		12,172
Creditors: amounts falling due after more than one year	21		**(51)**		(57)
Provisions for liabilities					
Defined benefit pension liability	29	**-**		-	
Pension provision	23	**(8,831)**		(9,411)	
Reinstatement provision	23	**(1,987)**		(1,735)	
Other provision	23	**(45)**		(45)	
			(10,863)		(11,191)
Net assets			**2,565**		924
Reserves					
Unrestricted reserves			**11,396**		10,335
Pension reserve			**(8,831)**		(9,411)
Restricted reserves			**-**		-
			2,565		924

The financial statements were approved and authorised for issue by the board and were signed on its behalf on 23/07/2024.

Peter Hay (Chair)
Director
Turning Point
Company number: 00793558

The notes on pages 76 to 108 form part of these financial statements.

CONSOLIDATED STATEMENT OF CHANGES IN RESERVES
FOR THE YEAR ENDED 31 MARCH 2024

	Restricted reserves £000	Pension reserve £000	Unrestricted reserves £000	Total reserves £000
At 1 April 2023	-	(9,411)	13,027	3,616
Comprehensive income for the year				
Surplus for the year	-	-	1,767	1,767
Actuarial gains on pension schemes	-	-	8	8
Movement on pension deficit	-	580	-	580
Transfer from profit and loss account	-	-	(580)	(580)
At 31 March 2024	-	(8,831)	14,222	5,391

The notes on pages 76 to 108 form part of these financial statements.

CONSOLIDATED STATEMENT OF CHANGES IN RESERVES
FOR THE YEAR ENDED 31 MARCH 2023

	Restricted reserves £000	Pension reserve £000	Unrestricted reserves £000	Total reserves £000
At 1 April 2022	428	(14,443)	11,402	(2,613)
Comprehensive income for the year				
Surplus for the year	-	-	5,311	5,311
Actuarial gains on pension schemes	-	-	918	918
Movement on pension deficit	-	5,032	-	5,032
Transfer from profit and loss account	(428)	-	(4,604)	(5,032)
At 31 March 2023	-	(9,411)	13,027	3,616

The notes on pages 76 to 108 form part of these financial statements.

CONSOLIDATED STATEMENT OF CASH FLOWS
FOR THE YEAR ENDED 31 MARCH 2024

	2024 £000	2023 £000
Cash flows from operating activities		
Profit for the financial year	**1,767**	5,311
Adjustments for:		
Depreciation of tangible assets	**654**	476
Loss on disposal of investments	**-**	(1)
Amortisation of capital grants	**(6)**	(7)
Interest received	**(381)**	(162)
Decrease in debtors	**544**	2,800
Increase in creditors	**915**	2,249
(Decrease) in provisions	**(328)**	(4,337)
Defined benefit pension contributions	**-**	-
Pension interest and service costs	**8**	8
Net cash generated from operating activities	**3,173**	6,337

CONSOLIDATED STATEMENT OF CASH FLOWS (CONTINUED)
FOR THE YEAR ENDED 31 MARCH 2024

	2024 £000	2023 £000
Cash flows from investing activities		
Improvement to housing properties	**(1,269)**	(339)
Purchase of tangible fixed assets	**(337)**	(115)
Interest received	**381**	162
Net cash from investing activities	**(1,225)**	(292)
Net increase in cash and cash equivalents	**1,948**	6,045
Cash and cash equivalents at the beginning of the year	**10,817**	4,772
Cash and cash equivalents at the end of the year	**12,765**	10,817
Cash and cash equivalents at the end of year comprise:		
Cash at bank and in hand	**12,765**	10,817
	12,765	10,817

The notes on pages 76 to 108 form part of these financial statements.

ANALYSIS OF NET DEBT
FOR THE YEAR ENDED 31 MARCH 2024

	At 1 April 2023 £000	Cash flows £000	At 31 March 2024 £000
Cash at bank and in hand	10,817	1,948	12,765
	10,817	1,948	12,765

The notes on pages 76 to 108 form part of these financial statements.

NOTES TO THE FINANCIAL STATEMENTS FOR THE YEAR ENDED 31 MARCH 2024

Accounting policies

1. General information

Turning Point is a company limited by guarantee and is incorporated in England. The registered office is America House, 2 America Square, London EC2N 2LU. The registered number is 793558.

2. Accounting policies

The principal accounting policies adopted, judgements and key sources of estimation in the preparation of the financial statements are as follows:

2.1 Accounting convention

Turning Point is registered under the Companies Act 2006 and Charities Act 2011 and is a registered provider of social housing.

The financial statements have been prepared in accordance with applicable Accounting Standards, including Financial Reporting Standard 102 (FRS 102), the Accounting Direction for Registered Providers of Social Housing 2022, and the Housing SORP 2018.

Turning Point meets the definition of a public benefit entity under FRS 102. Assets and liabilities are initially recognised at fair value or transaction value unless otherwise stated in the relevant accounting policy.

2.2 Going concern

On 31 March 2024, Turning Point had working capital of £10.9m (2023: £10.4m) and a cash balance of £12.8m (2023: £10.8m). Working capital has increased steadily over the last few years as surpluses have been retained in the business. Forecast cash available shows significant headroom against future working capital requirements and we are in a good position to meet the challenges ahead.

At the year-end, the unrestricted reserves balance was £14.2m (2023: £13.0m) and the total reserves balance, which includes the pension reserve, was £5.4m (2023: £3.6m). Our total reserves are building, and financial sustainability is strengthening as Turning Point progresses through its strategic period in good financial health.

Turning Point has been successful in retaining retendered contracts with effect from April 2024, including substance use services in Suffolk and learning disabilities services in Rotherham. The Wakefield learning disabilities contract has been retained and increased in value and a contract extension has been awarded for the North Tyneside substance use contract from April 2025.

At the start of the financial year 2024-25 a new learning disabilities service opened in Kent and substance use service in Lincolnshire. These services demonstrate Turning Point's ambition to continue with sustainable growth of the business, which is evidenced by the year-on-year increase of both turnover and operating surplus.

The business will continue to drive cost efficiencies, and a contract has been agreed with a new provider of agency staff, which commenced in June 2024. We are continuing to develop our products and find innovative ways of supporting people, through engagement with the people we support and commissioners, and this will drive future growth and secure retention of our current contracts.

Accounting policies (continued)

These activities underpin the budgets and cash forecasts for 2024-25 and 2025-26, which have been reviewed and challenged by the Board. In addition, the Board has considered the organisation's ability to respond to the longer-term challenges facing health and social care providers and changes in the economic environment and are implementing a corporate strategy that will ensure the continuing financial viability of the business.

After due consideration, the Board has a reasonable expectation that the Group has adequate resources to continue its activities for the foreseeable future. Accordingly, the directors continue to adopt the going concern basis in preparing the financial statements as outlined in the Statement of Directors' Responsibilities.

2.3 Basis of consolidation

The financial statements consolidate the accounts of the Charity and its trading subsidiary, Turning Point (Services) Limited under the purchase method.

The Charity's jointly controlled entity, Northern Pathways Limited, incorporated under the Companies Act 2006, was accounted for under the equity method of accounting. Northern Pathways Limited was dissolved on 12 April 2022.

Investments in subsidiaries are accounted for at cost less impairment in the individual financial statements.

2.4 Turnover

Turnover represents contract and grant income from statutory sources (including rents net of voids), payments from residents and donations. Grant income is recognised when the related provisions for the grant have been met. Donations are recognised when the charity is legally entitled to the income and the amount can be quantified with reasonable certainty. All other income is accounted for on an accruals basis at the point the service is delivered and donation income is accounted for on a cash basis.dx

2.5 Value added tax (VAT)

Turning Point and Turning Point (Services) Limited are members of a VAT group and operate the standard method for partial exemption. Irrecoverable VAT is recognised as an expense when the tax point of the relevant expenditure is reached.

2.6 Taxation

A current corporation tax charge is recognised for the amount of corporation tax payable in respect of the taxable income for the current or past reporting periods using the tax rates and laws that have been enacted or substantively enacted by the reporting date.

Turning Point is a registered charity that is exempt from taxation on income and gains to the extent that they fall within the exemptions for charities in Part 11 Corporation Tax Act 2010 or s.256 of the Taxation of Chargeable Gains Act 1992.

The non-charitable subsidiary typically claims relief against its taxable profits by making gift aid payments to Turning Point.

Accounting policies (continued)

2.7 Capital grants

Capital grants (including social housing grants) are provided for in creditors and written off in the Statement of Comprehensive Income over the expected period of the useful life of the assets acquired.

2.8 Accrued income

Accrued income is classified as "Debtors" and includes contract and grant income (especially outcome related income) that will probably be received in a reporting period after that to which it relates.

2.9 Deferred income

Contract income and revenue grants are recognised as income in the period in which the performance criteria are met.

Deferred income is classified as "Creditors: amounts falling due within one year" and includes contract and grant income received in advance. These contracts and grants represent funds that have been received for specific purposes and are potentially refundable if the conditions of the contract or grant are not satisfied.

Contract and grant income received in the year but which remains unspent at the year-end is, with the agreement of the funder, carried forward in creditors at the year-end to be spent in the following year.

2.10 Fixed assets and depreciation

Depreciation is provided by the Charity to write off the cost net of grant less the estimated residual value of tangible fixed assets in equal instalments over their estimated useful economic lives as follows:

- Freehold properties and improvements to freehold properties are depreciated over 50 years.
- Improvements to leasehold properties are depreciated over the shorter of the term of the lease and the expected useful life of the asset.
- Fixtures and fittings, office equipment and motor vehicles are depreciated over 3 years
- Software is depreciated over 3 years

In accordance with the Housing SORP 2018: Statement of Recommended Practice for Registered Social Housing Providers, the overall cost of any property, fixtures and fittings, and office equipment is split between significant components to enable each component to be depreciated according to its economic useful life. The categories of components and the relevant depreciation rates are those listed above. A 'significant component' will have a:

- Cost greater than £10,000, AND
- Cost greater than 10% of the whole asset, AND
- Have a useful economic life of less than half that of the whole asset.

Where a component is replaced or restored, the carrying amount of the old component will be disposed of and the new component will be capitalised.

The Charity adopts a policy to write off, in the year of acquisition, items costing less than £3,000.

Accounting policies (continued)

2.11 Improvement to properties

Expenditure on existing housing properties is capitalised to the extent that it improves the economic benefit of the asset either through an increase in rental income, a reduction in maintenance costs or through an extension of the life of the property.

2.12 Operating leases

Rents payable and motor vehicles under operating leases are charged on a straight-line basis over the term of the lease.

Rental lease commitments are measured at the full cost of the lease payments to the date on which the Charity expects to leave each property.

2.13 Provision for liabilities

Provisions are recognised when the Group has a present obligation (legal or constructive) because of a past event, it is probable that the Group will be required to settle the obligation, and a reliable estimate can be made of the amount of the obligation. The amount recognised as a provision is the best estimate of the consideration required to settle the present obligation at the end of the reporting period, considering the risks and uncertainties surrounding the obligation.

2.14 Financial instruments

The Charity's financial instruments consist of debtors, cash and creditors and as such are all basic in nature as defined in FRS 102. They are measured at the cash consideration expected to be paid or received.

2.15 Pension costs

The Charity operated a defined benefit pension scheme, which is contracted-out of the State Scheme and provides benefits based on final pensionable pay. The scheme is a multi-employer pension scheme, and it is not possible to identify the assets and liabilities of the scheme which are attributable to the Charity. In accordance with FRS 102 the scheme is accounted for as a defined contribution scheme. The assets of the scheme are held separately from those of the Charity. The funds are valued every three years by a professionally qualified independent actuary, the rates of contribution payable then being determined by Pension Trustees on advice of the actuary. The latest completed triennial actuarial valuation took place on 31 March 2022. The Charity has provided for the committed contributions payable, discounted appropriately, to fund the deficit of the scheme.

The defined benefit scheme closed on 31 March 2012 and on 1 April 2012, Turning Point started a defined contribution scheme.

The Charity also has employees who are members of Local Government Pension Schemes which are defined benefit schemes. The defined benefit pension schemes' current service costs are charged to the Statement of Comprehensive Income within staff costs. The expected return on the schemes' assets less the schemes' interest costs are credited within other interest. The schemes' actuarial gains and losses are recognised immediately as other recognised gains and losses. The defined benefit schemes' assets are measured at fair

Accounting policies (continued)

value at the year-end date. The schemes' liabilities are measured on an actuarial basis at the year-end date using the projected unit method and discounted at a rate equivalent to the current rate of return on a high-quality corporate bond of equivalent term to the schemes' liabilities. The resulting defined benefit asset or liability is presented separately after other net assets on the face of the Statement of Financial Position.

The Charity pays contributions to the NHS Pension Scheme in relation to employees who are members. This is a defined benefit public service scheme, and the costs are charged to the Statement of Comprehensive Income in the period to which they relate.

2.16 Designated reserves

The Charity had no designated reserves at 31 March 2024.

2.17 Investments

The only investments held by the Group are in its subsidiary and jointly controlled entity.

- Subsidiary undertaking – The investment in the subsidiary is valued at cost less provision for impairment.

3. Judgements in applying accounting policies and key sources of estimation uncertainty

The principal risks and uncertainties of the business are set out in the Strategic Report, together with the actions taken to mitigate these risks.

The directors have considered the residual risks and have received adequate assurance that they do not cast significant doubt on the business's ability to continue as a going concern.

In the application of the entity's accounting policies, which are described in note 2, the directors are required to make judgments, estimates and assumptions about the carrying value of assets and liabilities that are not readily apparent from other sources. The estimates and underlying assumptions are based on historical experience and other factors that are relevant. Actual results may differ from these estimates.

The estimates and underlying assumptions are reviewed on an on-going basis. Revisions to accounting estimates are recognised in the period in which the estimate is revised, if the revision affects only that period, or in the period of the revision and future periods, if the revision affects the current and future periods.

The key sources of estimation uncertainty that have a significant effect on the amounts recognised in the financial statements are summarised below:

- Reinstatement provision – Turning Point has provided for its potential reinstatement liability to cover expected building costs when leased properties are returned to the landlord. The potential liability has been calculated for properties where a reinstatement requirement exists in the contract, and based on a valuation of works or estimated cost per square metre.

- Pension provision – Turning Point has an obligation to pay deficit funding contributions into the defined benefit pension scheme. This provision is dependent on several factors including discount rate, life expectancy and asset valuations. The assumptions reflect historical experience and current trends. Management have made the judgement to treat the Turning Point Pension Scheme as a defined contribution scheme. The scheme is a multi-employer pension scheme, and accurate information to allocate the assets and liabilities to the Charity is not currently held. Therefore, in accordance with FRS 102 the scheme is accounted for as a defined contribution scheme.

- Defined benefit pension schemes – Turning Point has obligations to pay pension benefits to certain employees who are members of Local Government Pension Schemes. The cost of these benefits and the present value of the obligation depend on several factors including life expectancy, salary increases and the discount rate on corporate bonds. Management reviews the actuaries' estimates of these factors which determine the net pension obligations in the Statement of Financial Position. The assumptions reflect historical experience and current trends.

NOTES TO THE FINANCIAL STATEMENTS FOR THE YEAR ENDED 31 MARCH 2024

4. Turnover and operating surplus - 2024 Group

	Turnover	Operating costs	Operating surplus
	£000	£000	£000
Income and expenditure from lettings			
Supported housing accommodation:			
Residential services	**66,348**	**(59,625)**	**6,723**
Non-residential services	**98,783**	**(89,764)**	**9,019**
	165,131	**(149,389)**	**15,742**
Other income and expenditure	**135**	**(13,718)**	**(13,583)**
	165,266	**(163,107)**	**2,159**

Turnover and operating surplus - 2023 Group

	Turnover	Operating costs	Operating surplus
	£000	£000	£000
Income and expenditure from lettings			
Supported housing accommodation:			
Residential services	66,417	(62,102)	4,315
Non-residential services	86,185	(75,546)	10,639
	152,602	(137,648)	14,954
Other income and expenditure	172	(13,779)	(13,607)
	152,774	(151,427)	1,347

NOTES TO THE FINANCIAL STATEMENTS FOR THE YEAR ENDED 31 MARCH 2024

5. Turnover and operating surplus - 2024 Charity

	Turnover	Operating costs	Operating surplus
	£000	£000	£000
Income and expenditure from lettings			
Supported housing accommodation:			
Residential services	**65,749**	**(59,625)**	**6,124**
Non-residential services	**97,891**	**(89,756)**	**8,135**
	163,640	**(149,381)**	**14,259**
Other income and expenditure	**140**	**(13,719)**	**(13,579)**
	163,780	**(163,100)**	**680**

Turnover and operating surplus - 2023 Charity

	Turnover	Operating costs	Operating surplus
	£000	£000	£000
Income and expenditure from lettings			
Supported housing accommodation:			
Residential services	65,782	(62,182)	3,600
Non-residential services	85,361	(75,366)	9,995
	151,143	(137,548)	13,595
Other income and expenditure	179	(13,778)	(13,599)
	151,322	(151,326)	(4)

The further analysis of income and expenditure from lettings in notes 6 and 7 reflects the disclosure required by the Accounting Direction for Registered Providers of Social Housing from January 2022.

NOTES TO THE FINANCIAL STATEMENTS FOR THE YEAR ENDED 31 MARCH 2024

6. Income and expenditure from lettings – Group

	Residential services 2024 £000	Non-residential services 2024 £000	Total 2024 £000	Residential services 2023 £000	Non-residential services 2023 £000	Total 2023 £000
Income from lettings						
Rent receivable	**752**	**136**	**888**	790	8	798
Service charge receivable	**1,264**	**180**	**1,444**	1,282	74	1,356
Net rents receivable	**2,016**	**316**	**2,332**	2,072	82	2,154
Revenue grants from local authorities and other agencies	**64,332**	**98,467**	**162,799**	64,345	86,103	150,448
Total income from lettings	**66,348**	**98,783**	**165,131**	66,417	86,185	152,602
Expenditure on letting activities						
Services	**45,862**	**68,842**	**114,704**	48,198	58,259	106,457
Management	**11,492**	**17,251**	**28,743**	11,709	14,153	25,862
Routine maintenance	**464**	**833**	**1,297**	404	516	920
Planned maintenance	**124**	**196**	**320**	125	156	281
Rent losses from bad debts	**34**	**3**	**37**	54	18	72
Property lease charges	**1,484**	**2,382**	**3,866**	1,472	2,304	3,776
Depreciation of housing properties	**165**	**257**	**422**	140	140	280
Total expenditure on lettings	**(59,625)**	**(89,764)**	**(149,389)**	(62,102)	(75,546)	(137,648)
Operating surplus on letting activities	**6,723**	**9,019**	**15,742**	4,315	10,639	14,954
Void losses			**3,275**			3,816

NOTES TO THE FINANCIAL STATEMENTS FOR THE YEAR ENDED 31 MARCH 2024

7. Income and expenditure from lettings - Charity

	Residential services 2024 £000	Non-residential services 2024 £000	Total 2024 £000	Residential services 2023 £000	Non-residential services 2023 £000	Total 2023 £000
Income from lettings						
Rent receivable	**752**	**136**	**888**	790	8	798
Service charge receivable	**1,356**	**180**	**1,536**	1,336	69	1,405
Net rents receivable	**2,108**	**316**	**2,424**	2,126	77	2,203
Revenue grants from local authorities and other agencies	**63,641**	**97,575**	**161,216**	63,656	85,284	148,940
Total income from lettings	**65,749**	**97,891**	**163,640**	65,782	85,361	151,143
Expenditure on letting activities						
Services	**45,862**	**68,836**	**114,698**	48,262	58,114	106,376
Management	**11,492**	**17,249**	**28,741**	11,725	14,118	25,843
Routine maintenance	**464**	**833**	**1,297**	404	516	920
Planned maintenance	**124**	**196**	**320**	125	156	281
Rent losses from bad debts	**34**	**3**	**37**	54	18	72
Property lease charges	**1,484**	**2,382**	**3,866**	1,472	2,304	3,776
Depreciation of housing properties	**165**	**257**	**422**	140	140	280
Total expenditure on lettings	**(59,625)**	**(89,756)**	**(149,381)**	(62,182)	(75,366)	(137,548)
Operating surplus on letting activities	**6,124**	**8,135**	**14,259**	3,600	9,995	13,595
Void losses			**3,275**			3,816

8. Operating surplus

The operating surplus is stated after charging:

	Group 2024 £000	Group 2023 £000	**Charity 2024 £000**	Charity 2023 £000
Housing depreciation	**444**	317	**444**	317
Depreciation of other tangible owned fixed assets	**210**	158	**210**	158
Amortisation of capital grant on housing properties	**(6)**	(7)	**(6)**	(7)
Audit fees payable	**73**	68	**37**	34
Loss on disposal of investment in subsidiary	**-**	1	**-**	1
Hire of plant and machinery - rentals payable under operating leases	**1,139**	903	**1,139**	903

9. Auditor's remuneration

	2024 £000	2023 £000
Fees payable to the Group's auditor	**92**	86
Fees payable to the Group's auditor and its associates in respect of:		
Audit of charity	**37**	34
Audit of subsidiary	**36**	34
Tax compliance and advisory services	**4**	4
Accounts preparation fee	**15**	14
	92	86

10. Employees – Group and Charity

Staff costs were as follows:

	2024 £000	2023 £000
Salaries	**112,544**	104,489
National insurance	**9,671**	8,771
Pension contributions	**3,992**	3,885
	126,207	117,145

The average monthly number of employees, including the chief executive, during the year was as follows:

	2024 No.	2023 No.
Management and administration	**801**	772
Operational	**3,041**	2,949
	3,842	3,721

The key management personnel of the charity and the group comprises the executive directors, operating board members, and non-executive board members. The headcount of key management personnel during the year was 7 executive directors and operating board members, and 7 non-executive directors (2023: 7 ED and 8 NED).

The total employee benefits of the key management personnel of the charity and group were £1,167k paid to executive directors and operating board members and £32k paid to non-executive board members (2023: £1,124k, £36k).

During the year, 17 employees were paid a total of £97k as compensation for the termination of their employment before the normal retirement date. A total of £107k was paid to 21 employees who accepted the offer of voluntary redundancy. The payments are fully recognised in the Statement of Comprehensive Income for 2023-24, being the period in which the plans were finalised.

The average number of full-time equivalent persons (including the chief executive) employed during the year:

	2024 No.	2023 No.
Management and administration	**643**	612
Operational	**2,567**	2,518
	3,210	3,130

10. Employees – Group and Charity (continued)

The full-time equivalent number of staff whose remuneration payable in relation to the period of account fell within the following bands:

	2024 No.	2023 No.
Group and Charity		
£60,001-£70,000	**32**	17
£70,001-£80,000	**12**	7
£80,001-£90,000	**8**	10
£90,001-£100,000	**8**	6
£100,001-£110,000	**5**	2
£110,001-£120,000	**1**	3
£120,001-£130,000	**2**	1
£130,001-£140,000	**-**	4
£140,001-£150,000	**6**	2
£150,001-£160,000	**3**	2
£160,001-£170,000	**1**	2
£170,001-£180,000	**-**	1
£180,001-£190,000	**-**	-
£190,001-£200,000	**-**	1
£200,001-£210,000	**1**	-
£210,001-£220,000	**-**	-
£220,001-£230,000	**-**	1
£230,001-£240,000	**1**	-
	80	59

11. Directors' and trustees' emoluments

	2024 £000	2023 £000
Group and Charity		
Directors' emoluments (including pension contributions and benefits in kind)	**758**	456
Directors' pension contributions (included above)	**26**	21

11. Directors' and trustees' emoluments (continued)

The headcount of directors during the year was 4 (2023: 2).

Three directors were paid pension contributions during the year (2023: 2).

	2024	2023
	£000	£000
Non-executive trustees' emoluments (including expenses)	**32**	36

£Nil (2023: £Nil) of travel expenditure was reimbursed to 0 (2023: 0) trustees.

The emoluments of directors disclosed above (excluding pension contributions and benefits in kind) include amounts paid to:	**2024** £000	2023 £000
The highest paid director	**242**	232
Pension contributions of the highest paid director	**15**	14

The company paid emoluments of £4k to two directors of Turning Point (Services) Limited during the year (2023: £4k to two directors).

Details of the nature of the chief executive's pension arrangements:

The CEO is an 'ex defined benefit' member of the Group Personal Pension Plan with Legal & General, as she was an active member of the Turning Point Pension Scheme at 31 March 2012.

No enhanced or special terms apply.

The Group contributed 6% to the GPPP on behalf of the CEO, and did not contribute to any individual pension arrangements.

12. Interest receivable

	Group 2024 £000	Group 2023 £000	**Charity 2024** £000	Charity 2023 £000
Interest receivable	**381**	162	**381**	162
	381	162	**381**	162

13. Taxation

Turning Point is a registered charity. Under Part 11 Corporation Tax Act 2010 and s.256 of the Taxation of Chargeable Gains Act 1992, it is entitled to exemption from Corporation Tax on donations, certain investment income and gains, property income, and on profits from any trading activities exercised in the course of carrying out a primary purpose of the charity, so long as they are applied to Turning Point's charitable purposes.

Turning Point (Services) Limited intends to donate a sum equivalent to any taxable profits to Turning Point, to reduce the company's tax liability to nil.

Northern Pathways Limited did not trade during the year and was dissolved on 12 April 2022. The company did not make a profit for tax purposes and does not have a Corporation Tax liability.

There were no factors that may affect future tax charges.

14. Housing properties

Group and charity

	Housing properties £000	Work in progress £000	Total £000
Cost			
At 1 April 2023	**8,823**	**-**	**8,823**
Additions	**326**	**943**	**1,269**
Disposals	**(1,066)**	**-**	**(1,066)**
At 31 March 2024	**8,083**	**943**	**9,026**
Depreciation			
At 1 April 2023	**4,573**	**-**	**4,573**
Charge for the year	**444**	**-**	**444**
Released on disposals	**(1,066)**	**-**	**(1,066)**
At 31 March 2024	**3,951**	**-**	**3,951**
Net book value			
At 31 March 2024	**4,132**	**943**	**5,075**
At 31 March 2023	4,250	-	4,250

The aggregate amount of finance costs included in the cost of housing properties is £nil (2023: £nil). The aggregate market value of the properties is, in the opinion of the directors, in excess of net book value.

	2024 £000	2023 £000
Housing properties cost comprise:		
Freeholds	**2,758**	2,758
Short leaseholds (less than 50 years)	**5,420**	5,217
Long leaseholds (more than 50 years)	**848**	848
	9,026	8,823

14. Housing properties (continued)

Expenditure on works to existing properties	2024 £000	2023 £000
Capitalised in the year	1,269	339
Charged to income and expenditure	452	291
	1,721	630

15. Tangible fixed assets

Group and charity

	Motor vehicles £000	Fixtures and fittings £000	Office equipment £000	Software £000	Work in progress £000	Total £000
Cost or valuation						
At 1 April 2023	30	841	822	1,030	-	2,723
Additions	125	120	-	28	64	337
At 31 March 2024	155	961	822	1,058	64	3,060
Depreciation						
At 1 April 2023	22	752	781	919	-	2,474
Charge for the year on owned assets	42	84	27	58	-	211
At 31 March 2024	64	836	808	977	-	2,685
Net book value						
At 31 March 2024	91	125	14	81	64	375
At 31 March 2023	8	89	41	111	-	249

In accordance with the Housing SORP 2018, the overall cost of any property, fixtures and fittings, and office equipment has been split between significant components to enable each component to be depreciated according to its economic useful life.

16. Fixed asset investments

Turning Point the Charity owns 100% of the 100 £1 ordinary shares in Turning Point (Services) Limited amounting to £100 (2023: £100). Turning Point (Services) Limited is a company incorporated in Great Britain that provides support services to the Charity. It has total assets less current liabilities at 31 March 2024 of £2,828k (2023: £2,693k). Its trading profit for the year after Gift Aid was £135k (2023: £119k).

17. Debtors

	Group 2024 £000	Group 2023 £000	**Charity 2024 £000**	Charity 2023 £000
Rental debtors	**205**	126	**205**	126
Less: provision for bad debts	**-**	-	**-**	-
Net rental debtors	**205**	126	**205**	126
Due from statutory sources	**15,761**	15,606	**3,034**	3,809
Less: provision for bad debts	**(122)**	(320)	**(113)**	(156)
Net statutory debtors	**15,639**	15,286	**2,921**	3,653
Prepayments and accrued income	**4,954**	5,785	**3,134**	3,388
Other debtors	**142**	286	**142**	286
Amounts owed by group companies and joint ventures	**-**	-	**1,748**	239
	20,940	21,483	**8,150**	7,692

18. Cash and cash equivalents

	Group 2024 £000	Group 2023 £000	**Charity 2024 £000**	Charity 2023 £000
Cash at bank and in hand	**12,765**	10,817	**12,737**	10,789
	12,765	10,817	**12,737**	10,789

In October 2019, the Charity entered into a debenture with Turning Point (Services) Limited and Barclays Bank, which includes a cross guarantee and indemnity. If either Turning Point or Turning Point (Services) Limited defaults under any agreement entered into with Barclays Bank, then Barclays Bank may seek to recover any debts due to it from the other party.

Turning Point and Turning Point (Services) Limited have entered into this agreement to best facilitate when Turning Point (Services) Limited bids for contracts and they are delivered by Turning Point.

Turning Point holds a small number of bank accounts on behalf of clients who lack the required documents to open an account in their own name. Turning Point does not have control over the bank accounts. As a result, no amounts are recognised in the financial statements. The total held in such bank accounts as at 31 March 2024 was £79k (2023: £104k).

19. Creditors: Amounts falling due within one year

	Group 2024 £000	Group 2023 £000	**Charity 2024 £000**	Charity 2023 £000
Trade creditors	**3,433**	1,549	**3,433**	1,549
Other taxation and social security costs	**7,639**	6,845	**407**	(322)
Other creditors	**151**	1,416	**151**	970
Accruals and deferred income	**11,627**	12,125	**8,867**	8,611
	22,850	21,935	**12,858**	10,808

Barclays have a legal charge over 6 Penywern Road as security for Turning Point's overdraft facility. The NBV of 6 Penywern Road as at 31 March 2024 is £2,131k.

20. Deferred income

	At 1 April 2023 £000	Deferred £000	Released £000	At 31 March 2024 £000
Group	6,702	6,136	(6,702)	6,136
Charity	3,186	3,377	(3,186)	3,377

Contract income and revenue grants are recognised as income in the period in which the performance criteria are met. Where funds are received for specific purposes and are potentially refundable if the conditions of the contract or grant are not satisfied, they will be deferred, with agreement of the funder, until the performance criteria are met.

21. Creditors: Amounts falling due after more than one year

	Group 2024 £000	Group 2023 £000	Charity 2024 £000	Charity 2023 £000
Social housing and other grants	51	57	51	57
	51	57	51	57

22. Financial Instruments

	Group 2024 £000	Group 2023 £000
Financial assets		
Financial assets that are debt instruments measured at amortised cost	**28,751**	28,533
	28,751	28,533
Financial liabilities		
Financial liabilities measured at fair value through profit or loss	**10,863**	11,191
Financial liabilities measured at amortised cost	**9,074**	7,085
	19,937	18,276

Financial assets that are debt instruments measured at amortised cost comprise cash at bank, trade debtors, other debtors and accrued income.

Financial liabilities measured at fair value through profit and loss comprise the pension provision, reinstatement provision and other provision.

Financial liabilities measured at amortised cost comprise bank loans, trade creditors, other creditors and accruals.

23. Provisions

Group and Charity

	Pension provision £000	Reinstatement provision £000	Other provision £000	Total £000
At 1 April 2023	**9,411**	**1,735**	**45**	**11,191**
Additions	**-**	**525**	**-**	**525**
Releases	**(580)**	**(273)**	**-**	**(853)**
At 31 March 2024	**8,831**	**1,987**	**45**	**10,863**

The pension provision represents the discounted value of the agreed future contributions to be paid to the Turning Point defined benefit pension scheme by Turning Point. Turning Point agreed to pay contributions of £1,229k for the year ending 31 March 2023 and £1,353k for the year ending 31 March 2024, with contributions then increasing each year in line with CPI.

The reinstatement provision of £1,987k (2023: £1,735k) represents the amount set aside, based on individual property contracts, to cover expected building costs when Turning Point returns its leased properties to the landlord.

24. Restricted reserves

	2024 £000	2023 £000
Balance as at 1 April	-	428
Restricted income/(expenditure)	-	(428)
Balance as at 31 March	-	-

The restricted reserves of £428k as at 1 April 2022 related to income received to support the ADDER project and were fully spent in 2022-23.

25. Legislative provisions

The Charity and its subsidiaries are incorporated under the Companies Act 2006.

26. Statement of capital grant movements

	2024 £000	2023 £000
Balance as at 1 April	**57**	64
Amortised in year	**(6)**	(7)
Balance as at 31 March	**51**	57

27. Bedspaces

	Care Homes No.	Supported Living No.	Total No.
At 1 April 2023	**386**	**574**	**960**
Additions	**-**	**12**	**12**
Disposals	**(28)**	**(34)**	**(62)**
At 31 March 2024	**358**	**552**	**910**

28. Capital commitments

At 31 March 2024 the group had capital commitments of £nil (2023: £nil).

29. Pension commitments

Turning Point Pension Scheme

The total net pension cost for the group for the year was £3,214k for the defined contribution pension scheme (2023: £2,949k) and £1,353k for the defined benefit pension scheme (2023: £1,229k). Turning Point participated in the Turning Point Pension Scheme ("The Scheme") which is a defined benefit pension scheme. This is a multi-employer scheme covering Turning Point and Turning Point Scotland employees (and former employees). Turning Point Scotland left the Group and became a separate entity in 1999.

The Turning Point Pension Scheme is a defined benefit plan but is being accounted for as a defined contribution plan because the Scheme is a multi-employer non-segregated arrangement. This means that the assets and liabilities of the Scheme are not separately identified for the two participating employers.

The latest completed triennial actuarial valuation took place on 31 March 2022. The results showed assets of £113.3m, liabilities of £137.1m, and a deficit of £23.8m on a technical provisions basis. In order to remove the deficit by 31 January 2031, Turning Point agreed to pay contributions of £1,407k for the year ending 31 March 2025, with contributions then increasing each year in line with CPI.

Turning Point Scotland agreed to pay contributions of £423k for the year ending 31 March 2025, with contributions then increasing each year in line with CPI.

Contribution levels are subject to review at subsequent actuarial valuations.

The Scheme assets comprise 6% equities, 20% government and corporate bonds, 11% diversified growth funds, 60% Liability Driven Investment (LDI) and 2% property as at 31 March 2024. The Scheme assets also include cash held in the Trustees bank account, which comprises approximately 1% of the total asset holding at 31 March 2024.

We understand that the Scheme is set up on a "last man standing basis" whereby if one employer becomes insolvent, the other employer will be responsible for all the Scheme's liabilities.

The pension liability shown on the balance sheet is measured as the discounted present value of the contributions payable by Turning Point to eliminate its share of the Scheme's deficit. The deficit contributions are agreed with the Scheme's Trustees as part of the three-yearly actuarial valuation of the Scheme. The rate used to discount the future contributions is made by reference to market yields at the reporting date on high quality corporate bonds whose term is consistent with the estimated period of the future contributions. The unwinding of the discount rate is recognised as a finance cost in profit or loss in the period in which it arises.

Local Government Pension Schemes

Turning Point employs members of 6 Local Government Pension Schemes (LGPS) due to the takeover of services. These LGPS are funded defined benefit schemes, with assets held in separate trustee-administered funds.

At March 2024, the West Yorkshire LGPS was in surplus and Turning Point's share was valued at £663k. This surplus is not recognised as an asset in the Statement of Financial Position because it is not probable that Turning Point would receive a credit on exiting the fund.

The total defined benefit pension cost recognised in the Statement of Comprehensive Income is £8k and the projected cost for the year to 31 March 2025 is £8k.

29. Pension commitments (continued)

Turning Point has bonds totalling £33k provided to commissioners in respect of some of the LGPS. The reconciliation of the net pension scheme liability below relates to the Local Government Pension Schemes.

NHS Pension Scheme

Turning Point has employees who are covered by the provisions of the NHS Pension Scheme(s). Details of the benefits payable and rules of the scheme can be found on the NHS Pensions website at www.nhsbsa.nhs.uk/pensions. The scheme is an unfunded defined benefit scheme that covers NHS employers, GP practices and other bodies, allowed under the direction of the Secretary of State for England and Wales. They are not designed to be run in a way that would enable NHS bodies to identify their share of the underlying scheme assets and liabilities.

Therefore, each scheme is accounted for as if it were a defined contribution scheme. The cost to Turning Point of participating in each scheme is taken as equal to the contributions payable to that scheme for the accounting period. The contributions payable to the scheme by Turning Point for the year to 31 March 2024 were £494k.

In order that the defined benefit obligations recognised in the financial statements do not differ materially from those that would be determined at the reporting date by a formal actuarial valuation, the Government Financial Reporting Manual (FReM) requires that "the period between formal valuations shall be four years, with approximate assessments in intervening years". An outline of these follows:

a) A valuation of scheme liability is carried out annually by the scheme actuary (currently the Government Actuary's Department) as at the end of the reporting period. This utilises an actuarial assessment for the previous accounting period in conjunction with updated membership and financial data for the current reporting period, and accepted as providing suitably robust figures for financial reporting purposes.

   The valuation of scheme liability as at 31 March 2024, is based on valuation data as 31 March 2022, updated to 31 March 2024 with summary global member and accounting data. In undertaking this actuarial assessment, the methodology prescribed in IAS 19, relevant FReM interpretations and the discount rate prescribed by HM Treasury have also been used.

   The latest assessment of the liabilities of the scheme is contained in the scheme actuary report, which forms part of the annual NHS Scheme (England and Wales) Pension Accounts. These accounts can be viewed on the NHS Pensions website and are published annually.

b) The last published actuarial valuation undertaken for the NHS Pension Scheme was completed for the year 31 March 2022. The Scheme Regulations allow for the level of contribution rates to be changed by the Secretary of State for Health, with the consent of HM Treasury, and consideration of the advice of the Scheme Actuary and appropriate employee and employer representatives as deemed appropriate.

29. Pension commitments (continued)

Reconciliation of present value of LGPS plan liabilities and assets

	2024	2023
	£000	£000
Reconciliation of present value of plan liabilities:		
At the beginning of the year	**1,133**	9,989
Release of scheme assets on exit from scheme	**-**	(8,438)
Current service cost	**8**	10
Interest cost	**52**	42
Actuarial (gains)	**(41)**	(458)
Contributions	**(32)**	(12)
Past service cost	**-**	-
At the end of the year	**1,120**	1,133

	2024	2023
	£000	£000
Reconciliation of present value of plan assets:		
At the beginning of the year	**1,662**	9,989
Release of scheme assets on exit from scheme	**-**	(8,368)
Interest income	**77**	44
Actuarial gains	**76**	9
Contributions	**(32)**	(12)
At the end of the year	**1,783**	1,662

29. Pension commitments (continued)

	2024 £000	2023 £000
Fair value of plan assets	**1,783**	1,662
Present value of plan liabilities	**(1,120)**	(1,113)
Non-recognition of pension scheme asset	**(663)**	(529)
Net pension scheme liability	**-**	-

The amounts recognised in the Statement of Comprehensive Income are as follows:

	2024 £000	2023 £000
Current service cost	**8**	10
Interest (income)	**(25)**	(2)
Total	**(17)**	8

Principal actuarial assumptions at the Statement of Financial Position date (expressed as weighted averages):

	2024 %	2023 %
Discount rate	**4.80**	4.70
Future salary increases	**3.85**	3.95
Future pension increases (CPI)	**2.60**	2.70
Mortality rates		
- for a male aged 65 at accounting date	**21.0**	21.6
- at 65 for a male aged 45 at accounting date	**22.3**	22.9
- for a female aged 65 at accounting date	**24.2**	24.6
- at 65 for a female aged 45 at accounting date	**25.2**	25.7

29. Pension commitments (continued)

Major categories of plan assets as a percentage of total plan assets	2024	2023
	%	%
Equities	79	82
Property	3	3
Bonds	13	10
Cash	2	3
Other	3	2

30. Leasing commitments

Future minimum lease payments under non-cancellable operating leases are as follows:

	2024	2023
Group and Charity	£000	£000
Land and buildings		
Within one year	1,409	1,182
Within two to five years	2,315	2,188
After five years	622	586
	4,346	3,956
Other		
Within one year	1,001	879
Within two to five years	1,031	1,087
After five years	-	-
	2,032	1,966

31. Related party transactions

Group and Charity

Turning Point and Turning Point (Services) Limited are both entities incorporated in the United Kingdom. Turning Point is the only entity registered with the Regulator of Social Housing and is the parent company of Turning Point (Services) Limited, a wholly owned subsidiary. Turning Point is required to prepare consolidated financial statements that consolidate the accounts of the Charity and Turning Point (Services) Limited.

During the year, Turning Point (Services) Limited made an operating profit of £1,479k (2023: £1,351k). £1,473k (2023: £1,344k) will be gift aided to Turning Point. On 31 March 2024, Turning Point (Services) Limited owed £1,748k to Turning Point (2023: £239k).

Turning Point incurs all the costs associated with providing health and social care services to commissioners, including the employment of staff and contracting with suppliers. Turning Point charges Turning Point (Services) Ltd a percentage of the total income due to Turning Point (Services) Ltd each month, which reflects the risk that costs might exceed income in the future. The total recharged in the year was £125,179k (2023: £114,828k).

Northern Pathways Ltd was a jointly controlled entity between Turning Point and The Retreat York until it was dissolved on 12 April 2022. There were no transactions in the current or preceding financial year.

NHS contracts are not deemed to be a related party transaction for 2023-24.

32. Subsidiary undertakings

The following were subsidiary undertakings of the Charity:

Name	Class of shares	Holding	Principal activity
Turning Point (Services) Limited	Ordinary	100%	The provision of health and social care services primarily to people with drug or alcohol issues, mental health issues or a learning disability. **Registered office** America House, 2 America Square, London EC3N 2LU

The aggregate of the share capital and reserves as at 31 March 2024 and of the profit or loss for the year ended on that date for the subsidiary undertakings were as follows:

	Aggregate of share capital and reserves	Profit/(loss)
	£000	£000
Turning Point (Services) Limited	2,828	1,479
	2,828	1,479

TURNING POINT

England & Wales - Charity number 234887

Accounts

TURNING POINT

ANNUAL REPORT 2022/23

2022/23

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01

STRATEGIC REPORT

Who we are

At Turning Point, we constantly find ways to support more people to discover new possibilities in their lives.

We are a leading social enterprise, designing and delivering health and social care services in the fields of substance use, mental health, learning disability, autism, acquired brain injury, sexual health, homelessness, healthy lifestyles, and employment. We currently work in over 280 locations across England, empowering those we support to improve their health and wellbeing, learn, and bring about positive change in their lives.

What we do

Building on nearly 60 years of experience, we have expertise in delivering innovative, integrated support in a range of places including people's homes, workplaces, communities, and specialist settings.

Most of our services are commissioned by the public sector, but increasingly we're expanding ways in which people can access and pay for our support directly. We work closely with local authority adult social care and public health teams, the NHS, ICB (Integrated Care Boards), the Ministry of Justice, HM Prison and Probation Service, the Office for Health Improvement and Disparities, the Department for Work and Pensions and many private, benevolent, and voluntary, community and social enterprise (VSCE) organisations. As a social enterprise we invest any surplus we make back into the business, for the benefit of the people we support.

Our year in numbers

In 2022/23

* Based on Employee Engagement Survey responses

Turnover

£152.8m

Total number of people supported in 2022/23

171,468

Total number of people supported by our mental health services

94,201

Total number of people supported by our drug and alcohol services

65,124

Total number of people supported by our healthy lifestyle's services

8,557

Number of colleagues

4,818

Total number of people supported by our sexual health services

1,460

Total number of people supported by our learning disability services

1,211

Total number of people supported by our employment services

915

Total number of peer mentors

162

Total number of volunteers

68

Total number of locations

283

Percentage of employees with lived experience of the issues facing people we support for themselves or as a carer*

60%

Regulated services rated Good or Outstanding by CQC

94%

02

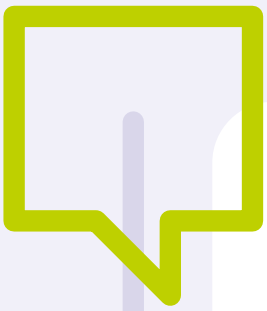
VISION AND VALUES

Our vision

- To constantly find ways to support more people to discover new possibilities in their lives.

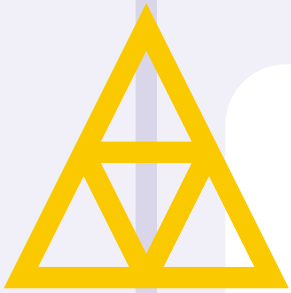
- The quality of our services means everything to us. The people we work with inspire us and in turn we look for new ways to inspire change. We owe it to the people we work with to grow and shape the future, because we believe in what we do.

Our values



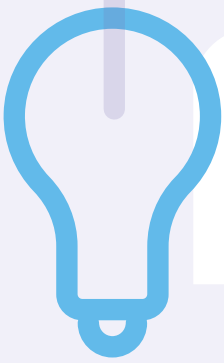
We all communicate in an authentic and confident way that blends support and challenge.

We treat each other and those we support as individuals however difficult and challenging.

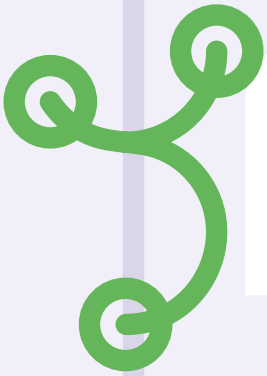


We commit to building a strong and financially viable Turning Point together.

We believe that everyone has the potential to grow, learn and make choices.



We deliver better outcomes by encouraging ideas and new thinking.



We are here to embrace change even when it is complex and uncomfortable.

03

CHAIR AND CHIEF EXECUTIVE'S STATEMENTS

Peter Hay CBE

Chair of the Turning Point Board

2022/23 has been another turbulent year. As the challenges of COVID-19 eased, political and economic instability ensued, leading to a cost-of-living crisis that impacted everyone. The health and social care sector has been particularly affected, as cost and demand outpaced funding and recruitment. Across the sector we have seen organisations struggle to fill vacancies, hand back contracts, and have difficult conversations with commissioners.

We have not been immune to these issues but overall, we have seen our services grow, with innovative new services coming to fruition. Our increasing social impact goes beyond the immediate service outcomes we are commissioned to deliver, benefiting our communities and society.

The involvement of people we support and board member visits to our services, have continued to guide our decisions and has directly informed the creation of an impressive Health and Wellbeing Guide for people with learning disabilities, and new clinical interventions including our sector-leading Blood-borne Viruses Strategy.

I am continually impressed by the passion, resilience and ingenuity shown by our workforce, shaped by our culture, values and vision. You will see many examples in this report of how 'Inspired by Possibility' is more than just a strapline – it is the principle guiding everything we do, particularly when times get tough.

I would like to take this opportunity to say thank you to Julie Bass and the wider management team, who have continued to display impressive leadership, navigating often unforeseen hurdles while providing a leading voice for change in the sector. I would also like to thank Paul Picknett for his valued contributions while on the Turning Point Board. Paul served on the board for nine years and was Vice Chair and Chair of the Audit, Risk & Quality Committee. Finally, welcome to Dawn Kenson, who joined the board in January 2023, bringing a wealth of experience from across the NHS, public and private sector.

After almost 60 years, Turning Point is still thriving, successfully recruiting, and retaining the best people and providing more support to those who need it. Challenges of the last year are likely to continue in 2023-24, but I am confident in our ability to achieve our new strategic goals, and to constantly find new ways to support more people.

Julie Bass

Chief Executive of Turning Point

I have always been proud to work at Turning Point and this year, as we responded to political and economic impacts beyond our control, it is even clearer what a truly inspiring place this is.

Post-COVID-19 and amid a cost-of-living crisis, Turning Point, and the health and care sector more widely, feel like very different places. Our partnerships across the VCSE (voluntary, community or social enterprise organisations) have been strengthened, as we work together to seek fairer funding, share innovations, fight against inequalities facing those who have learning disabilities and continue to challenge the stigma attached to mental health, substance use and sexual health support.

Despite the political and economic turmoil around us, Turning Point's values and culture have remained steadfast. Our new strategic goals, launched in April 2022, strengthen our commitment, and resolve to deliver high quality services that have lasting social impact.

By listening and working alongside the people we support, we have brought new ideas and services to the fore, supporting more people in more places. The expansion of our clinical team, focus on safer lives, and use of digital tools in our learning disability services, all provide new opportunities to achieve our goals.

Our colleague networks, use of technology and learning opportunities have also flourished, helping to ensure our colleagues feel supported and valued. Our annual #ProudToSay campaign is an opportunity for our people and those we support to share accomplishments and the things they are most proud of. This year the social media campaign reached 113,000 people. We saw the launch of Writing for our Lives, an inspiring book of poetry and illustrations; people we support shared their stories of living independently and starting new hobbies; colleagues shared the pride they feel challenging discrimination and learning new skills. Our Apprenticeship awards were also a lovely opportunity to recognise the successes of some of our team members.

I could not be prouder of our people and everything we continue to achieve as we look forward to 2024

Despite a challenging few years, we have seen incredible progress made by those struggling with their drug and alcohol use, their mental health, and unemployment issues. We have also witnessed significant achievements by many with a learning disability despite ongoing deep seated systemic inequalities.

I could not be prouder of our people and everything we continue to achieve as we look forward to 2024 when we mark our 60th anniversary – a significant milestone in our history. With a foundation of involvement, strong commitment to diversity and inclusion, and embracing innovation, it is exciting to think how far we've come over the last 60 years and how much more we are going to do.

04

NAVIGATING THE HEALTH AND SOCIAL CARE LANDSCAPE

A year of political and social turmoil

This has been a year of political change, economic challenges, and social turmoil.

Having come through the worst of the COVID-19 pandemic, external factors have continued to have a significant and direct impact on the people we support, the delivery of our services and the way they are commissioned. Our work to influence the policy and funding environment within which we operate, has never been more important.

During 2022, the cost of living increased sharply across the UK. The annual rate of inflation reached 11.1% in October 2022, a 41-year high. Low-income households spend a larger than average proportion of their disposable income on energy and food, so are more affected by price increases. Food bank charities reported an increase in demand while real household disposable income – a measure of real living standards – is expected to fall by a cumulative 5.7% during 2022/23 and 2023/24, the largest two-year fall since records began in 1956-57.

In response to the cost of living crisis, the government introduced a range of measures during 2022 including support for rising energy costs; payments for households receiving means-tested benefits, pensioners and people receiving disability payments; a council tax rebate for some households; a 5p cut to fuel duty; and an increase to the amount someone can earn before National Insurance Contributions are charged[1]. These measures provided much needed help, but financial pressures were of critical concern to many of the people accessing our services. We also provided additional support to our teams, as winter pressures were felt.

The UK employment rate was estimated at 75.7% between November 2022 and January 2023[2] with unemployment rates at their lowest for 50 years[3].

However, labour market participation, having risen since 2010 (despite the ageing of the population), has fallen dramatically in the wake of the pandemic, especially among older workers[4]. This has left the total labour force 520,000 people smaller than expected prior to the pandemic, despite increasing net migration[5], leading to labour supply issues. These workforce challenges have affected the health and social care sector particularly hard, requiring us to adopt new and distinct approaches to recruitment and retention in each of our areas of work.

Analysis by the ONS shows that between 2019 and 2022 the number of people aged 50-64 who were economically inactive due to long-term sickness rose by 16%, from nearly 1.137 million to 1.320 million and there is consensus on the fact that pressure on the NHS is likely to be a factor contributing to this increase[6].

Strike action has also been significant, with 282 different strike actions across the UK in January 2023[7] having a knock-on effect on a wide range of public services.

In November 2022, the government committed an additional £3.3 billion for 2023-24 and 2024-25 to protect the NHS from inflationary pressures. However, high inflation throughout 2022 meant that NHS budgets will now grow by 2.9% in real terms per year, below the planned spending rises set out in 2021. The financial challenges facing the NHS are compounded by rising wait times, a lack of available beds and workforce pressures that have a knock-on effect elsewhere in the sector.

At the 2022 Autumn Budget the government put more money into social care, with up to £2.8 billion

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1 https://commonslibrary.parliament.uk/research-briefings/cbp-9428/
2 https://www.ons.gov.uk/employmentandlabourmarket/peopleinwork/employmentandemployeetypes/bulletins/uklabourmarket/latest
3 https://www.employment-studies.co.uk/resource/labour-market-statistics-march-2023
4 https://publications.parliament.uk/pa/ld5803/ldselect/ldeconaf/115/115.pdf
5 https://www.ons.gov.uk/employmentandlabourmarket/peopleinwork/employmentandemployeetypes/bulletins/uklabourmarket/latest
6 https://blog.bham.ac.uk/cityredi/changing-labour-market-participation-of-people-aged-50-years-and-over/

more funding allocated for 2023-24 followed by £4.7 billion in 2024-25. However, social care continues to be under-resourced with significant unmet need and persistent workforce shortages.

Following a call for evidence, the expected announcement of a new 10-year mental health and wellbeing plan, was replaced by a 'Major Conditions Strategy' to include mental health and the long-awaited Health Disparities White Paper. Many in the sector felt this was a missed opportunity to bring much needed focus to these distinct areas.

Planned social care reform[8] was also delayed. Further integration with healthcare and an intervention in the social care market intended to ensure local authorities pay a 'fair price' to providers for the care they commission from them, was due in 2023 but has now been delayed until October 2025.

Following the passage of the 2022 Health and Care Act, Integrated Care Systems (ICS) were formalised as legal entities with statutory powers and responsibilities. ICS are partnerships of organisations working together to plan and deliver joined up health and care services. They are tasked with improving outcomes in population health and health care, addressing inequalities in outcomes, experience, and access, and enhancing productivity and value for money.

ICS represent a fundamental shift in the way the English health and care system is organised. They move the system away from competition, and the separation of commissioners and providers, to collaboration and a focus on places and local populations as the driving forces for improvement[9].

Turning Point, like others in the Voluntary, Community and Social Enterprise sector, remain concerned about the extent to which third sector providers can engage with the new structures and welcome the independent review of ICS launched in November 2022.

Throughout the last year, we have adapted to new commissioning environments, shone a light on challenges within the sector and worked with commissioners, partners and the people we support to develop new solutions in response to the ever-changing external environment we work in. As we look ahead, further political and economic shifts are likely, which we are well placed to adapt to.

75.7%

The UK employment rate was estimated at 75.7% between November 2022 and January 2023

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[7] https://citymonitor.ai/economy/tracking-the-impact-of-the-uk-strike-wave

[8] HM Government (2021) Build Back Better: Our Plan for Health and Care

[9] https://www.kingsfund.org.uk/publications/integrated-care-systems-explained#what-are-ICSs

Substance use in the spotlight

By Nat Travis, National Head of Service
Public Health and Substance Use

Following the publication of the Dame Carol Black report in July 2021 and the subsequent new Government Drug Strategy in December 2021, the last 12 months have brought about significant change within the substance use sector.

Our engagement with Collective Voice and working groups set up because of this has been invaluable in learning and sharing best practice. We have also been working with others across wider systems and communities, including through new Combating Drugs Partnerships, marking a new era of collaboration for the sector.

Whilst we retained our learning from the pandemic and kept remote delivery as a core part of our offer, we are seeing more and more of the people we support wanting to be seen face to face and many colleagues eager to work back in shared office spaces.

In April 2022 we saw the first year of a three-year period of funding to support the sector in realising the ambitions set out in the Drug Strategy and we had a keen focus on recruitment, retention, and workforce development. Overall, we increased our workforce by just over 140 roles in the last year with a range of professions and role types within this.

We continued our work within the Rough Sleepers Initiatives, funded by the Government in their commitment to end rough sleeping by 2025.

As we move forward and prepare for the second year of the funding, our focus is shifting to reviewing our wider treatment offer, ensuring we have a comprehensive learning and development offer and building our specialism around harm reduction and reducing drug and alcohol related deaths.

Overall, we increased our workforce by just over 140 roles in the last year

Fighting inequalities for those with a Learning Disability

By Davinder Jhuty, National Head of Service
Learning Disability

As we emerged from the peak of the pandemic, we reflected upon the inappropriate use of Do Not Resuscitate notices for people with a learning disability, and what this said about the systemic discrimination faced by those with a disability.

Following our successful campaign to stop this practice, we worked with Learning Disability England to amplify the voices and rights of this community and advocated for protections to be adopted to prevent prejudicial ways of working.

We have asked people with a learning disability about their experience of broader health inequalities. Based on what they told us, we have prioritised action to challenge and overcome unacceptable and unfair practices across the health system.

We were awarded NHS England & Improvement COVID-19 recovery funding to commence our Health & Wellbeing Programme. This targets health inequalities that disproportionately impact people with Learning Disabilities and their families. Our first step is to have richer structured conversations with individuals about physical, emotional, mental, financial, and social determinants of health and wellbeing. Using this information, we are developing person-centred Health & Happiness Plans that celebrate and support equity in the value and quality of their lives.

Our success relies upon well-trained motivated colleagues driving positive change. Despite challenging public sector budget constraints, we significantly enhanced our workforce pay, benefits, and wellbeing offer. We were also successful in being awarded funding from Health Education England to deliver improved workforce learning on identifying and challenging health inequalities.

Extending the reach of our Mental Health services

By Stephen Parker, National Head of Service
Mental Health

This has been a challenging but exciting year within our Mental Health services, as we've seen our reach across the sector grow both geographically, and in terms of specialism.

Despite the disappointing decision by the government not to publish a new mental health and wellbeing strategy, it has been good to see commissioners continue to seek new ways of supporting people's mental, not just physical, health.

We have developed projects in new areas, such as West Sussex, where we've opened supported accommodation and are about to launch a new service which will work with people in crisis as well as those who are leaving psychiatric hospitals. With a new learning disability service commencing in the summer, it is an opportunity to develop new management models and approaches for those who suffer from multiple issues.

We have also grown in scope, developing new projects with commissioners to reach more people. In Manchester, for example, we have developed a pilot, where we're providing move-on support to people being housed by other mental health organisations. In Stafford we have commenced a service in conjunction with our substance use colleagues to house and support street homeless people, and in our Crisis Point service, we are about to start a pilot where our colleagues will work within the local A&E to redirect people suffering from acute mental distress to alternative, more appropriate services for their needs. Continuing to innovate and work in partnership with commissioners to co-design projects and services is something we want to do much more of in the year ahead.

Clinical excellence and oversight

By David Bremner
Medical Director

Having emerged from the pandemic, we have added new roles to our clinical team and extended the range of services that we are able to provide the people we support.

The new Medicines Safety Officer role will drive the organisation towards even safer, higher quality and more contemporary use of medicines. The Safer Lives Lead dedicates resource to harm minimisation and learning from drug related deaths, working closely with the new Morbidity and Mortality Co-ordinator. These roles all serve the new learning, governance, morbidity, and mortality processes adopted over the last year.

This year has seen investment in Continuing Professional Development (CPD) programmes for colleagues and career progression both within and at times outside the organisation. We can celebrate these achievements within professions such as our new Nursing Awards. These awards celebrate the achievements of our nursing colleagues across the range of roles, from entry level apprenticeship Associate Nurses and Healthcare Assistants to Specialist Nurse Practitioners.

Services offered by the clinical team continue to go from strength to strength including:

- Our novel Pain Management Service, combining medical assessment with mindfulness and stress reduction.
- New treatment models such as the Mental Health Treatment Requirements (MHTR) which serve people with dual treatment orders across Somerset and Wiltshire. We are excited to have been involved in the shaping of national models and learning materials for Ministry of Justice and court colleagues.
- Contemporary interventions that focus on the mental health of people who use substances, such as Trauma Safety Toolkits, compassion focused groups, Talking Therapies groups for those we support and their friends and families, and the adoption of specific cognitive assessments for long-term alcohol users including the industry recognised Blue Light approach.
- Our centre of national excellence for Buvidal treatment continues to lead the organisation in its approach to new medications. Successful use of Buvidal as a detoxification medication has been brought into regular practice.
- Our Blood-borne Viruses (BBV) Strategy has expanded and is detailed later in this report. Our offer included the M-pox vaccination for the first time.
- We have also seen expansion in the role of Fibroscan, which became a standard offering across the organisation.
- Based on our Clinical Strategy, development of our workforce, rolling out new interventions, reaching new populations of people we support and a continued drive for high quality, have all gained traction over this last year.

The new Medicines Safety Officer role will drive the organisation towards even safer, higher quality and more contemporary use of medicines.

05

OUR STRATEGIC INTENT

Our new strategic period

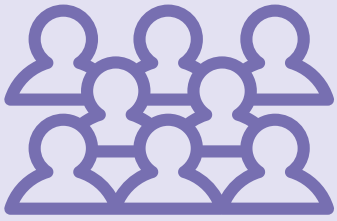
Our new strategic period runs from April 2022 to March 2027. The current strategy continues to see Turning Point forging new opportunities to integrate health and social care, while extending our reach, effectiveness, and use of technology.

Our vision and values remain an important constant in an uncertain world, while our strategic intent is now represented through the following strategic goals:

Support people to improve their health & wellbeing and bring about positive change in their lives;

Seek to reach more people and provide support at the earliest opportunity;

Prevent the escalation of need and reduce demand on the wider health and social care system



And, thereby creating enduring value for communities and society as a whole.

Our Stakeholders

Section 172 (1) statement

In discussions and decision-making during the year ended 31 March 2023, the Directors of Turning Point have acted in the way that is considered, in good faith, to be most likely to promote the success of the Company for the benefits of the people we support (recognised beneficiaries under company and charity law), with regards to all its stakeholders and to the matters set out in section 172 (1) (a-f) of the Companies Act 2006.

Our Stakeholders

The stakeholders of the organisation include the people we support, local communities, our employees, the purchasers of our services (public sector commissioners, businesses, and private pay clients), our regulators and our suppliers. Through active engagement, the views of stakeholders are gathered throughout the annual business cycle. A stakeholder framework has been developed to support with oversight of stakeholder groups and the material considerations of each group. This knowledge is considered when taking principal decisions throughout the year.

Strategy & Vision

The Turning Point Board met in November 2022 for focussed discussion on strategic matters relating to the new strategic period that commenced in April 2022. The charitable objects were reviewed in 2021 and updated to align with the new strategic period. The board regularly monitors and reviews the progress against the strategic intent through reports presented on operating and financial performance.

Our approach to stakeholder engagement during 2022/23

The people we support

The Company is a registered charity and under charity law has beneficiaries to whom public benefit is delivered in accordance with the charitable purpose of the company. At Turning Point, we support over 171,000 people each year. We provide health & social care services in a number of markets, including the health, care, employment and criminal justice sectors.

Our engagement channels include:

- Regular Board and senior leadership visits to our services.
- Individuals we support attending Operating Board meetings to share their experiences.
- Local forums and our national involvement groups bringing together the people we support to provide feedback and work in partnership to improve services.
- An annual survey gathers feedback from the people we support.
- A national involvement network brings together representatives from each service to share feedback and learning.

Outcomes of engagement:

- Quality improvement through feedback and co-production activities with forums.
- Turning Point policies informed by the voices of people we support through engagement with our national involvement groups.
- Experiences of people we support - their stories and perspectives are central to our external communications and contributions to external policy.

For further details see Results of National Service user survey on page 55.

Communities and local partners

Turning Point operates nationally, and our services are embedded within the wider community.

Our engagement channels include:

- Supporting local events and community initiatives.
- Building relationships with other community charities.
- Working in partnership with other local organisations.
- Promoting our National Community Innovation Fund.

Outcomes of engagement:

Services work positively and collaboratively with partners in local systems and communities to meet the needs of their local population, improve access for under-represented groups and involve service users in improving services.

Environment

Due to the impacts of climate change, it is imperative that the Company has due regard to its activities and the impact these have on the environment.

Our engagement channels include:

- Green Heart of Turning Point intranet site encouraging an environmentally conscious workplace.

- The introduction of a new Green Heart Yammer/ Viva Engage channel to engage employees in environmental matters and encourage individual action both at work and at home.
- The Director of Corporate Governance is the Net Zero Lead for the organisation for the purpose of NHS contracts.

Outcomes of engagement:

Environmental objectives are achieved through a clear policy and environmental management system. The Green Plan is approved by the board and sets out the commitment to minimising the impact on the environment from the business activities of the organisation.

For further details see Environment and energy reporting on page 89.

Our people

At Turning Point, we are a team of over 4,800 people; our workforce is made up of employees, peer mentors and volunteers, spread across 280 sites and supporting over 171,000 people a year across England. We rely on our people to deliver health and social care outcomes under contract to commissioning authorities and other organisations. We encourage effective and open communication at all levels within our organisation.

Our engagement channels include:

- Regular team meetings, communications, listening sessions and pulse surveys to gather and implement feedback.
- Speak Up feedback programme, including new-starter and leaver support.
- Employee Survey.
- Employee Voice national forum.
- Annual management event in June.
- The enterprise social network Yammer/Viva Engage for employees to connect and collaborate.

Outcomes of engagement:

- Yammer/Viva Engage was introduced to improve communication, collaboration and engagement across our varied teams, locations, shifts and business units.
- A dedicated microsite was established as a one-stop location for all communications, support, and government guidance, as well as links to other resources.

For further details see People report on page 62.

Principal Decisions in 2022/23

For each matter that comes before the Board of Directors, the board considers the likely consequences of any decision in the long term, identifies stakeholders who may be affected, and carefully considers their interests and any potential impact as part of the decision-making process.

The board made the following principal decisions during the year:

1. The appointment of Dawn Kenson as a non-executive director on 17 January 2023;
2. The appointment of Nicola Gilham as Chair of the Audit, Risk & Quality Committee on 26 July 2022;
3. The approval of the inter-company agreement between Turning Point and its wholly owned trading subsidiary Turning Point (Services) Limited on 17 January 2023.

06

PROGRESS AND IMPACT

Despite the challenges of 2022/23, the people we support, our teams and our services have continued to thrive. Existing services have reached new people in new ways, while new strategies and partnerships have allowed us to expand our reach to address unmet need in new areas.

With our new strategic goals as a guide, we share in this section some of the progress and impact we have made over the last year. Although activity may sit under a specific heading here, much of what we do applies to more than one goal at a time.

Strategic Goal

1

Support people to improve their health & wellbeing and bring about positive change in their lives

There are many ways we actively support people to improve their health and wellbeing. In this section we share details of some of the services we deliver that do just that.

We provide an update on our peer mentoring work and new electronic tools that help support planning. We outline new ways of delivering social prescribing, ways in which we're helping to end the need to sleep rough, and our new strategy to combat blood-borne viruses.

We also hear from Simon and David, with their personal experience of bringing positive changes to their lives.

The unique role that our peer mentors play

The pandemic had a huge impact on peer mentoring, as it did on many other areas of health and social care services. Social distancing measures and health vulnerabilities meant peer mentors were unable to continue volunteering in person in our services.

This forced us to think differently about how peer mentors could share their lived experience and be visible examples that recovery is possible. As an organisation we adapted our approach, offering peer mentor learning online and developing remote interventions for the people we support to access peer mentors both online and on the telephone.

The last year has given us the opportunity to reflect on what worked and what did not; what we want to do more or less of; and to continue to develop some of the innovations we piloted during the pandemic. This includes online peer support groups, outreach, telephone support, and video content.

Slowly and steadily, we have seen the return of in-person peer mentoring across Turning Point and are excited to see the scheme continue to develop in the year ahead.

Deb Hussey, Turning Point Safer Lives Lead: 'People with lived experience can provide unique insights into the issues that affect both themselves and their peer group, they can provide a connection to the communities we want to reach and an understanding of what interventions will be acceptable and successful. Daily I see the rapport that peer workers have with people we support and the unique and trusting relationships they build.'

CASE STUDY

David
Turning Point Peer Mentor

Hello, my name is David. I am a Peer Mentor at Turning Point in Ipswich. I used to be a Service User at Turning Point in the past.

When I was a child, I struggled a great deal when I was at school. At primary school I was always on my own and tried to sit at the back of the class so nobody would notice me. I could never keep up with what the teacher was writing on the black board. When I moved up to secondary school this continued, and I become a victim of bullying.

When I left school, I worked on farms and did well at agricultural college. Socially I belonged to Ipswich Young Farmers Club and later joined East Ipswich Camera Club. I also used to go to night clubs when I was a young adult, but I only consumed very small amounts of alcohol. Alcohol was not a problem for me at that time, but I always struggled to make friends and struggled terribly when it came to girlfriends and relationships.

After leaving school I worked with dairy cows on various farms until I was in my late 20s. I then worked in factories until I went back to farming and worked on a couple of pig farms. The last job I had was in a meat processing factory, but I haven't worked since then.

I got married when I was 42, but for all the wrong reasons. As a result, the marriage was a total disaster. I turned to alcohol to cope with those feelings and take those feelings that I couldn't cope with away. I also made two suicide attempts as things got so bad during this time.

My marriage ended after five years with me being arrested for being drunk and disorderly. I spent the night in a Police cell. The next morning, I was admitted into a mental health hospital and stayed there for two weeks. At this point I was homeless, and the council found me a place in a Bed and Breakfast.

It wasn't long before I resumed drinking alcohol and started getting arrested for being drunk and disorderly again. Another consequence of my drinking was several visits to A&E normally by ambulance. In 2015 I lost my driving licence for drink driving. This was devastating for me, and I started going to Alcoholics Anonymous meetings, but I struggled to put drink down. After a while I started attending Turning Point as a service user. I attended various Turning Point groups including Introduction to Change, Recovery Skills, and the Pre-Hab group.

Turning Point found a place in Rehab for me, but I was asked to leave after four weeks because they said that I had Aspergers Syndrome (Autism) and struggled with group therapy sessions as a result. Turning Point then found another Rehab for me and this time I stayed for the full three months, but I still couldn't stop drinking. I did some research into Aspergers Syndrome and Autism and I now have an NHS diagnosis of this.

I eventually managed to stop drinking. I have been sober since 17 January 2019 and haven't had any alcohol since. When I was about two months sober, I had triple bypass heart surgery and a heart valve replaced. That's over four years ago now.

In early 2022 I was offered a place on a course to train as a Peer Mentor for Turning Point. I completed my learning and once my enhanced criminal record check was done, I started mentoring.

I take a group called the Engagement Group now. I hope to continue this role in the future. I am also hoping to represent Turning Point in a Peer Mentor role at Woodlands, which is a mental health hospital in the grounds of Ipswich General Hospital. Turning Point are currently developing some dual diagnosis learning, and due to my own diagnosis of Autism, I am also hoping to contribute in this area as well.

Nourish: Using technology to enable happy, fulfilled lives

In 2022 the digital support planning tool, Nourish, was rolled out in seven of our homes. The introduction of Nourish across our learning disability support services enables us to spend less time updating time consuming paper records, and instead spend more time with the people we support.

What is it?

Nourish is an electronic tool accessible to staff via a computer or mobile device. It securely holds digital records for the people we support, allowing them to be updated in real-time without distracting from provision of care and support. Nourish also contains other tools to support care and improvement of outcome and experience for the people we support.

How does it help us?

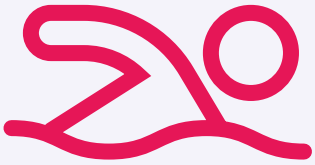
Nourish helps us to create and keep all records and support plans for individuals in one place, instead of maintaining lots of records in multiple locations. However, Nourish is not just about making our records accessible electronically. It helps us to record information at the point of support, involving the person and facilitating truly personalised support planning.

Giving people's support teams and their circles of support better visibility and evidence of care and planned activities, helps improve safety for everyone by identifying risk and preventing incidents.

The system notifies us when an action is needed, helping to ensure people are supported to attend all their health appointments and activities.

Linking the outcomes of people's monthly Happy and Healthy Wellbeing meetings to any identified needs in their Health Action Plan, as well as their annual GP Health checks enables our teams to support people to live the healthiest life possible.

CASE STUDY



Simon's love of swimming

Simon, who is supported by Turning Point in Bradford, has a learning disability and a physical disability, as well as being registered blind. Simon used to go swimming with his cousin when he was younger, and since COVID-19 restrictions have ended, they have started going swimming together again.

Colleagues at the leisure centre who observed Simon said he had the best time. They commented on the fact that Simon had the biggest smile on his face, he was so relaxed that he looked like he could fall asleep! They said it was clear by his facial expressions and body language that he was having a great time, and even when Simon returned home it was clear how much he had enjoyed himself. These are now going to be regular sessions for them both.

Nourish helps us to create and keep all records and support plans for individuals in one place

Specialist Social Prescribing in Birmingham

In 2021, Turning Point and Our Health Partnership (OHP), a GP partnership working across Birmingham and Shropshire, developed and launched the UK's first specialist social prescribing service, serving a total patient population of over 200,000 across 29 surgeries.

The difference between this specialist service and other social prescribing services is the enhanced support on offer for vulnerable groups and people with complex needs who often face chronic discrimination and exclusion. This can include sex workers, those struggling with substance use, acute mental health issues and or homelessness.

Turning Point's Specialist Link Workers work collaboratively with statutory and community organisations across Birmingham, including existing link workers. The team works with an individual for three to six months, visiting them in their own home and attending appointments with them, with a particular focus on ensuring they are getting the right support from specialist services.

As much as they want to, GPs are often unable to spend enough time with this cohort of patients. The specialist social prescriber role bridges the gap, reduces GP caseloads, and frees up clerical colleagues time by updating records directly.

Between October 2021 and September 2022:

- the service supported over 580 people to engage with a huge variety of specialist services.
- 174 people required less support from their GP with their emotional wellbeing and 123 people required less support with physical health as a result of engaging with the service
- 70 people with a learning disability, 151 with mental health issues and 185 struggling with substance use were supported by the team
- 7 people were supported in gaining employment and a further 10 people have been connected to prevocational opportunities by the service.

"Both anecdotally and in outcome data, it was clear that they were making an impact in a seldom heard cohort of patients. They are now supporting patients with a range of complex problems including life events, domestic violence, alcohol-abuse, anti-social behaviour, physical disability, benefit related issues, homelessness, compensation, and eviction etc., and participating in MDTs with service users and other ARRs (Additional Roles Reimbursement scheme). The service overall is proving to be useful in alleviating health inequalities in our PCN." **Dr Phil Saunders, GP and Clinical Director at Quinton and Harborne Primary Care Network (PCN).**

The service has proved successful in improving overall patient outcomes across all partner PCNs with 74.9% of people referred to the service achieving increased scores from most recent reporting [10].

"The Social Prescribing Service is proving to be very beneficial and a great way to improve the lives of many vulnerable adults."
GP, Weoley Park Surgery

A 33-year-old male who suffers from severe epilepsy, frequent seizures, and deteriorating mental health, needed support around housing issues and a Personal Independence Payment (PIP) claim. One of the specialist link workers met him face-to-face as he struggled to communicate over the phone due to a poor concentration span and frequency of seizures. They contacted the Department for Work and Pensions with his permission, and it emerged that they had records of his claim, but it was with the third-party assessor, ATOS. The specialist link worker requested a three-way telephone assessment and as a result, he was awarded PIP and £4,000 arrears.

Another person was referred for support with his immigration status, as he was at risk of persecution in his home country and wished to claim asylum. He was also contacting a local GP biweekly with suicidal thoughts. The link worker wrote to the local MP who agreed to write to the Home Office to request an urgent interview. Once the interview date was received, the link worker helped him to collate supporting evidence to open a bank account and to enrol at a local further education college. In April 2022 he was granted leave to remain in the UK and has been referred to mental health services and is receiving treatment for PTSD (Post Traumatic Stress Disorder).

[10] Turning Point outcome service data from July – September 2022.

Ending rough sleeping for good

Turning Point played a central role across the country as part of 'Everyone In'; the joint Government, local authority, NHS, and voluntary sector programme to provide rough sleepers with accommodation and to prevent homelessness during the COVID-19 pandemic. In 2022 the Government launched the next step - a new ambitious strategy 'Ending Rough Sleeping for Good'. The strategy commits £2 billion of funding until 2025 for tackling and preventing rough sleeping. Turning Point is committed to playing our part in addressing homelessness and ending the need to sleep rough in every area where we operate.

So many of the homeless people that we support in our services changed their lives with the support of 'Everyone In'. With a joined up and compassionate approach, linked to high quality accommodation and treatment, even people who had slept rough for many years moved into and kept accommodation.

To respond to 'Ending Rough Sleeping for Good' we developed a new approach by ensuring that every plan we do with every individual is joined up with housing and health care. We have received funding from the Rough Sleepers Drug and Alcohol Targeted Grant in 12 areas of England to provide specialist substance use treatment for homeless people. This grant is an acknowledgement that to address homelessness, the integration of housing and health care treatment, including substance issue treatment, is essential.

In 2022/23 we have delivered specialist services funded by this grant in the City of London, Hackney, Westminster, Oxford, the Royal Borough of Kensington and Chelsea, Wiltshire, Rochdale, Oldham, Leicester, Somerset, Hereford, and Slough.

In the City of Westminster, we have also developed a specialist pathway to work with Spice. Spice is a synthetic cannabinoid that is a particular issue preventing some homeless people from being able to settle in and maintain accommodation. The service provides both outpatient treatment as well as access to residential detoxification.

Ambitious plans for eliminating blood-borne viruses (BBV)

This year has seen excellent progress within services for the provision of BBV testing. In total, 6,476 dried blood spot tests (DBSTs) were conducted across our drug treatment services.

Services have been implementing our Hepatitis C Strategy to ultimately achieve micro-elimination by the end of 2023. The strategy of micro-elimination is based on targets set by NHS England to ensure people accessing services are offered a hepatitis C (hep C) test, with the majority being tested and starting treatment if their test result is positive.

As a result of our commitment to eliminate hep C as a major health concern, services have participated in a range of events including World Hepatitis Day and National HIV Testing Week, as well as local events throughout the year. For example, an event in our Rochdale and Oldham active recovery service achieved 60 DBSTs in one day. Currently we have four services that are on track to achieve micro-elimination in less than 6 months.

In October 2022, Turning Point participated in the NHS England Needs Assessment Project, supporting our local Operational Delivery Networks (ODNs) to achieve the required testing targets. Some services completed an exceptional number of tests, particularly City and Hackney (174 tests in the six-week project). The project has provided useful data across the country, aiding in creating an accurate and up to date picture of hep C.

To support all the fantastic work, we have maintained excellent relationships with our ODNs and peers at the Hepatitis C Trust. Having clear referral pathways and effective joint working that meets the needs of people we support has enabled us to engage over 390 clients who are positive for hepatitis C into specialist treatment.

This year also saw the launch of the Turning Point HIV Strategy. The strategy was collaboratively written by a range of people living with HIV both from within Turning Point and externally. It aims to ensure all services provide a safe space in which clients and colleagues can discuss HIV, people accessing the service can receive advice and HIV testing, and there are clear referral pathways so every person who tests positive for HIV can access treatment and support.

Strategic Goal

2

Seek to reach more people and provide support at the earliest opportunity

Building on almost 60 years' experience of delivering health and social care services, we continue to design and deliver new services, in new ways, to the people who need them most.

Livelife, Rightsteps, Fibroscan, our Resilience young person's service, and the further development of our Dual Diagnosis learning, are examples shared of how we seek to support people at the earliest point possible.

Introducing livelife online payment and launching couple counselling

This year livelife changed its assessment process to improve access and customer experience. This was a significant operational, marketing, and technical project, and reduced the number of people not attending their assessment. The change also allowed us to introduce a new Financial Services Authority (FSA) compliant payment solution that greatly improved the customer experience.

The new approach was implemented in January 2023 in conjunction with a new offer of Couple Counselling. Delivered by British Association for Counselling and Psychotherapy qualified therapists with specific learning in couple counselling, the service provides a space for partners to share wants and needs in a relationship, with an explicit aim of trying to improve the experience of the relationship for both people.

Both the new payment process and new Couple Counselling service have now successfully been implemented and incorporated into the website and other marketing materials, putting us in a far better position to reach more people looking for support.

Evolving our mental health and wellbeing employer support

The world of workplace mental health and wellbeing has been transformed over the last three years, with the pandemic bringing employee mental health to the forefront of employers' priorities.

Whilst some leading employers had already started their wellbeing journeys, for many this has represented a new area of focus, driven by a desire to meet their employees' needs and to ensure they are able to compete for and retain talent. This is a process of discovery for organisations, understanding what their employees needs really are and how to best meet them; both internally through changes to the working environment, culture, and practice, but also through the engagement with trusted experts Rightsteps.

During the last year we have continued to see strong engagement with Rightsteps products and services. Our online support has been used over 36,000 times with most people engaging with our early interventions, developing their self-knowledge, and discovering how they can best manage their own health and wellbeing. At the same time over 950 people have accessed in-depth therapeutic support with Rightsteps, exploring the challenges they have experienced with the guidance of our team of dedicated therapists. We also supported people through our Mental Health First Aid Group and one-to-one support, as well as those who attended our webinars.

A new development for Rightsteps has been the delivery of consultation services for organisations, directly helping them to understand and define the wellbeing-related challenges facing their organisation and then working collaboratively to co-design bespoke solutions that can meet their specific needs. This has resulted in new models of delivery that utilise our organisational skills and experience in new ways, engaging with groups of individuals whose needs would have otherwise gone unmet.

We have also written several workplace guides, on the menopause and managing Winter Pressures, which have proven helpful to organisations seeking to take steps to best support the wellbeing of their workforce.

Our Resilience service: helping young people build positive relationships

Over the last year, our Resilience wellbeing service in the London Borough of Hammersmith & Fulham has demonstrated a significant impact with young people, helping them to improve their relationship with substances, as well as their sexual health and navigation around relationships.

Most young people are initially referred into our service by other professionals and most of the young people decide to continue with the creation and completion of their bespoke care plan.

80%

of young people come to the Resilience service with substance use issues.

92% of young people left the service having achieved their personal aims. These aims are led by the young people themselves to ensure the care plans created are directly linked to their own interests and motivations – whether that's focusing on hobbies, career paths or other passions.

Working closely with their personal relationships and exploring sexual wellbeing in the context of supporting with their substance use aims has proven to be useful, with 70% of those engaging in substance use support also working on sex and relationship goals simultaneously.

The feedback gathered from the young people engaging with the team indicates they value the ability to address both areas of their life in one place with a consistent practitioner, rather than experiencing a potential barrier of needing to form a new rapport with a different service to speak about the interlinking topics separately.

Developing dual diagnosis learning to support health and social care professionals

In the early 2000's the term dual diagnosis (meaning the co-existence of harmful substance use and mental illness) rose to a level of prominence in the UK's health and social care system. Many initiatives were set up to attempt to align drug treatment and mental health and social care, to stop service users from falling through the gap between existing services. At that time, Turning Point published a toolkit which was used nationally for practitioners to understand the relationship between the two conditions, with useful tips on how to work with this cohort.

We also established the All-Party Parliamentary Group on Complex Needs and Dual Diagnosis, to raise awareness of the challenges facing those with dual diagnosis with policy makers.

From 2009 onwards, in part due to austerity and evolving commissioning priorities, much of this work was withdrawn, and services largely became siloed again. Over the next decade virtually no research, development or learning was carried out worldwide, although the issue persisted.

In the summer of 2021, we updated our toolkit, and its launch showed there is a huge unmet need for information and strategies for working with this group. At the same time Turning Point was approached by a person whose daughter, who suffered from a mental illness and alcohol dependence, had died whilst in the care of another organisation. She recognised a lack of understanding of the issues that those who fall between services face and provided funding for us to commission some dual diagnosis learning.

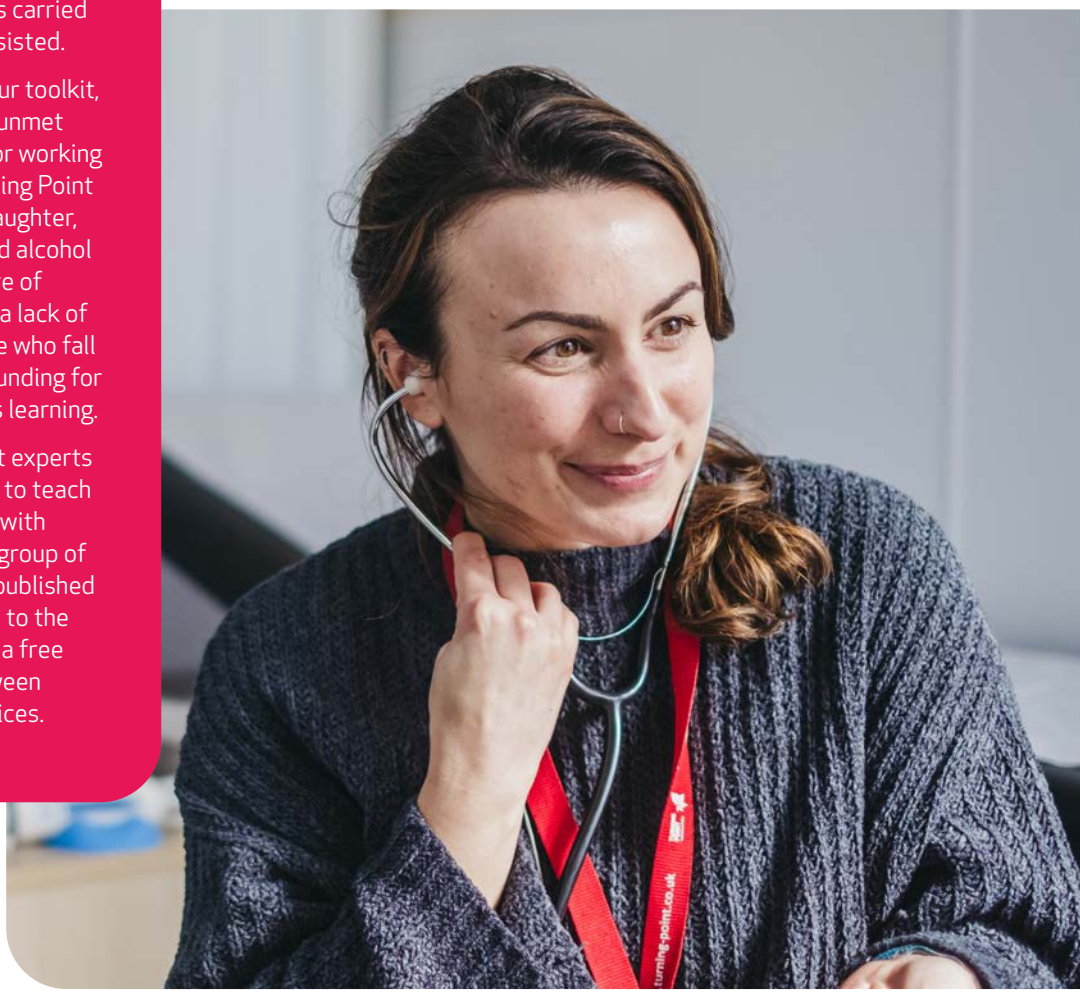
A small working group of Turning Point experts developed an online learning platform to teach the basics of dual diagnosis, together with basic strategies for working with this group of people. This e-learning is about to be published and will be offered both internally and to the wider health and social care sector as a free resource to try to bridge the gap between mental health and substance use services.

Early identification of liver disease

Alcoholic liver disease accounts for many alcohol-specific deaths. A Fibroscan is a simple and non-invasive procedure used to accurately assess the health of the liver and helps identify poor liver health at an early stage. It can be offered in the community and can extend service reach to people who have not previously engaged in treatment but who are at higher risk of liver disease, including rough sleepers, ex-military personnel, and those with poor mental health.

Turning Point has received funding for Fibroscan in some service areas, although all areas would benefit from offering this service. The earlier we can identify and stage liver disease, the earlier individuals can access the support they need to reduce alcohol-related harmful behaviour.

Our national alcohol pathway is being updated to include the offer of a Fibroscan exam at the earliest opportunity. Our ambition is to offer Fibroscan to everyone who comes to us for alcohol treatment and to those already engaging with our services within the next 12 months.



CASE STUDY

Using FibroScan in Leicester

The use of FibroScan technology by the Turning Point Leicester City service was initially funded by Leicester City Council with the aim of increasing the number of residents accessing alcohol treatment and to support positive behaviour change, to reduce harmful drinking behaviour. Funding has been initially agreed as part of an eight-month pilot with two specific cohorts:

1. Offered as part of Turning Point's alcohol dependent treatment pathway to Leicester City residents who are identified to have potential alcohol dependence and in structured treatment with Turning Point. Between August 2021 and July 2022, 123 structured treatment service users were offered FibroScan exams. 31 (32%) people who had the scan were referred to Hepatology, 28 had a liver stiffness higher than normal, five had a score indicating advanced Fibrosis and 16 had scores indicating cirrhosis of the liver.
2. Offered to registered patients within a pilot primary care GP site (Saffron Group Health) who are identified to have potential alcohol dependence but are ambivalent/ reluctant to engage in treatment. During the same period, 55 patients from this group were offered FibroScan exams. 11 (29%) had a liver stiffness higher than normal and were referred to Hepatology, five had a score indicating advanced Fibrosis and one service user had a score indicating cirrhosis. Approximately 30% of patients subsequently accepted a referral and entered structured treatment with Turning Point.

Strategic Goal

3

Prevent the escalation of need and reduce demand on the wider health and social care system

As well as delivering the right services in the right locations for the people referred to us, we take our role in the wider health and care system very seriously.

By recognising sometimes hidden needs, intervening early, providing a range of person-centred support and a broad range of effective interventions, we seek to prevent the escalation of need and reduce demand elsewhere. Our focus on safer lives and reducing alcohol and drug-related deaths is a key aspect of this work.

In this section, as elsewhere in this report, we also detail how our work helps ease pressure on GPs, A&E, mental health hospital beds, the criminal justice system and over-stretched housing provision.

Evolving our crisis services in Manchester

In Manchester, the team at our long-running Crisis Point service has continued to build on our reputation for being a trusted partner to the Greater Manchester Mental Health (GMMH) NHS Trust.

Crisis Point is almost 25 years old, and as well as providing seven beds for short-stay accommodation in Manchester's city centre for local people going through a mental health crisis, our team has successfully established The Recovery Lounge – also funded by GMMH.

This new service is based on the 'crisis café' model of offering a non-clinical alternative to A&E for people in crisis, and already well over 1,000 interventions have been delivered. As well as building a good relationship with GMMH NHS Trust, we are now working with Greater Manchester Police and taking referrals from their city-centre based officers who have been called out to incidents that are low level mental health crisis and don't require police resources.

GMMH have recently commissioned us to provide a 'Crisis Navigator' colleague every evening to be based in Manchester Royal Infirmary's A&E department with the Mental Health Liaison Team (MHLT). The aim of this project is to test out the viability of having experienced non-clinical support colleagues working alongside and in partnership with the MHLT in a busy A&E.

For many people who find themselves in crisis and then having to attend A&E, a non-clinical and therapeutic intervention is safe and appropriate, and this pilot project is aiming to find out if by having one of our 'Crisis Navigators' on site, that the appropriate support and intervention can be quickly arranged and delivered using local voluntary sector resources, without the need for a hospital in-patient admission or other more traditional and formal interventions.

It is hoped that if the pilot goes well, that this model will be rolled out to MHLTs in many other Greater Manchester Hospitals, and it has the potential to free-up significant NHS resources in our very busy and over-stretched A&E departments.

Expanding Talking Therapies in the local community

During 2022/23, Wakefield Talking Therapies and Total Wellbeing Luton received a total of 20,500 referrals of which 15,144 entered treatment. The average wait time to be assessed was 5.9 days, which engages people accessing our services quickly and as a result the average recovery rate for both services for the year was 52.3%. Satisfaction was also high at 91.2% in Luton and 95% in Wakefield, which is excellent.

Over the last year the Wakefield team focused on developing procedures to prioritise parents of children up to two years after birth. This included new perinatal and breastfeeding procedures and the introduction of several new workshops that are co-delivered with specialist midwives and health visitors. We also have two new groups around postnatal wellbeing and overcoming anxiety in pregnancy. As a result of this work, the service has now established a perinatal clinic which allows direct referral to perinatal assessment and allows them to access the service quickly.

In addition, the Wakefield service has worked with the local NHS Trust to set up a long COVID-19 hub – including a workshop co-delivered with clinical health psychologists and guided self-help group - as we are aware the long-term impact that this can have not only on physical health but mental health too.

Meanwhile, the team at Total Wellbeing Luton have been focusing on culturally adapted cognitive behavioural therapy (CBT) to meet the needs of their population and to improve access to psychological therapies for black and people of colour (BPOC). Evidence has shown BPOC clients are often under-represented in primary care mental health services yet are over-represented in secondary care mental health services. The service identified understanding different cultures as crucial to improving access into the service. Culturally adapted CBT learning looks at language and metaphors of specific cultures, with the aim of improving access to client groups. The team are encouraged to look and understand these factors when interacting with clients and possible implicit biases that they may hold. Bedfordshire University have been funded to provide an evaluation report.

Co-creating supported living spaces in Stafford

2022 saw us expand our geographical reach in Mental Health support with an exciting new project in Stafford. In October Turning Point was commissioned by Stafford Borough Council and the Department of Levelling Up & Communities (DLUC) to deliver a project that will support entrenched rough sleepers with complex needs, to become increasingly engaged with enablement, treatment, and recovery- focussed services.

The project comprises two workstreams: development of a six-bed 'high need' supported accommodation service, which will be occupied in July 2023, and a co-production project.

The goal of the project is advancing mental wellbeing, moving towards substance abstinence, increasing physical health and safety, whilst achieving betterment in financial and housing tenure security.

The six-bed supported living service will provide high quality accommodation for a targeted population of individuals with a history of rough sleeping, mental ill-health, problematic substance use, behaviours that are often classified as challenging to services and, in many cases, offending behaviours and early childhood trauma.

Our client group have previously had multiple housing opportunities which have not enabled them to escape the revolving door of repeat homelessness. Many will have developed coping strategies which were helpful to keep them safe when living on the streets, but when in an accommodation service are considered 'anti-social' and have consequently resulted in eviction and disengagement from support.

This experience has often resulted in an understandable lack of trust in 'the system' and professionals and, in some cases, an entrenched reluctance to engage with different services which are designed to assist them to improve their circumstances.

The role of the Turning Point team is to support individuals with rebuilding bridges to previously accessed services. Our vision is to deliver a completely different approach to supported living, which builds on people's strengths and maximises buy-in and co-production from the very beginning. We work in partnership with other agencies; engaging with people in a way that builds trust and makes sense to them, meeting them where they are on their journey.

The service is built with the input and direction of the people that will reside there at its heart. The service is staffed with a high skilled, highly motivated team who have received enhanced learning in mental health and substance use. They will work in a trauma informed, person-centred, whole person, multi-agency manner with tolerance levels much higher than similar services.

The team will work together with people who have been or are currently experiencing homelessness and other organisations with expertise, to shape Stafford's homelessness strategy and services by 2025. The aim is to build a community where those with direct experience of rough sleeping is as powerful as it can be, has genuine impact and brings about sustainable change.

Reducing barriers to moving on in Manchester

The Manchester Move On Project went live in August 2022. The pilot brings together the expertise of a multi-disciplinary team all under one roof to support people with mental health conditions living in supported accommodation services who are either:

- Facing barriers to moving on from supported accommodation; or
- At risk of their existing placement breaking down.

The service works with individuals, their families and carers, service providers, Community Mental Health Teams, and commissioning teams to identify and seek to overcome the barriers facing individuals which may prevent them from progressing in their lives. The overarching aim of the team is to support a smooth transition along the recovery pathway based on the needs of the individual. This aims to prevent and reduce the length of hospital admissions, ensuring that appropriate plans are in place to enable individuals to stay well and participate meaningfully in their communities.

The team comprises specialist clinical, social work, occupational therapy, housing and welfare and psychology expertise to formulate and deliver time-limited support plans seeking to move people forward on their recovery journeys.

Feedback from those engaging with the service indicates that they enjoy the opportunity to participate in their long-term care and support planning. Providers are appreciative of access to the experience and expertise of the multi-disciplinary team. We are hopeful that the pilot will be extended and continue to form an integral part of the mental health services framework in Manchester.

Providing mental health treatment requirements in Somerset

A Primary Care Mental Health Treatment Requirement (MHTR) is a psychological intervention (non-medicating) provided in the community. It is a sentencing option given by the Courts for eligible individuals who suffer from low to medium mental health problems, and can be combined with other Court ordered interventions, including a Drug Rehabilitation Requirement (DRR) and an Alcohol Treatment Requirement (ATR). A Primary Care MHTR can help with issues such as sadness, mood swings, drug or alcohol use, feelings of hurting yourself, relationship issues, anxiety, panic attacks and stress, anger, and low self-esteem.

We were awarded the Somerset contract which began in April 2022 and the North Somerset part of the service began in April 2023. The new combined service has been commissioned until 2025 and has a Clinical Lead (Forensic Psychologist, Kate Dinning), two Senior Assistant Psychologists, five Assistant Psychologists and five Peer Support Workers.

Kate Dinning, our Clinical Lead for the service has been asked by the Ministry of Justice to assist in the preparation and delivery of learning materials on MHTR to the judiciary on a national basis.

The service has been well received by people using it. Jake (not his real name) has said multiple times that he feels a "big difference" in himself since starting the MHTR and has a more positive outlook in general. He is also looking at starting private counselling/ psychotherapy after the MHTR ending due to his positive experience (which he admitted he wouldn't have even considered doing before).

We were awarded the Somerset contract which began in April 2022

Supporting our neurodiverse colleagues and clients

Turning Point services support many people who are neurodivergent and over the last 18 months, there have been several significant improvements made to our services.

The process started with the creation of the Autism and Neurodiverse Allies Forum. Around 90% of the membership are either colleagues who are autistic, have additional neurodiverse support needs, or have lived experiences through their children or immediate family, friends, and wider family members. We also have an autism lead and there are autism and neurodiverse allies in all Turning Point substance use services.

All colleagues complete the mandatory autism awareness learning regardless of their role within the organisation and are also offered advanced autism in practice learning. All substance use services are required to complete the autism friendly standards. Some people with autism can experience severe difficulties with the world around them including 'unfriendly' environments. The effect could be anything from a person having mild discomfort to symptoms of acute pain and deterioration in functioning. If the environment is distressing for the person this may stop them from accessing it.

Our autism standards are broken down into four sections: First is the physical environment (building and rooms). The second is colleagues understanding. Third is the support we provide people accessing our services. The fourth focuses on family and carers. Once completed we can look at any actions and consider any reasonable adjustments needed.

We've also adapted our initial paperwork across substance use services, including referral and assessment, to ensure we are asking the right questions around autism and neurodiversity from the very start.

Finding new ways to support sexual health and wellbeing

January 2023 saw the SASH (Support and Advice on Sexual Health) team host their first Mpox vaccination event at Teds Place in Soho. SASH is a partnership led by Turning Point, alongside NAZ, London Friend, METRO Charity and Marie Stopes UK. The service provides free, non-judgemental, and confidential support on sexual health, relationships, and mental health. Teds Place is a long-running gay venue hosting men-only nights, as well as nights for transexuals, gay men & their admirers.

Twenty individuals attended the event between 8.30pm and midnight, all had a sexual health discussion and fifteen received the Mpox vaccination. Of these, three were having their second and the other 12 having their first. Three of the five who didn't have the vaccine reported to already having had it, with just two not keen on the idea of the vaccine but still happy to discuss sexual health in general.

All really liked being able to access our support at Teds Place, and many asked if we would be coming back.

Reducing harm in substance use

My name is Deb Hussey and I'm Turning Point's National Safer Lives Lead. The purpose of my role is to support the development of Turning Point's response to the increase in drug related deaths. It allows me to be part of our increased focus on harm reduction, an area I am extremely passionate about. A big part of my role is increasing Naloxone awareness, distribution and carriage, a lifesaving medication that can reverse an overdose of opiates.

One of the things I love most about working for Turning Point is that the knowledge and perspective my own lived experience has given me is valued and utilised. I see the involvement of people with lived and living experience as a key part of everything I do.

I was recently part of a co-production project in Somerset, working alongside a group of five people who currently use Turning Point services. The project was to look at the barriers to carrying naloxone and to develop solutions to overcome those barriers. The priority for the group was not, as we had expected, to find solutions to make carrying the kits easier, but rather to challenge stigma with a public awareness campaign.

For me this highlighted why it's vital we put the people we support at the heart of what we do in designing any interventions aimed at them. Not only were this group able to bring their unique understanding to the project, but they were also able to see that their input was valued and through the finished materials, brought to life.

Our first Safer Lives Conference

On 30 November 2022, we welcomed around 100 delegates to our first Safer Lives conference, supported with an education grant from Ethypharm. Held in Birmingham, our aim was to bring together commissioners, public health officials, third sector organisations, the police, ambulance service and our partners in the sector to join in making a commitment to address the drug death crisis.

From across the drug and alcohol sector, colleagues from Change Grow Live, we are with you, Humankind and Cranstoun were in attendance, and it was inspiring to see so many people from different organisations coming together for a common goal.

At the start of the conference, Deb Hussey, Safer Lives Lead at Turning Point asked everyone in attendance to get trained and pick up a naloxone kit if they didn't already have one. Turning Point colleagues provided this learning throughout the conference and by the end of the day had issued over 60 kits.

Speakers on the day included Professor Dame Carol Black, Independent Advisor to the government on drugs, Dr Ed Day, National Recovery Champion, and Pete Burkinshaw, Alcohol and Drug Treatment and Recovery Lead at the Office for Health Improvement and Disparities (OHID). The conference gave us the opportunity to reflect on where we are as a sector, what the future may hold and listen to examples of innovative practice in naloxone distribution from colleagues.

Professor Dame Carol Black reflected on the progress made in the year since she published her report on the sector. She reminded us that

the current economic uncertainty means we need to be "bold, determined, and innovative."

The most moving presentation of the day came from Abigail Kearley, Turning Point's National Involvement Lead. She spoke on behalf of Julie Rose, a mother who tragically lost her son to a heroin overdose. On a day when we were presented with a lot of statistical information this was a powerful reminder of the real people those numbers represent.

Julie McCartney and Lauren Sloey from the Scottish Ambulance Service discussed their role in widening the provision of naloxone and George Charlton spoke about his own experiences of childhood trauma and drug use, the discrimination experienced by people who use drugs and how this led to his development of multiple peer naloxone programmes.

Our aim for the day had been achieved. We had come together; shared learning and innovation and all left with ideas and inspiration to carry forward in our work. Two clear messages stood out from the day: The importance of collaboration and the sharing of knowledge, and the need to collaborate with those who are best placed to get naloxone to people furthest from treatment services, to reduce these tragic and avoidable drug deaths.

Strategic Goal

4

Create enduring value for communities and society as a whole

Under the heading of our final goal, we share examples of how we are creating enduring value for the communities we work in, as well as for society.

All the examples shared in this report, not just this section, demonstrate the personal and social value our teams deliver daily, through empowerment, leadership, innovation, and investment in the form of our Community Innovation Fund and Ted's Fund, both detailed below.

Launching the Turning Point Community Innovation Fund

The Turning Point Community Innovation Fund builds on the success of our national Innovation Fund launched in 2020. This year we made the decision to welcome applications from external community groups and organisations, based in areas where we are located, who are connected to us and share our values and goals. The fund is still open to all Turning Point employees with a key sponsorship role for our senior managers who support and enable teams to bring forward ideas.

The new scheme provides seed funding to support innovative projects that will:

1. Create a positive impact on communities and individuals we support
2. Speed up existing initiatives to achieve positive outcomes sooner for more people
3. Develop new skills or ignite untapped existing skills from within our communities
4. Forge new partnerships with other organisations in our communities that share our values and objectives
5. Leave a legacy beyond the funding period agreed with the potential for successful initiatives to be rolled out more widely across our work
6. Help to improve one or more areas of the five ways to wellbeing

Beyond the projects themselves, the scheme aims to showcase the great work people are doing in our communities, celebrating their success, driving feelings of recognition and appreciation. This year's projects at a local level have included:

No Booze Cruise

This project took a group of friends and family members of the people we support in the Drug and Alcohol service on a riverboat cruise on the Thames. Feedback included: "I would just like to say how great the No Booze Cruise was. It was extremely well organised and superbly run. It was nice just to sit a talk to others in the group without other pressures intruding on the conversations. It was the best day out I have had for years." Family member.

Community Sewing Project

This project in the London Borough of Hammersmith & Fulham was developed by the Eritrean Social Community in partnership with a women's community group called The Bridge and a local Community Champion. The project set out to teach local women sewing skills and create a safe space for connection and building new friendships.

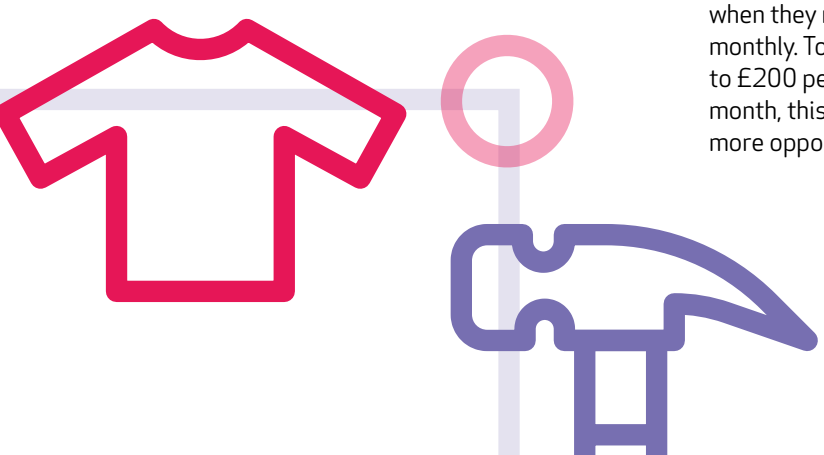
Together Again

The project aimed to engage isolated migrants, refugees and asylum seekers living in hotel rooms in the local area to come together through music, art, and therapy to promote greater wellbeing. Participants co-designed creative outputs together in a safe, sensitive, and secure environment. Feedback included: "It is the first time I see x and x in a group situation since I met them many years ago. It has been amazing! They don't ever want to be with others. X does not even want to talk to any other member of colleagues other than me. It is great that she finally came".

Making Teds Fund more readily available for the people we support

For the past few years, we have run Ted's Fund, named after Ted Unsworth, who was Chair of the Turning Point Board from 1987 to 1995 and Chief Executive from 1998 to 2001.

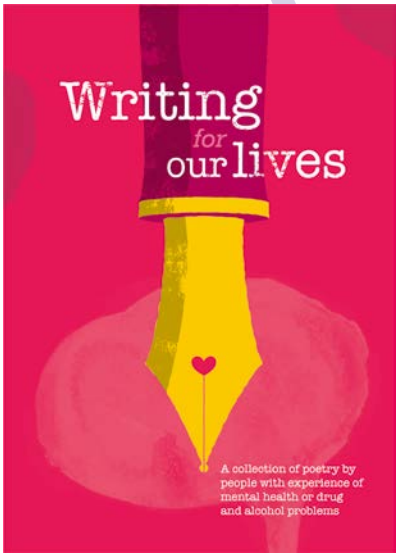
Sadly, Ted passed away in 2013, and to honour his commitment to Turning Point and the crucial work we do, Ted's family established a fund in his memory to help the people we support take a key next step in their lives. The fund exists to help people we support with their next steps in their journey. The fund focuses on individual needs and is open to all people we support at Turning Point.



Past applications have included:

- The purchase of equipment for work, i.e. tools, clothing, footwear, cookware
- Materials and supplies for study, i.e. books, computers, tablets
- Musical instruments for therapeutic purposes
- Sensory products/equipment for therapeutic purposes
- Fares for travel to attend learning
- Clothing to attend job interviews
- Courses or classes for employment skills development

Whereas Ted's Fund used to run twice a year (once in the summer and once in the winter), it now runs constantly throughout the year. To help more people when they need it, nominations and awards are made monthly. Together with a new eligibility cap of up to £200 per individual and up to £500 total for the month, this enables the fund to go further by creating more opportunities for the people we support.



Launching the Writing for our Lives poetry book

In March 2023 Turning Point launched a series of inspirational poems and illustrations, from people with experience of mental health or drug and alcohol problems. The book is titled, Writing for our Lives and aims to shine a spotlight on the role that expressive arts can play in the road to recovery.

Jody Lee, also known as The Skinny Poet, has shared several of his poems in the book. He appeared on BBC Radio 4's the World at One to promote the book and explained how writing kept him "connected" to part of himself during his 20-year struggle with cocaine and heroin addiction.

> **It helped me to manage a lot of my feelings.**
>
> Jody Lee

"From a very young age, I always loved storytelling. I loved reading. I would often just sit down quietly reading books and writing. And through my addiction, it was one of the things that really kept me connected to a part of myself. It helped me to manage a lot of my feelings. Helped me to express my feelings in ways I didn't have to express them otherwise and to understand myself a bit better."

Jody stopped using drugs through the support of Turning Point and used his talent as a poet to inspire others on a similar journey to his.

"As I came through recovery, I started to realise, right I need start sharing some of this stuff. So, when there were recovery festivals, any events, Turning Point very kindly ushered me in and I very nervously got up on stage, with my knees knocking, and read these poems and they went down well. I found out just how connecting it (poetry) was through addiction. You feel so isolated, so withdrawn from people. I was a heroin user. For years and years, I was completely isolated. But when I started to share my poems, people would come up to me and say, 'Oh my God, I get it. I understand. This is my experience."

Harm reduction in Herefordshire

Across Herefordshire and the surrounding area, we have developed a range of services, working in different settings with one shared focus: to promote and maximise the wider benefits of harm reduction.

One element of the service is utilising a mobile recovery vehicle (called Lance) to provide assertive outreach and deliver harm reduction (including needle exchange) to more rural areas where existing services are not available. We are also increasing Blood Borne Virus (BBV) testing to eliminate Hep C and have a mobile Fibroscan machine to screen people who may not otherwise attend a clinical setting. Not only does this service make testing easier, by bringing it closer to people, it helps identify those people who may not have been diagnosed previously, increases access to treatment and provides a greater opportunity for harm reduction advice, including discussions about injecting drug use, sharing equipment, and offering learning on injectable Naloxone and Nyxoid.

We have also begun to re-develop our criminal justice work, working alongside experts by experience to support engagement and deliver interventions that reduce the risk of continued criminal behaviour. We have worked closely with HM Prison and Probation Service in Wales to develop a new learning and recruitment pathway. The Prison and Probation Service offer an 18-week learning programme which prepares participants for working in health & social care through a series of sessions covering a range of topics, including psychological elements of dependency, drug and alcohol awareness, naloxone/harm reduction, safeguarding, brief interventions, and Adverse Childhood Experiences (ACEs). We have worked with the prison to arrange licensing and transport to facilitate attending the service during working hours and maintain contact with the security and reception teams to ensure compliance with licence conditions.

In addition, we work closely with local housing and outreach services to support engagement with service users and provide effective treatment pathways to support engagement, reduce missed appointments and offer support in locations that are accessible and familiar. This supports a reduction in disengagement, missed appointments and issues with challenging behaviour resulting from trauma. The service monitors equality and diversity information as part of referral and assessment, ensuring that access to the service is available for people with a range of needs, including offering interpreting and translating services.

There is a significant benefit to developing greater opportunities for people with lived experience to gain learning and placements within local services. Investing in local recovery communities to develop harm reduction champions, promote volunteering and eventual paid employment help services ensure they can continue to meet recruitment challenges and invest back into service users who have completed treatment.

Enabling good health & wellbeing in local communities

Enabling good health and wellbeing of the people we support; our communities and our colleagues is integral to all the work we do at Turning Point. Many people we support are at a greater risk of poorer health outcomes compared with the general population, so this year we continued our focus on reducing health inequalities wherever possible.

Taking a place-based approach, we involved people we support to consider how we could best explore local need and direct our efforts towards reducing health inequalities where we can have the biggest impact. Working in partnership with other local providers to find joint solutions is essential as our services only form part of the picture of health and wellbeing for people we support.

Our intention is to develop systematic approaches to engagement, which can be utilised across the country, to identify priority health and wellbeing areas.

EXAMPLE

Quality of life engagement at DAWS

In our Drugs, Alcohol and Wellbeing Service (DAWS) in London which covers three diverse boroughs, we took a social determinants of health approach by talking to 100 local people who already use our services. We carried out the engagement across 3 months (Jun - Aug 2022) and talked to them about what impacts on their quality of life in relation to their:

- Living and working conditions
- Social and community networks
- Individual lifestyle factors

We explored some of the factors that people perceive to impact on their quality of life and asked them to consider their top priorities. There was a clear theme of housing as an area of people's lives that has the potential to create safety and stability or cause uncertainty and isolation.

"To have somewhere to live has a massive impact. Previously I had nowhere to live and my addiction got worse, mainly because you don't have a base. Now I have a home and a safe place and can access what I need. I have no worry on finding somewhere to sleep. If I lost the property now I would feel lost."

People also told us of the impact good relationships with family and friends has on their lives, and how difficult it can be to make meaningful connections with new people when you are early on in recovery.

"I often feel quite isolated. I find it difficult to find friends and connect with others."

"Having a connection with family, friends and the wider community helps me to stay abstinent. Keeping in contact with positive people motivates me to work on myself".

This approach has shaped a local action plan which will develop over time, with continued input from the team and our community partners who can co-create joint solutions with us.

The Quality-of-Life engagement has started to be rolled out in a variety of ways across other Turning Point services and will be instrumental in developing future services.

Additional support for families and carers

As part of our range of support, we now offer a 5-step family intervention – a simple method of support helping family members affected by a loved one's substance use. We provide this support in a range of ways including face-to-face groups, online and a newly launched self-guided digital version.

In addition to this, each substance use service offers unstructured carers support groups with open rolling access, facilitated by Family Workers and Family Peer Mentors. There are also several activities that have been planned locally including recreational activities and 'pop up' well-being sessions for family members.

In Somerset we are joining up our 5-step family support with talking therapies, where a therapist attends 5-step and carers support groups to offer carers assessments for therapy related to their anxiety, depression and/or stress.

In Wakefield we are offering family members several options from our talking therapies service, again providing a wide range of targeted mental health interventions for those with loved ones experiencing substance use and mental health issues.

Raising awareness of the health and wellbeing of those with a learning disability

During Learning Disability Week, (20th-26th June 2022) we launched our new Health and Wellbeing Handbook. The information within the handbook has been designed specifically about people who have learning disabilities and covers everything from healthy lifestyles to staying safe, emotional health, physical health, sexual health, and relationships. It is not intended to be a 'how to' clinical document but rather a resource to raise awareness and hopefully empower social care colleagues to work with the people they support to take steps to improve their health and wellbeing.

People with a learning disability generally have poorer physical and mental health than people without a learning disability and they die significantly earlier than the general population, from preventable causes. This does not have to be the case and demonstrates the significant health inequalities experienced by people with a learning disability.

To help tackle these issues, this guide was co-developed by our teams across the breadth of the organisation and people we support, to help anybody supporting people with a learning disability, including friends and family members. It is a resource which will help carers ensure essential information is included in hospital passports and provide the knowledge to help make a positive difference to people's lives.

People with a learning disability generally have poorer physical and mental health than people without a learning disability

CASE STUDY

Meet Paul

This year Paul has been on holidays to York and Blackpool which is the first time he has ever stayed in a hotel. He also attended college for a full year and went to his first ever Prom.

More recently, Paul started a volunteer job at the local community café. On his first day he was tasked with setting up tables for customers and chatting with them. After he finished setting up, he headed to the community garden to help with some weeding. Paul found himself enjoying every moment of his work. He loved the feeling of helping and being a part of the community.

07

OUR ORGANISATIONAL APPROACH

Involving and engaging the people that we support

Our approach to involvement

Involvement is key to ensuring the high quality of service we provide. We aim for people's experiences to be embedded in all levels and corners of Turning Point. By working together across all that we do, and enabling voices to be heard and have impact, we learn and grow, and the care and support we provide becomes the best it can be.

Involvement at Turning Point is a wide spectrum of ways people's voices shape their support and our organisation. For us, it starts within individuals' support planning, through to working together on ideas to improve and design services, and collaborating to decide what the support we provide should look and be like. Across all our involvement, we aim for it to be underpinned by the principles of co-production – creating environments of true and equal partnership, with all perspectives valued and insight and ideas able to have real impact.

We recognise every individual as truly unique and, of course, as having a wealth of possibility. The person-centred support we provide is central to enabling new possibility to be realised and is where involvement begins. It happens every day across our services – with the individualised communication and interactions between people we support and colleagues, and the strong and trusting relationships that are built and empower their voices to shape their own support.

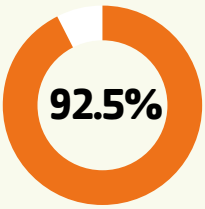
Beyond this, involvement and co-production sees people's voices shaping what the services they use look like. From feedback workshops and listening events, through to specific co-production projects to develop new initiatives and ways of working. There are a huge variety of involvement methods used that are flexible and inclusive to suit the needs and preferences of those we support.

In May 2023 we launched our "My Turning Point Experience" survey to understand how people feel about their support from Turning Point.

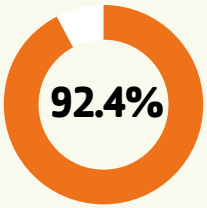
We asked the same six multiple choice questions of everyone who is currently being supported by Turning Point or who has been within the last year.

These survey questions were put together with people we support and Turning Point colleagues. Where possible, we encouraged people we support to complete it themselves or with minimal help, so they can be as honest as they want to be.

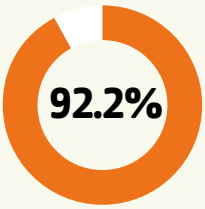
The people we support told us:



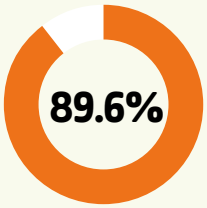
of the people we support rated our service as good or very good.



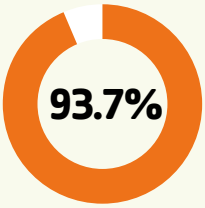
of the people we support feel listened to and well communicated with.



of the people we support feel they get the support that matters to them from Turning Point.



of the people we support feel involved in decisions about their support from Turning Point.



of the people we support feel safe in the service they use.

Across the organisation involvement is growing, with the perspectives of people we support feeding into the direction of the organisation, positions we take externally and how we communicate, as well as our policies and corporate governance.

Our commitment to working in partnership with the people we support is stronger than ever - enabling their experiences and perspectives to be central to all we do. We are excited to further strengthen our ways of working over the coming year.

Our **Somerset Drug and Alcohol Service** embarked on a project which saw people we support come together to develop a campaign to raise awareness of Naloxone. Together, information to promote the use of the lifesaving drug was co-designed as well as the development of an app to provide information about where to access it.

Our new **Stafford Mental Health Supported Living Service** has begun – and will be fully co-produced with people with lived and living experience of homelessness. As well as providing new accommodation, the service will lead the co-production of new pathways, developed collaboratively with the local homeless community and a range of expert organisations and services.

Our **Bradford learning disability** services have an active People's Parliament, bringing people supported in our different accommodation-based services together to have a voice in their services and in the community. The group has had real local impact, raising its voice to improve local disability services – including success in increasing local disabled parking spaces near to where the group meets!

Young Peoples Services at Turning Point

The youth programmes within Turning Point's substance use services continue to grow, improve, and develop. Our young people's workers are passionate about driving the youth agenda and inspiring the young people we support to face their challenges, overcome their difficulties, and reach their potential.

Our services not only support young people with concerns about their own relationship with substances, but also young people who are struggling to deal with the impact of another person's substance use. Whether that be a parent, sibling, or other significant person in their life, both these groups of young people present to our services with a range of vulnerabilities.

To meet these young people's needs, Turning Point has committed to embedding the Thrive approach into all their youth services. For many, we find that their developmental needs have not been met and/or are being impacted by their, or others, substance use. Using the Thrive approach, our young people's workers tailor support packages, enabling them to repair the harm caused, and to optimise their emotional health and wellbeing. This can include clinical, psychosocial, and specialist harm-reduction interventions that build the young people's resilience and enables them to make change.

We meet young people wherever they are most comfortable. Our youth teams are out in the community, offering targeted harm reduction, one to one and group work sessions.

The education and harm minimisation work we deliver in schools enables pupils to increase their understanding of the impact of drugs and alcohol, raises awareness of issues around gangs and county lines and gives young people the knowledge they need to keep themselves safe. Learning sessions are also delivered to teachers; increasing their awareness and enabling them to consider a pupils substance use issues in an informed context; reducing exclusions.

An intrinsic part of youth work is multiagency working. Linking in with Youth Offending Services, Child, and Adolescent Mental Health Services (CAMHS), as well as many other services, our young people substance use workers bring specialist knowledge and expertise, working holistically and without judgement. An example of this is where we have Turning Point youth workers based in A&E departments on Friday and Saturday nights. Working together with doctors, nurses, and psych liaison teams, we can reach the young people accessing medical help at the point of crisis - young people that would otherwise slip through the net.

The need for more specific support for families with parental substance use treatment requirements was highlighted in the recent Government drug strategy, 'From Harm to Hope'. Our youth teams, alongside our Turning Point family and carers and family safeguarding workers, are engaged in providing this support.

We are also delivering the Moving Parents and Children Together (M-PACT) programme. This is a whole family, structured support programme through which we can acknowledge the overlooked voices and experiences of children and young people and can improve the wellbeing of families affected by substance use. The M-PACT programme supports families to address areas such as communication and coping strategies; most importantly, it puts children at its heart.

Huggy Monster

A 10 yr old who attended one of our M-PACT courses, drew this picture of what addiction means to him- "Cute and cuddly and then turns into something terrifying". (His mum was a heroin/Crack user – she is now abstinent)

CASE STUDY

The Leicester VIP (Violence Intervention Project)

Instead of attending lessons, Sam, who is 13 years old, would turn up at school then turnaround and go missing for hours (or even days) without returning to the family home.

Sam has severe ADHD and was skipping lessons to commit violent and serious crimes. Exploited by older people, Sam's prolific offending included robbery, burglary, and assault. Sam was a habitual knife carrier for both his own protection and to use if told to by others. His association with older criminals and frequent missing episodes meant the police and other professionals deemed him at risk of child criminal exploitation.

Sam was offered ongoing support by Turning Point's Violence Intervention Project (VIP) team. Through engagement with the team, and now on medication to manage his ADHD, Sam has moved away from his offending behaviour and from the peers who led him into crime. He's not been detained in custody and has adhered to bail conditions including a 7pm to 7am curfew, avoiding town and not meeting up with specific acquaintances.

Other breakthroughs for Sam include an improved relationship with his family, better mental wellbeing and confidence, and participation in sports including football and basketball.

Sam is back in education five days a week. He's not in mainstream school but in an alternative education provision with smaller class sizes, more one-to-one support, more vocational subjects.

The VIP team checks in regularly with Sam's family and has supported them to get relocated by the council. Sam attends face-to-face appointments either at home or in a local park with his support worker with whom he's built a good rapport.

What has also helped Sam turn away from crime has been programmes including awareness about the impact of county lines and knife crime. Learning how to say 'no', the dangers of exploitation, and the consequences of using weapons are among the topics addressed.

Remembering Richard at Turning Point Station Road

Richard lived at Turning Point Station Road and passed away at the end of 2022.

He moved into Station Road a couple of years ago after living in another home for years. Over time, we found out that Richard is from a family of farmers. When he was younger and mobile, he rode the horses and worked on his parents' farm.

Since living in the care home, he didn't have any contact with animals or horses but spoke about them a lot. The team tried to focus on his love of horses. Richard could only be supported in bed, so Mary, one of the team at Station Road, arranged for a pony to visit him.

Lisa Prendergast, Manager at Station Road: "Richard had the biggest smile on his face. God knows what he initially thought waking up to a pony in his room! His brother and sister just happened to be visiting at the same time as the pony, and both were overwhelmed by the gesture.

Well Mary thinks they were, unless they thought the colleagues had gone mad!

It such a lovely, personal thing to be able to do for someone."

Celebrating the Platinum Jubilee together

While we look with sadness on the death of Her Majesty in September 2022 (where Turning Point observed official mourning guidelines), in June we celebrated the Platinum Jubilee of Queen Elizabeth II, marking 70 years since her accession to the throne in 1952.

Below are some photos and details of some of the jubilee celebrations that took place across Turning Point, shared with thanks to our colleagues who arranged, attended, and recorded the fun!

Birchwood Nursing Home

"To celebrate the Platinum Jubilee, colleagues and people we support at Birchwood held a crown decorating competition, with three colleague winners and three resident winners personally chosen by Turning Point's Chief Executive Julie Bass.

As colleagues and residents indulged in a selection of treats, they watched as Janet came into the communal lounge dressed beautifully as the Queen, shortly followed by manager Lisa and support worker Leanne who were dressed vividly and excessively in Union Jack attire - everything from a Union Jack dress, stockings, glasses, and a red, white, and blue wig! They all looked fantastic and were applauded by colleagues and residents whilst they announced the winners of the crown making competition.

The celebration went well, beginning with a coffee morning and followed by afternoon tea. 'The Queen' presented the crown winners with their certificates and prizes and everyone played a game of Royal Bingo. It was a wonderful day!"

Cranham Lodge

"Her Majesty the Queen may not have visited Cranham Lodge in body, but she was most certainly here in spirit! The party was a great day for all of us as we celebrated her Platinum Jubilee.

We had a posh high tea fit for a queen - finger sandwiches, cakes, nibbles, and Eton mess, then Pimms O' Clock where everyone all got a little merry! We had a lot of fun playing music from all the decades of the Queen's reign, as well as a sing-along, dancing, and laughter as we waved our flags and wore bowler hats to celebrate. God Save the Queen!"

We had a lot of fun playing music from all the decades of the Queen's reign

Community Celebration at Kensington Palace

"During the weekend of the jubilee, Turning Point helped support a Community Celebration at Kensington Palace, hosted by Historic Royal Palaces. As well as celebrating the Queen's milestone, the event was about sharing the social value of heritage engagement and the themes of community, unity, and friendship.

It was supported through collaboration with Community Access Scheme partners who helped produce activities and entertainment, including Turning Point's Innovation Fund.

There were 300 people pre-booked for the event and tourists and day visitors that turned up on the day were welcomed too. Thankfully, the rain held off on Sunday and those in attendance had a brilliant time despite cool weather and grey skies. There was never a dull moment with a constant flow of activity, including Rangoli and bunting making, a scavenger hunt in the garden and talks on LGBTQ+ history led by young people. Feedback from attendees was immensely positive, with the tone of the event, the activities and the levels of mixing and connection all praised!"

08

TURNING POINT CULTURE

Turning Point Culture

'Inspired by possibility' is not just our tagline, it is at the heart of our culture.

As an organisation we continually strive to inspire our people, those we support, our stakeholders and communities to discover new possibilities. Having the right people with the right values, behaviours and skills makes Turning Point the organisation it is. Engagement, recognition and equality, diversity and inclusion are also essential components to ensure our teams feel valued, inspired, and empowered to be the best they can be.

Engaging our colleagues

At Turning Point, we promote a range of opportunities for colleagues to share their views.

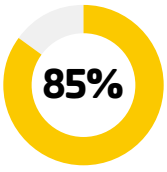
Our Speak Up listening channel is always open for direct feedback, and our Viva Engage communities provide space to connect, ask questions and interact with people from every service and specialism. Our company-wide Viva Engage community received over 140,000 engagements over the course of the year, with messages read over 366,000 times. An average of 80 messages per colleague.

A more formal opportunity for feedback is our annual Colleague Engagement Survey, which collects thoughts, feedback, and ideas to enable us to continuously improve. In October 2022 70% of those working for Turning Point responded to the survey, with almost 2,500 colleagues sharing their views.

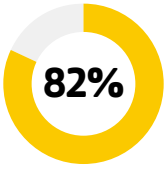
The 2022 survey enabled us to further review the progress we have made since 2021. We saw improvements in engagement across many areas:

Top scoring statements

I understand how my role contributes to achieving Turning Point's outcomes.



I trust and respect my manager/supervisor.



People here are treated equally irrespective of ethnicity, gender, disability, age, sexual orientation or religion.

Largest improvement

+7%

Bullying and harassment is taken seriously by this organisation and there are effective mechanisms for dealing with it.

+6%

I feel my contribution is valued.

+5%

I believe that Turning Point takes reasonable steps to ensure the physical and psychological safety of employees at work.

For the first time, all managers received direct access to their anonymous engagement survey results through the availability of a digital dashboard, enabling teams to create bespoke action plans. This investment in technology helps us to continuously improve transparency and trust across the organisation.

Long service

Between April 2022 and March 2023, 305 Turning Point colleagues celebrated long service milestones of five years or more, with 45 people achieving more than 20 years' service. One person even reached the 40-year mark.

Inspired by Possibility Awards

Turning Point is a diverse organisation, operating in a range of locations and across several sectors. Despite having different responsibilities, priorities, and skills, we're all here for the same reason - to effect positive change and a lasting impact on the lives of the people we support. Each day we work to inspire and empower people to discover new possibilities in their lives.

Our Inspired by Possibility Awards recognise the achievements, dedication, and inspirational work of our exceptional colleagues. In 2022 we received a record-breaking 432 nominations, demonstrating the range of talent across Turning Point. Here are four of our winners.

Oduro Achampong

Team Leader, Milestone

'Oduro, you were chosen for continually demonstrating our values across the 17 years you have dedicated to Turning Point. You've helped hugely to promote a culture of acceptance and nurturing at the services you work in, where every individual – whether a colleague or a person we support – feels respected and valued. You never compromise on your commitment to the people who live and work at these services. Your ability to navigate conflicts calmly and fairly means they are usually short-lived, and you're always on-hand to support the team and inspire confidence with a heart-warming smile at the start of every shift.'

Leah Robertson

Team Leader, Beacon Lodge

'Leah, you were chosen for always going the extra mile to help and advocate for the people you support, offering them compassion, patience and importantly, a voice. When one individual was facing homelessness due to their challenging behaviour because of the trauma they'd experienced, your hard work in coordinating a team of professionals, conducting research and challenging decisions made by local authorities meant they could move to new accommodation and had the chance to recover in a safe environment. You've been described as "a wonderful person and an inspiring leader", making your colleagues feel valued and always encouraging them to grow.'

Elizabeth Shallaker

Project Worker, Oldham Dispersed Accommodation

'Elizabeth, you were chosen for your incredible commitment to the people we support. During a suspected COVID-19 outbreak, you stayed with a group of clients to make sure they felt safe and supported, and when a client received a diagnosis of stage four lung cancer, you went above and beyond to advocate on his behalf, accompanying him on a short break and working hard to try and have everything the way he wanted and giving him freedom to express himself and a safe space to offload. Your compassion, resilience, composure, and wholly person-centred approach make you an asset to the team and a thoroughly deserving winner.

Jonathan Cullum

Non-Medical Prescriber, Suffolk Recovery Network

'Jonathan, you have been recognised in this year's awards for being an inspiration and "a driving force". Your passion to help the people we support means 35 of them have been able to access the Buvidal injection [for the treatment of opioid dependence] and move toward long-term abstinence, which has significantly improved their wellbeing. You inspire the team and lead by example, standing in when times are difficult and working hard to provide support and advice for anybody that needs it. You see the best in people which gives them the belief they need to progress, and you have a positive impact on the service as a whole.'

Focussing on Equality, Diversity, and Inclusion

At Turning Point, we want to ensure that everyone feels able to be themselves and we're proud of our commitment to external accreditations of good practice, including Disability Confident, Mindful Employer, Menopause Pledge, Neurodiversity in Business and Inclusive Employers.

We recognise that some groups may need extra support and we're proud to see our diversity network groups having an amazing impact. We have groups to support LGBTQ+, disability and BPOC colleagues. This year we have strengthened our network groups by creating co-chair positions and through the introduction of senior sponsors, to help give a voice to the network groups at the top of the organisation.

The groups have influenced Turning Point policies, to help the organisation become more inclusive, alongside helping individuals feel more seen and heard and highlighting how Turning Point is a truly inclusive employer.

LGBTQ+ Network

The LGBTQ+ network supported local pride events across the country, with stalls promoting the work of Turning Point. To help raise awareness, members of the group had rainbow lanyards made. These started to be given out at Pride events, but before long colleagues were sporting them around the services and offices. As a result, we now have rainbow lanyards available for all new colleagues.

Along the way we have had the privilege to help families embrace and support having trans loved ones in the family or supporting parents 'coming out' as LGBTQ+ later in life. And in our SASH service, we have helped bring together organisations to help build a stronger offer to the LGBTQ+ clients who attend our services.

Disability Network

The Disability network has been working this year on an inclusivity passport. This allows colleagues to have a conversation with their manager about how they can be supported to be their best, the passport can stay with the colleague so that as they change and shift roles, they can take their requirements with them.

The introduction of two passionate and knowledgeable co-chairs this year has enabled the network to increase and reach more people and create lots of ideas for progress.

The network continues to provide a safe space of peer support whilst also informing important changes across the organisation in terms of disability.

The implementation of the autism standards, inclusivity passport and celebration of disability are all elements that are transforming the nature of disability in our workplaces and makes the voice of diversity very much heard.

BPOC Network

The BPOC network invested their energies into Black History month last year. This saw some brilliant engagement on our Viva Engage channels, with services across the country taking part. Services shared food, culture, and stories. The network is now looking at how they can continue this dialogue, so the focus is not just on one month but throughout the year.

The co-chairs of the BPOC network are focussed on improving inclusion from BPOC colleagues, through sharing knowledge and experience and by challenging the status quo.

Menopause network

Our Menopause Network is a new addition to Turning Point's Diversity and Inclusion Network groups, and has three main aims;

- creating a safe space for colleagues with lived experience to discuss & share their experiences.
- building greater awareness & understanding of the menopause across all colleagues - most of us will have friends, family and/ or colleagues who are experiencing the menopause & a greater awareness can lead to much more impactful support.
- looking at ways Turning Point can better support colleagues at different stages of the menopause in the workplace.

In the last year the group held monthly meetings and shared a range of free resources to help support and prompt conversations across the organisation.

Fostering a culture of ongoing learning and development

Throughout 2022/23, we have been reviewing and expanding the learning opportunities that are available across Turning Point. We have listened to services and colleagues across the organisation and changed our approach to identifying learning needs, putting much more choice and control in the hands of our service managers.

All our people can draw on a huge catalogue of learning to further their own development, based on the needs of their team or individuals they support.

We have started work to rebuild our learning management system. The system will be more user friendly and accessible. We are not just focussed on online content. After several years having to deliver learning virtually, we have been steadily returning to in-person learning. This has been well received by attendees who've enjoyed getting back into the classroom to share learning and good practice.

Our leadership development offer continues to build. We have been working this year to understand better what we require from our leaders. We have a suite of leadership courses and have seen around 800 delegates on 80 leadership and management workshops. We also support our leaders with coaching, 49 managers have taken the opportunity to be coached in the past year.

We are expanding access to qualifications and the amount of apprenticeship standards available. By working closely with our providers and diversity network groups, we're keen to support access to apprenticeships from groups that may not have the same equality of access to qualifications.

The learning and organisational development team are also working across the sector as active members of VODG L&D network and the Skills for Care large employers' network. The team is also working with OHID and participating in the development of the Substance Use Capability Framework.

KEY FACTS

10,426
delegates trained on workshops

63,435
e-learning modules accessed

Inspired by the people we work alongside, every day

In what has been a very challenging year for recruitment in the sector; Turning Point has done exceptionally well in attracting new people to join our team across the variety of roles and markets we deliver services to. We have continued to build our colleague offer and attractiveness, whilst also focusing on strengthening our relationships in local communities by offering exciting roles with clear career pathways, which make the very best of people's skills enabling us to support even more people back into work.

Our passion for colleague engagement, health and wellbeing has not wavered with another year of improved impact. The support provided by our managers is valued by their teams, and this is reflected in extremely high levels of trust in them. We have broadened the additional benefits that we now offer, from a financial, emotional, and physical perspective.

We are proud that at Turning Point, our colleague retention is significantly better than industry average, meaning more of our people are choosing to stay with us for longer.

Workforce shortages and how we've tackled them:

- Our voluntary colleague turnover reached 23% by the end of 2022/23, 6% lower than the sector average of 29% [Skills for Care]. In 2023, the number of colleagues voluntarily leaving Turning Point reached a five-year low.
- We invested in our people to enable them to focus on their careers at Turning Point despite market pressures and provided an increased reward as part of our annual pay review.
- We continue to look at broader ways of attracting new people from stronger relationships with universities, reaching further into the community with job fairs, leaflet drops, job centre liaison, and local advertising.
- Increase in apprenticeships, sponsorships, traineeships as well as engaging people in the way they want to be employed both more typical working patterns but also through a range of different hours and ways of working.
- We've extended our career pathways building the skills and capability we need with a mid to longer term approach.

The number of colleagues voluntarily leaving Turning Point reached a five-year low

Finding new ways to recruit and engage colleagues

- We have invested in technology that allows us to advertise our vacancies more widely, targeting areas where we can offer exciting opportunities to more people.
- We continue to work with Inclusive Employers, showing the commitment to supporting the mental health of our colleagues.
- We continually refresh our attraction campaigns adjusting to different roles and different audiences, showcasing the great opportunities we have.

Keeping people healthy, well and in work

- We have created a range of physical, emotional, and financial wellbeing resources for colleagues: these can be accessed via the MyBenefits portal, which includes Financial Education, Discounts Marketplace, Life Cover and webinars, guides and other resources to support financial wellbeing.
- People make good use of our employee assistance programme, enhanced by the availability of our own Rightsteps and livelife products – each with either free or discounted access to therapy.
- Our weekly Mindful Mondays virtual wellbeing sessions continue to welcome healthy engagement, and our frequent employee wellbeing campaigns encourage colleagues to practice and prioritise self-care.
- We continue to deliver a successful Seasonal Flu Vaccine scheme, with colleagues taking up the opportunity, as well as eligible colleagues using the free service provided by the NHS.
- We have reactivated our trained Pilot Group of Mental Health First Aiders (MHFA), who are able to recognise and confidentially support colleagues who are experiencing symptoms of mental ill-health.
- Around 250 colleagues visit our benefits hub each day, and in October 2022, 96% of the 2,491 respondents to our colleague engagement survey said they were aware of our range of benefits and rewards, we believe understanding of and enabling easy access to our benefit offering is key to engagement and use of it.

Our commitment to supporting neurodiversity in business

In March 2023 Turning Point joined a neurodiversity industry forum to build on our work in supporting individuals and help increase their participation in the workplace.

Neurodiversity in Business (NiB) is a business-led forum supporting organisations to share good practice on neurodiversity recruitment, retention, and empowerment. NiB's mission is to help develop more neuroinclusive workplaces by working collaboratively to improve conditions for people and support them to navigate independent, fulfilling careers.

This is a new journey for Turning Point, with the NiB membership helping us to support improved equity and inclusion across the organisation for our neurodiverse colleagues and candidates.

09

DELIVERING SOCIAL VALUE

Delivering Social Value

Social value is the added value services can deliver to the economy, community life, the health of the local population and the environment. It is an integral part of everything we do and increasingly important to Commissioners, who are now more than ever taking social value into account when making their procurement decisions.

Our commitment to being 'inspired by possibility' and improving the health and wellbeing of the people we support, the communities we work in and our teams, is what makes this so important to us.

Accelerating apprenticeship opportunities

Turning Point is dedicated to developing and inspiring our workforce to unlock their potential. Providing colleagues with access to apprenticeships within their field of work is an important part of this.

Our apprenticeship programme grew from 15 programmes in 2021-22 to 23 programmes for 2022/23 with pilot apprenticeships planned throughout 2023-24.

THIS YEAR

26
colleagues completed their apprenticeship.

20
colleagues started their apprenticeship.

69%
of learners achieved either a Merit or Distinction for their apprenticeship.

2
colleagues who have completed their level 7 Senior Leader apprenticeship achieved Distinctions.

National Apprenticeship Week 2023:

6-12 February 2023

This year we celebrated our first National Apprenticeship week with a series of events. 153 colleagues attended one of our webinars, and we celebrated the 55 graduates since the programme started.

We also announced our first apprenticeship award winners;

- Apprentices of the Year - **Ellie**
- Rising Star of the Year - **Lorna**
- Manager Award - **Clare**

Network membership

Part of our ongoing work is to make apprenticeships accessible across Turning Point and our wider networks. We joined the Apprenticeship Ambassador Network (AAN) to engage & influence employers around the benefits of apprenticeships within the workplace and engage with young people on the opportunities apprenticeships can bring to them.

We also joined the Apprenticeship Diversity Champion Network. The aim of this network is to encourage more people from diverse backgrounds to consider apprenticeships. Turning Point have made a pledge to support & grow our apprenticeship network in four key areas.

1. Provide access to apprenticeships to a wider & diverse workforce and how this translates into our future leaders.
2. Develop apprenticeships with diversity networks to provide further learning and enabling social mobility & clearer support channels.
3. Data analysis to develop and drive apprenticeships across the wider areas of our work.
4. Upskilling Managers & Leaders with understanding of apprenticeships and the benefits they have for colleagues and the people we support.

Turning Point has become part of the research group for Education Skills Funding Agency (ESFA) & Skills for Care to review and update apprenticeships nationally and be involved in trailblazer groups to develop future management & leadership apprenticeships. The Explore Apprenticeship Programme also works with our Diversity Networks to ensure the programme can be as inclusive as possible.

MEET OUR APPRENTICE OF THE YEAR

Ellie, Kent Learning Disability

Lead Practitioner in Care

Level 4 Apprenticeship: Completion date October 2022.

What drew you to Turning Point?

The genuine passion for providing a high-quality standard of care and going beyond this to provide the people we support with a good and full life, with one-to-one support and the genuine focus on person-centred approach.

Why did you want to do an apprenticeship?

I wanted to develop my abilities and learn more skills, to better the provision of service to the people we support, my support workers and colleagues. I enjoy studying and wanted to support my career development within Turning Point.

What benefits do you feel the apprenticeship has brought to you and your service?

I learnt a lot through the apprenticeship. It enhanced my knowledge of the law and procedural foundations behind the care we provide and developed my thinking on the ways we can enhance the care we provide as well as building my managerial skills.

How did you find the experience?

I thoroughly enjoyed the learning aspect of the qualification. It certainly enhanced my knowledge of the policies and procedures behind the support we provide. The coursework pushed me to think about the support provision and, through study of case examples, research time, and increased knowledge, I could directly improve my Supported Living service. I felt thoroughly supported through the coursework, with regular set meetings and ad-hoc discussions with my tutor. I would like to complete the NVQ level 5 in the future, to continue developing my knowledge, supporting my career and improving the support I can provide to others.

Would you recommend an apprenticeship?

I would recommend completing an apprenticeship, as it improves knowledge of the policies which are embedded into our work, the reason that quality care is so important, and directly built my own skills within the supported living workplace.

Supporting our colleagues through the cost-of-living crisis

During 2022/23 the senior leadership team and all levels of management within Turning Point have had a focus on the rising cost of living and its impact on our colleagues' teams and the people we support. The Operating Board established a working group to focus on what we could do better to help people in difficult circumstances.

The group brought together existing activities and prompted new actions. Through 2022/23 we have focussed on the following priority areas:

- Supporting people on the lowest wages and/or benefits who are most likely to be impacted by rising cost of living.
- Risks to health and wellbeing for those whose money won't stretch as far, such as food quality and not using heating at home.
- Those struggling prior to the most recent increases in cost of living and therefore most likely in a much worse situation.
- Risks to services due to potentially reduced staffing levels due to risk of burnout from colleagues working more and/or cost of fuel to get to work.

Many of our services have been working with local authorities and other local organisations

Some of the most significant actions achieved through our focus on this have been:

- Further exploration with colleagues on the greatest impacts on their lives of the rising cost of living.
- Ensuring all avenues of support for colleagues were channelled through our 'My Benefits Platform', to ensure that all resources and signposts to other organisations or resources were available in one place.
- Raising the profile of specific areas of support and benefits beyond our annual salary increase that Turning Point can offer, including access to financial advice through our partner Second Sight and access to our own Rightsteps wellbeing service.
- Provision of simple universal advice on reducing use of utilities at home.
- Development of information resources for services to signpost and direct people we support to for further assistance with financial difficulties.

Many of our services have been working with local authorities and other local organisations to be able to signpost people we support towards resources and partners who can help people best manage the rising cost of living. This has included direct financial advice and support or access to warm spaces during the day.

For 2023-24 we plan to further develop directory resources, to provide direct access to resources and information about local groups offering support and advice to people who need help with the rising cost of living.

Social value in the supply chain

Improving social value and the use of local supply chains is embedded within the Turning Point Procurement and Environmental Strategies. From sourcing through to onboarding and contract award, our focus is on ensuring value for money and the impacts that this has on local economies and the environment. Our procurement of good and services looks at the benefits from national agreements and economies of scale and the local knowledge and the benefits that this brings through employment to local economies.

We continue to work with local pharmacies, landlords, venues for room hire and SME's (small and medium-sized enterprises) together with several local sub-contracting partnerships. We contract with several charities and have recently awarded contracts to two social enterprises, Exchange Supplies in harm reduction and Furniture Resource Group (FRC) who supply residential furniture.

Widening access to employment

Access to employment is one of the most important ways we offer social value to the communities we work in.

There are a broad range of routes to access our employment opportunities, including our work with ex-offenders, career changers, early careers, returners to the workplace, as well as those that have been unemployed for periods of time. For many roles, it's the person rather than their qualifications or experience that matters most.

Trainees are supported with learning in a wide range of ways, supervision to support this learning, coaching, mentoring peer learning, qualification support etc. There are also opportunities for progression, which we know is important to encourage people to stay within the organisation.

We are particularly proud of our peer mentors and people with lived experience, both paid and unpaid, for their passion, commitment, and dedication.

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RISK MANAGEMENT

Turning Point operates in a business with significant risks. The people we support can have mental health conditions and learning disabilities requiring intensive support, or substance dependency requiring clinical prescribing of medicines.

Principal risk or uncertainty	Mitigation & Controls	Movement
Financial risk: Possible loss of contract income due to highly competitive operational environment.	Review cost base and other income opportunities. Review pipeline for new contract opportunities to replace lost income. Investment in cost control measures and robust financial monitoring. Regular assessment and monitoring of the quality of service and performance.	Increase
Operational risk: By the very nature of the contracts undertaken the people supported through those service contracts are often adults at risk of self-harm, injury, abuse and even death.	Investment in robust clinical governance frameworks, policies, and procedures (including health & safety) that meet or exceed regulatory requirements. Comprehensive risk management and incident reporting and monitoring systems.	No change
Cyber Security: Increasing dependency on technology systems gives rise to cyber risk comprising the risk of financial loss, disruption to business operations or potential damage to the reputation of the organisation from a failure of information technology systems. **Information security:** Increasing reliance on data, information held in systems gives rise to information security risk leading to potential Data Protection Act breaches and harm to data subjects as well as potential damage to the reputation of the organisation.	Implementation of a robust information security model drawing upon the ISO27001 standard, Control Objectives for Information Technologies (COBIT 2019), NHS Data Security & Protection Toolkit, Centre for Internet Security (CIS Top 20) and Cyber Essentials. The organisation is ISO27001 certified and working towards Cyber Essentials Plus certification later in 2023. Implementation of robust policies and awareness learning serves to minimise cyber risk from various sources.	Increase

Strategic: Changes in government policy, continuing public sector funding cuts in a challenging economic trading environment.	PESTLE analysis Commitment to the principles of emergent strategy, being agile and responsive to market risks and opportunities.	No change
People: Our people are our most important asset and the primary means through which we are able to add value to the lives of the people we support. Within a low margin business and increasingly competitive market, this presents risks around recruitment, retention and colleagues development.	We benchmark our pay and benefits across the sector. We have appropriate recognition and development opportunities. Succession planning and talent mapping for critical roles. Recruitment and attraction strategy aligned with outcomes of talent management. Ongoing market reviews to ensure local pay is appropriate for geography and roles.	Increase

Emerging Risks

The Operating Board considers long term trends in the health and social care sector that could present both risk and opportunity for the organisation. Any new emerging risks identified by the management are considered and acted on as appropriate.

Internal Controls Assurance

The board recognises that no system of internal control can provide absolute assurance or eliminate all risk. The system of internal controls is designed to manage risk to an acceptable level and to provide reasonable assurance that key business objectives and expected strategic outcomes will be achieved.

The board confirms that the process for identifying, evaluating, and managing the significant risks faced by the company is on-going, has been in place for the whole of the financial year and up to the date of approval of the annual financial statements, and is regularly reviewed by the Board.

The company adopts a 'three lines of assurance' model for risk management. The board has reviewed the effectiveness of the system of internal controls in existence for the year ended March 2023 and through to the date of approval of these accounts. No significant weaknesses were found in the internal controls that resulted in material losses, contingencies or uncertainties that required disclosure in the financial statement or in the auditor's report on the financial statements.

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DIRECTOR'S REPORT

Chair's introduction

The Board of Directors presents their annual accounts and reports for the year ending 31 March 2023.

Since April 2019 the Board has adopted the Wates Corporate Governance Principles for large private companies as the framework. The table on Page 87 summarises how we have applied the Wates Principles.

The Board has ensured with management that the views of the people we support, the communities in which they live, employees, and our suppliers drive the work of the Board and the decisions that it makes.

The Board was provided with an inspirational account of the experiences of some of the people we support at its Away Day in November 2022.

The Directors' Report sets out the composition of Board of Directors and the Operating Board as well as our corporate governance arrangements, processes, and activities throughout the year for the Board and the Committees.

During 2022/23, as part of the succession planning exercise following the departure of Paul Picknett, Nicola Gilham became Chair of Audit, Risk and Quality Committee and Vice-Chair of the Board and Christian Van Stolk was appointed a member of the Audit, Risk and Quality Committee.

We have strengthened our Board through the appointment of Dawn Kenson who joined the Board in January 2023.

We are currently assessing the way we review board effectiveness moving forward to ensure that we optimise board performance in what are challenging yet opportune times for the health & social care sector.

Our Board of Directors approved this report on 25 July 2023.

Peter Hay
Chair of the Turning Point Board

Our board of directors

Executive Directors

Julie Bass
Chief Executive

Julie has been an executive board director at Turning Point since 2009 and has held the position of Chief Executive since April 2020. Prior to this Julie worked in financial services in the UK and overseas in a wide variety of roles including holding responsibility for strategy, organisational effectiveness, performance and development and people related functions. She is passionate about supporting individuals to discover new possibilities in their lives through the provision of high quality, constantly evolving services, and interactions. In September 2022 Julie was appointed as associate non-executive director on the Trust Board at Surrey and Sussex Healthcare NHS Trust. Julie is also a Chartered Insurer and a fellow of the Chartered Institute of Personnel and Development.

Amarjit Dhillon
Chief Information Officer

Amarjit joined Turning Point in March 2014 as Chief Information Officer with accountability for Commercial Ventures since September 2018 and was appointed as an executive board member in April 2020. Amarjit trained as a technologist in the NHS and then moved into the corporate sector where he specialised in directing transformation and change in global organisations. He has technology and information management experience as well as time spent in production and operations management, sales and customer facing roles. Amarjit is a non-executive director for a housing association. He is a Chartered Engineer, a Chartered IT Professional and a Fellow of the British Computer Society and a Member of the Institution of Engineering and Technology.

Non-Executive Board Members

Peter Hay, CBE
Chair of the Board

Peter became Chair of Turning Point Board in September 2018. After a long career as a director of social care services, and a past president of the Association of Directors of Adult Social Services, Peter is now pursuing a range of interests in different roles across social care, housing, and wellbeing. Peter is curious about ways of developing people's control over their own health and wellbeing, passionate about building good lives and fascinated by the leadership styles that support these aims. Peter was awarded a CBE in 2012 for services to health and care.

Nicola Gilham
Chair of the Audit, Risk & Quality Committee from July 2022

Nicola joined the Turning Point Board in May 2018. She is Vice-Chair of the Board and Chair of the Audit, Risk and Quality Committee. As a qualified chartered accountant, she enjoyed her first career with Arthur Andersen where, for many years, she led consulting assignments, both in the UK and overseas. Whilst living in Australia, she moved into recruitment and worked in the sector for over twenty years. Nicola now pursues a portfolio non-executive career working for businesses across health and social care. She also has a long-standing interest in her local community. As such, currently, she is non-executive director for Brighter Futures for Children in Reading, which runs Children's Services for the borough, and non-executive member of the Buckinghamshire Healthcare NHS Trust and North West London Integrated Care Board. She is Vice Chair of Child Bereavement UK, and separately she spent several years, in a voluntary capacity, as a telephone counsellor for emotional support services.

Dawn Kenson

Dawn joined the Turning Point Board in January 2023. After a career where she was responsible for the combined regulated sales forces of The Woolwich and Barclays Bank, Dawn moved into non-executive work and built a portfolio in, and supporting, the public sector.

Dawn has held roles in a wide variety of organisations spanning central government, Arms Length Bodies, a housing association, and the NHS. Currently she sits on the NHS Lincolnshire Integrated Care Board, with a special interest in service delivery and has been the Senior Independent Director at Frimley Health NHS Foundation Trust for the past seven years.

Dawn holds a degree in Mathematics and Statistics and qualified as an Associate of the Chartered Insurance Institute.

Paul Picknett
Chair of Audit, Risk & Quality Committee until July 2022 and non-executive director until 21 March 2023

Paul joined the Turning Point Board in March 2014 after working in financial services for more than 30 years both in the UK and overseas. His career included 14 years as a main board director of Groupama Insurance company, where he was Corporate Services Director. He has been actively involved in several strategic acquisitions, including the acquisition of an award-winning healthcare operation. He is Trustee Chair of a pension scheme with assets over £310m. He has a degree in management studies and is a Fellow of the Chartered Insurance Institute. Paul's tenure ended in March 2023.

Dr. Victoria Tzortziou Brown

Victoria joined the Turning Point Board in May 2021. Victoria is an east London GP and the Research Lead of East London Health and Care Partnership. In her academic role at Barts and The London School of Medicine and Dentistry, Victoria undertakes research on the design and evaluation of healthcare interventions and their impact on professional behaviour and health inequalities.

Victoria is also the Royal College of General Practitioners joint Honorary Secretary, a director at Healthcare Quality Improvement Partnership (HQIP) and a Founding Senior Fellow and Council member of the Faculty of Medical Leadership and Management. She has extensive clinical commissioning experience and served as a board member and clinical vice chair of the Tower Hamlets Clinical Commissioning Group.

Victoria is a Council member of the Faculty of Sexual and Reproductive Health. She also sits at the Council of the Faculty of Sport and Exercise Medicine and has a clinical and research interest in musculoskeletal medicine and education.

Dr. Christian Van Stolk

Christian joined the board in December 2020. He is a member of the Audit, Risk and Quality Committee. He has worked extensively on health and wellbeing in the workplace including research on improving the health and wellbeing of colleagues in the National Health Service in the UK, maintaining, and gaining employment for those with common mental health conditions, building an evidence base for health interventions in workplace settings, and looking at the relationship between productivity and health and wellbeing outcomes.

Christian sits on several expert panels for the UK government including those on occupational health, mental health, and employee health and wellbeing in the NHS. He holds a Ph.D. from the London School of Economics and Political Science and fellowships at the Royal Society of Medicine and Royal Society of the Arts.

Our Operating Board

Our operating board oversees the day-to-day operations of the organisation. The operating board is chaired by Chief Executive, Julie Bass and includes Amarjit Dhillon, Chief Information Officer, both of whom are executive board members. In addition, the operating board includes:

David Foord
Director of Quality & Risk

David joined Turning Point in December 2021 and comes with a wealth of experience as a qualified clinician. With 25 years' experience in the NHS, he is a registered mental health nurse and has worked at board level for over a decade leading quality, risk, safeguarding and clinical governance teams.

Caroline James Nock
Chief People Officer

Caroline was Chief People Officer at Turning Point from April 2022 until March 2023. She led the HR community in the development and execution of the people strategy.

Sarah Kennedy
Director of External Affairs and Marketing

Sarah joined Turning Point in 2009, having previously spent 8 years working with the National Lottery operator, Camelot, and Breast Cancer Care. Sarah has also worked in politics in numerous roles and was a local government councillor in an inner-city London Borough. Sarah is a Member of the Chartered Institute of Public Relations and a member of the Company of Communicators.

Philip Newton
Director of Corporate Governance

Philip joined Turning Point in 2007 after many years working for British Telecommunications PLC. He supports the board, executives, and senior management teams to shape the organisation from the perspective of corporate governance and strategy. Philip is a Fellow of the Chartered Management Institute.

David Slegg
Chief Financial Officer

David has worked in the health and social care sector through-out his career. He joined Turning Point in June 2020 having previously spent his career in the NHS where he worked in Finance Director roles for 27 years.

Clare Taylor
Chief Operating Officer

Clare has overall responsibility for Turning Point's service delivery across its different areas of work. She has worked in health and social care for over 26 years including roles within universities, service providers, local authority commissioning and public health. She is Vice-Chair of Collective Voice, the umbrella body for third sector drug and alcohol treatment providers, and is passionate about improving access to services, particularly for those who need help the most. Clare has an MSc in Addiction Studies and through her varied leadership roles has a keen interest in supporting the development of women leaders within the wider system.

Structure, governance & management

Turning Point is private company limited by guarantee without share capital, a registered charity, and also a registered provider under the Regulator of Social Housing. The governing document of the company is the Articles of Association.

Subsidiary companies

Turning Point has one wholly owned subsidiary, Turning Point (Services) Limited which is the trading arm of the parent charity. The subsidiary board meets twice a year and has a board composition of five directors from the Turning Point board and two independent directors.

Turning Point board meetings

The Turning Point Board met formally six times between April 2022 and March 2023.

Board attendance in 2022/23	Turning Point
Number of meetings in 2022/23	6
Numbers Attended:	
Peter Hay (Chairman)	6
Paul Picknett (Vice-Chair)	6
Nicola Gilham	6
Julie Bass	5
Amarjit Dhillon	6
Christian Van Stolk	5
Victoria Tzortziou Brown	5
Dawn Kenson	1 of 1

Board appointment

The directors of Turning Point form a unitary board of non-executive and executive members as defined by the Articles of Association. The directors are also the Trustees for the purpose of charity law. Executive members are appointed according to the terms of their employment with the company under a Relevant Qualifying Position. Non-executive members are appointed by the board following an open recruitment process overseen by the Nomination Committee. Directors are appointed for a three-year term with the option to be reappointed to a second term on a resolution of the Board. Directors can, following sufficient review, be appointed to a third three-year term should circumstances require this. Newly appointed directors go through an induction process that includes service visits, meetings with key senior managers and other directors of the board. There is also an introduction to the regulatory and market environment, the strategic intent of the company and the associated risk and opportunities.

Dawn Kenson was appointed as Non-Executive Director of Turning Point on 17 January 2023.

Nicola Gilham was appointed Chair of the Audit, Risk and Quality Committee from 26 July 2022 and Vice-Chair of the Turning Point Board on 21 March 2023 as part of the succession plan following the expiry of the tenure of Paul Picknett (the previous holder of these roles).

Statement of Directors' Responsibilities

The directors are responsible for preparing the Annual Report and the Financial Statements in accordance with applicable law and regulation.

Company law requires directors to prepare financial statements for each year which give a true and fair view of the state of affairs of the company and of the income and expenditure for the period of account.

In preparing these financial statements,

the Board is required to:

- Select suitable accounting policies and then apply them consistently;
- Make judgements and estimates that are reasonable and prudent;
- State whether applicable accounting standards have been followed, subject to any material departures disclosed and explained in the financial statements; and
- Prepare the financial statements on the going concern basis, unless it is inappropriate to presume that the charity will continue in business.

The Board is responsible for keeping proper accounting records which disclose with reasonable accuracy at any time the financial position of the Charity and enable it to ensure that the financial statements comply with the Companies Act 2006, Charities Act 2011 and the Housing and Regeneration Act 2008, Housing SORP 2018 and the Accounting Direction for Private Registered Providers of Social Housing 2022. The Directors are also responsible for safeguarding the assets of the company and hence for taking reasonable steps for the prevention and detection of fraud and other irregularities.

The Directors are responsible for the maintenance and integrity of the corporate and financial information on the Group's and charitable company's website. Legislation in the United Kingdom governing the preparation and dissemination of financial statements may differ from legislation in other jurisdictions.

Board effectiveness

At the beginning of 2022, the board carried out an internal board effectiveness evaluation via a self-assessment questionnaire focussed on key areas including strategy, board composition, risk management, stakeholder engagement, agenda management, virtual ways of working and knowledge and information with outcomes considered by the board in May 2022.

Conflicts of interest

Turning Point has a policy in place to manage conflicts of interest. Upon appointment, all directors are required to declare their interests. On an annual basis, all members are asked to update the register of interests, which includes the fit and proper persons requirements. At each meeting of the Board and Audit Risk & Quality Committee, members and attendees are required to state any interests with regard to specific items on the agenda in line with their duties under the Companies Act 2006.

Payments to Directors

Non-executive directors of Turning Point receive remuneration of £7,500 per year for the Chair and £5,000 per year for the other non-executive directors. There has been no increase in non-executive director remuneration during the year. Executive directors are paid for their executive roles and do not receive additional payment for their responsibilities as directors of the organisation. Apart from the reimbursement of expenses entailed in the course of the company's business, there have been no other payments to executive directors in 2022/23.

Corporate Governance report

For the year ended 31 March 2023, under the Companies (Miscellaneous Reporting) Regulations 2018, the Company has applied the Wates Corporate Governance Principles for Large Private Companies.

Each of the six Wates Principles has been considered individually within the context of the company's specific circumstances and a short supporting statement is set out below to explain how each principle has been applied to achieve better outcomes.

Principal	Summary
Purpose and leadership An effective Board develops and promotes the purpose of a company, and ensures that its values, strategy and culture align with that purpose.	The Board promotes the purpose of the Company through strategic intent and emergent strategy.
Board composition Effective Board composition requires an effective chair and a balance of skills, backgrounds, experience and knowledge, with individual Directors having sufficient capacity to make a valuable contribution. The size of a Board should be guided by the scale and complexity of the company.	The Turning Point Board comprises of Independent Non-Executive Chair, Chief Executive, Chief Information Officer and four Independent Non-Executive Directors. The size and composition of the Board is considered appropriate to the size, nature and complexity of the Company. The Board has delegated some functions to board committees which focus on audit, risk & quality, and a committee for remuneration. More information regarding committees is included on page 88.. There is process in place for appropriate board effectiveness reviews. More information regarding board effectiveness is included on page 82.
Director responsibilities The Board and individual Directors should have a clear understanding of their accountability and responsibilities. The Board's policies and procedures should support effective decision-making and independent challenge.	The Board receives regular reports on strategic performance, financial performance, stakeholder engagement, and management of key business risks along with updates on activities and decisions of its committees. In addition, certain responsibilities are delegated to the board committees in accordance with the approved Governance Standing Orders. At each Board meeting, all Directors are asked to declare any potential conflict of interest. Any declaration is noted and where there are potential conflicts, appropriate safeguards are implemented.
Opportunity and risk A Board should promote the long-term sustainable success of the company by identifying opportunities to create and preserve value, and establishing oversight for the identification and mitigation of risks	The Board seeks out opportunity while mitigating risk. The Board engages with the strategy dialogue and organisational performance at Board meetings throughout the year and specifically through the annual strategy away day. The Audit, Risk & Quality Committee, consisting of Independent Non-Executive Directors, receives assurance reports from the internal and external auditors. Material risks are identified and managed and where required the substantive issues are escalated to the Board. The principal risks of the company are set out on page 76.
Remuneration A Board should promote executive remuneration structures aligned to the long-term sustainable success of the company, taking into account pay and conditions elsewhere in the company	The Remuneration Committee has clearly defined terms of reference and is responsible for determining remuneration. The Committee considers benchmarking data and where appropriate advice from external consultants. More information regarding Committees is included on page 88.
Stakeholder relationships and engagement Directors should foster effective shareholder relationships aligned to the company's purpose. The Board is responsible for overseeing meaningful engagement with stakeholders, including the workforce, and having regard to their views when taking decisions.	Accountability and transparency with stakeholders is key to the long term success of the Group. The table within the Section 172(1) Statement on pages 27-29 sets out the details of some of the engagements that takes place at the operational or group level with the key stakeholders.

Our people

The health and social care sector faced many challenges coming out of the COVID-19 pandemic, one of the most pressing was to its workforce. As labour participation decreased and people left the care workforce for alternative employment, organisations including Turning Point, had to approach recruitment and retention very differently. Over the course of 2022/23, we have tried and successfully adopted new recruitment techniques, while also focusing on colleagues retention through learning – in-person and virtual - and developing new career pathways to keep talent within the organisation.

We have strengthened our involvement channels, continue to develop our ED&I (Equality, diversity, and inclusion) networks, and have championed our people through the Inspired by Possibility awards, Apprenticeship awards and Nursing Awards. We have grown our clinical team, continue to empower our peer mentors to find paid employment within the organisation and beyond, and prioritised colleagues wellbeing and health at work as the impact of the cost-of-living crisis was felt.

Our suppliers

We work with several suppliers throughout the year for the delivery of many essential services, including harm reduction products, facilities management, technology, and agency staff cover. We have good working relationships with all our suppliers and value the contribution they make. Central to our procurement process is the assured delivery of value for money, social impact, and environmental commitments.

Board committees

Audit, Risk & Quality Committee
(the "ARQ Committee")

The ARQ Committee is a standing board committee, and it supports the Board by providing assurance that robust and effective systems are in place to manage risks and ensure standards in financial management, internal & external audit, quality, safeguarding and clinical governance. The ARQ Committee receives reports from both internal and external auditors as well as executives and senior managers.

As at 31 March 2023, the members of the ARQ Committee were as follows:

- Nicola Gilham, non-executive director (Chair)
- Victoria Tzortziou Brown, non-executive director
- Christian Van Stolk, non-executive director

The Chief Financial Officer is invited to ARQ Committee meetings as a matter of course. Other executives and senior managers are invited to ARQ Committee meetings as required. The committee met four times between April 2022 and March 2023. All meetings were quorate. The Chief Financial Officer attended all ARQ Committee meetings.

Nomination Committee

When required, the Nomination Committee is convened to make recommendations to the Board on recruitment, membership, and succession planning. Hunter Healthcare was appointed to conduct the initial market search and shortlisting for the position of Non-Executive Director on behalf of the committee. The committee interviewed the shortlisted candidates and recommended the appointment of Dawn Kenson as director of the company to the board. The board accepted the recommendation of the Nomination Committee and appointed Dawn Kenson to the board on 17 January 2023.

Remuneration Committee

In January 2021, the board took the decision to create a permanent Remuneration Committee to deal with executive and non-executive remuneration with different membership to manage conflicts of interest. The membership comprises three non-executive directors for executive director remuneration.

The Remuneration Committee did not meet in the 2022/23 fiscal year but will meet in September 2023.

Review of objectives

The charitable objects of the company are for the public benefit, to promote or assist in promoting the protection of health of those with learning disability; and/or those at risk of, or with mental health conditions; and/or drug or alcohol use, misuse, or dependency, and/or other addictive behaviours.

The charitable objects are met through the provision of services across England for people to improve their health and wellbeing whether that is at home, within the workplace or through specialist services. In doing the company builds upon nearly 60 years of experience in substance use, mental health, learning disability, autism, acquired brain injury, sexual health, healthy lifestyles, and employment services.

The board of directors who are also the trustees under charity law has given careful consideration and due regard to the Charity Commission's general guidance on public benefit in reviewing the activities of the Turning Point group. The directors are satisfied that the objects of the charity and the activities it undertakes remain entirely for the public benefit in accordance with Section 17 of the Charities Act 2011.

Environmental & energy reporting

Turning Point greenhouse gas emissions, reportable under SECR for the financial year 2022/23 were 1,256 tonnes CO2e.

These include the emissions associated with UK electricity and natural gas consumption, as well as business travel in company operated and private vehicles by employees. Turning Point's greenhouse gas emissions were 29.3% lower this financial year than in the 2021-22 financial year. The intensity of 8.2 tonnes CO2e per £m revenue is 33.6% lower than the last financial year.

Greenhouse gas emissions

Emissions source	2021/2022 Location-based	2022/2023 Market-based	% Share	YoY % Change
Fuel Combustion: Natural Gas	962	868	69.1%	-9.7%
Purchased Electricity	569	54	4.3%	-88.6%
Fuel Combustion: Transport	346	335	26.6%	-3.3%
Total Emissions (tC02e)	**1,777**	**1,256**	**100%**	-29.3%
Annual Turnover (£m)	143	153		6.5%
Intensity (tC02e per £m Turnover)	**12.4**	**8.2**		-33.6%

Figure 1 Greenhouse gas emissions by year (tonnes CO2e) – Market-based

Emissions source	2021/2022	2022/2023	% Share	YoY % Change
Scope 1	1,062	921	73.3%	-13.3%
Scope 2	431	10	0.8%	-97.6%
Scope 3	284	326	25.9%	14.6%
Total Emissions (tC02e)	**1,777**	**1,256**	**100%**	-29.3%

Figure 2 Greenhouse gas emissions by scope (tonnes CO2e) – Market-based

Scope 1: Natural gas and company-operated transport. Scope 2: Electricity. Scope 3: Losses from electricity distribution and transmission, private vehicles used for business travel. This only includes emissions reportable under SECR and may not reflect the entire carbon footprint of the organisation.

Energy consumption

Category	2021/2022	2022/2023	% Share	YoY % Change
Fuel Combustion: Natural Gas	5,252,131	4,757,390	55.5%	-9.4%
Purchased Electricity	2,031,257	2,448,336	28.6%	20.5%
Fuel Combustion: Transport	1,423,706	1,367,576	16.0%	-3.9%
Total	**8,707,093**	**8,573,302**	**100%**	-1.5%

Figure 3 Energy consumption by year (kWh)

Boundary, methodology and exclusions

An 'operational control' approach has been used to define the Greenhouse Gas emissions boundary. This approach captures emissions associated with the operation of buildings in the Turning Point Estate for example the residential properties, independent hospital, office sites and storage facilities, plus company-owned, leased and employee-owned vehicles. This information was collected and reported in line with the methodology set out in the UK Government's Environmental Reporting Guidelines, 2019. Emissions have been calculated using the latest conversion factors provided by the UK Government. The emissions from the transmission and distribution of electricity are voluntarily reported under Scope 3. There are no material omissions from the mandatory reporting scope. A percentage of emissions relating to gas and electricity has been estimated, due to invoicing end dates, this is allowed under the guidance of the Regulation. The reporting period is April 2022 to March 2023, as per the financial accounts.

Energy efficiency initiatives

In the period covered by the SECR Report Turning Point has not undertaken any significant energy efficiency actions within the business.

Achievements & performance

There have been many challenges over the last year – recruitment, a cost-of-living crisis, political and economic turmoil, and funding pressures to name a few. Despite this, we continue to strengthen our learning, recruitment, and progression opportunities; win new contracts; and see our existing services reach more people, in novel ways.

With the start of our new strategic period, and adoption of refreshed strategic goals, we are well placed to navigate uncertainty. Commissioners trust us to design and deliver services that reach the most vulnerable groups in our communities and shape the national frameworks within which we work. Our social value also continues to grow, as the impact of our work continues to reach beyond the people we support, to their families, carers, and communities.

Value for money

For Turning Point value for money means delivering the best possible health and social care outcomes for the service price. We deliver value by continually improving the efficiency and effectiveness of our people, processes, and systems to drive ever better outcomes. This means we need to ensure there is money available to invest in our people and our technology infrastructure. We understand value for money along the lines of the National Audit Office definition which assesses value across three criteria:

- Economy: minimising the cost of resources used or required
- Efficiency: the relationship between the outcomes delivered through our services and the resources needed to produce them
- Effectiveness: the relationship between the intended and actual outcomes delivered through our services.

This approach is governed through our Governance Framework and provides us with the means of achieving cost effectiveness, which we define as the optimal use of resources to achieve the intended health and social care outcomes.

As a provider of health and social care services Turning Point benchmarks its Care Quality Commission (CQC) regulated services against other providers to ensure that service effectiveness compares favourably and serves as an indicator of value we deliver through the quality of our services.

Turning Point Overall Ratings (April 2022) – 94% Good or Outstanding

Our overall rating for our CQC regulated services is 94% Good or Outstanding. We are regulated by the CQC for our care home services with and without nursing; community-based services for people who use substances; domiciliary care services; hospital services for people with mental health needs; rehabilitation services; residential substance use treatment and/or rehabilitation services and our supported living services.

Our substance use services are also benchmarked based on successful completion outcomes for each Public Health England Partnership Area compared to other Partnership Areas that share the same client characteristics. This information forms part of the Public Health England official statistics and is therefore subject to reporting restrictions beyond internal use for management, quality assurance and briefing purposes.

Turning Point is first and foremost a national provider of health and social care services and therefore provides little social housing and where it does so this is only in conjunction with, and for the purpose of health and social care provision. Most of the value for money metrics required of a typical Registered Provider by the Regulator for Social Housing do not provide meaningful information for the annual report and are therefore not included. The following two metrics are included:

	2023	2022
Return on Capital Employed	9%	17%
Operating Margin	1%	2%

Governance & financial viability

The company has carried out an annual assessment of compliance with the Governance & Viability Standard and the board confirms continued compliance.

Financial Review

Financial performance

Turning Point has returned another year of income growth and sustained positive contribution. Having recovered from the impact of Covid-19, Turning Point faces the new challenge of managing the impact of high inflation, energy price increases and a requirement to continue to invest in our employees so that there is a continued improvement in recruitment and retention in each market.

The financial results for the year show that, despite adapting to the changed operating environment, financial performance remains strong. Overall turnover increased by 6.3% to £152.8m, generating an operating surplus of £1.3m.

Within the Public Health and Substance Use business unit we have worked closely with many of our commissioners to utilise monies from Public Health England to extend our activities via Universal, Rough Sleepers and ADDER funding totalling £6.6m. Last year we also secured funding from the Office for Health Improvement and Disparities (OHID), launched in October 2021, which is enabling Turning Point to support even more people. This initiative has an initial timeframe of the 3 years to March 2025, and in 2022/23 we received income of £4.2m. We will use the extra income to reduce caseloads for our employees and increase the number of clients in treatment.

Growth opportunities widened in 2022/23 after the constraints in the prior year caused by the pandemic. Turning Point was also successful in the retender for the PHSU contracts in Slough, Oldham and Rochdale, and Wiltshire. Unfortunately, our contracts in Medway and Swindon were not retained. The Mental Health business unit secured new services in West Sussex, expanded its crisis services and extended service in Nottingham. Learning Disabilities services were boosted by new services in Sheffield and Manchester.

The Commercial Ventures arm of the business continues to develop its Rightsteps and livelife brands, supporting business to business and direct to customer activity respectively. The product range has extended, with market exploration and customer engagement increasing.

Turning Point has responded well in this post-pandemic environment, continuing to grow revenue and maintain financial viability. Turning Point faces many challenges ahead, particularly with high inflation rates and the increases to the National Living Wage, but the company is working closely with commissioners to ensure that it delivers safe and high-quality services for the people we support and employees.

A corner stone to the strategic period 2022 to 2027 is the continued improvement to the financial sustainability of Turning Point. Financial sustainability continues to improve, and Turning Point enters the financial year 2023-24 in a stronger position compared to 2022/23 and better placed to face the challenges ahead.

Reserves

Reserves are that part of a charity's unrestricted income funds that are freely available to spend to further the charity's objects and have been set aside for future use. Turning Point has no designated and £nil (2022: £428k) restricted funds.

In the financial year 2022/23 reserves improved by £6.2m and Turning Point will enter the financial year 2023-24 with positive total reserves of £3.6m. Reserves are in surplus for the first time since the pension changes in FRS102 were introduced in March 2016. The ambition is to continue to build reserves and the 2023-24 budget is expected to continue the improvement in this area.

Total reserves include the pension reserve which represents the discounted value of the Group's future contributions to the defined benefit pension scheme and is provided for on the Group's balance sheet in compliance with FRS 102. This is an accounting adjustment and does not directly impact our operating cashflows.

We are ambitious for the years ahead and aim to continue building our reserves through a determined focus on key priorities, including:

- Continuing to extend our reach and impact, including reducing demand on the NHS system through transitionary care and Accident & Emergency discharge offer;
- Developing our strategic relationship management, including with Integrated Care Boards as they develop, leading to growth opportunities outside of the tendering process;
- Creating and nurturing partnerships and collaborations to deliver integrated offers and meet clients' multiple needs;
- New and evolving attraction and recruitment approaches linked to competitive rewards for our employees;
- Continued systems development investment, including in risk management, care planning and client records system.

The board assesses the risks to the organisation annually and sets the target level of unrestricted funds. We have now achieved the short-term goal for unrestricted reserves to cover the pension reserve, thereby bringing total reserves back to a positive position. In 2008-09 the directors established a target for unrestricted reserves of 8.3% of income, which is £12.7m based on the income from operations in 2022/23. This target was achieved during the financial year ending 31st March 2023, but it will be an ongoing target as it will be affected by income growth and profitability in future years.

The board has reviewed the budgets and cashflow forecasts for 2023-24 and 2024-25, which reflect all the known opportunities and challenges, both internally and in the external environment. They consider the cash balance to be adequate for the purpose of meeting the working capital requirements for the foreseeable future and coping with the financial impacts of the risks faced by the organisation. The approach to reserves is approved with input from the Audit, Risk & Quality Committee.

This report was approved by the board on 25 July 2023 and signed on its behalf.

Peter Hay (Chair)
Director

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INDEPENDENT AUDITOR'S REPORT

Independent Auditor's Report to the members of Turning Point

Opinion

We have audited the financial statements of Turning Point (the 'Charitable company') and its subsidiary (the 'Group') for the year ended 31 March 2023, which comprise the Group and Charity Statements of comprehensive income and Statements of financial position, the Group Statement of cash flows, the Group Statement of changes in reserves and the related notes, including a summary of significant accounting policies. The financial reporting framework that has been applied in their preparation is applicable law and United Kingdom Accounting Standards, including Financial Reporting Standard 102 'The Financial Reporting Standard applicable in the UK and Republic of Ireland' (United Kingdom Generally Accepted Accounting Practice).

In our opinion the financial statements:

- give a true and fair view of the state of the Group's and of the charitable company's affairs as at 31 March 2023 and of the Group's and charitable company's incoming resources and application of resources, including its income and expenditure for the year then ended;
- have been properly prepared in accordance with United Kingdom Generally Accepted Accounting Practice; and
- have been prepared in accordance with the requirements of the Companies Act 2006, Housing and Regeneration Act 2008 and The Accounting Direction for Registered Providers of Social Housing from April 2022.

Basis for opinion

We conducted our audit in accordance with International Standards on Auditing (UK) (ISAs (UK)) and applicable law. Our responsibilities under those standards are further described in the Auditor's responsibilities for the audit of the financial statements section of our report. We are independent of the Group in accordance with the ethical requirements that are relevant to our audit of the financial statements in the United Kingdom, including the Financial Reporting Council's Ethical Standard, and we have fulfilled our other ethical responsibilities in accordance with these requirements. We believe that the audit evidence we have obtained is sufficient and appropriate to provide a basis for our opinion.

Conclusions relating to going concern

In auditing the financial statements, we have concluded that the Board's use of the going concern basis of accounting in the preparation of the financial statements is appropriate.

Based on the work we have performed, we have not identified any material uncertainties relating to events or conditions that, individually or collectively, may cast significant doubt on the Group's or charitable company's ability to continue as a going concern for a period of at least twelve months from when the financial statements are authorised for issue.

Our responsibilities and the responsibilities of the Board with respect to going concern are described in the relevant sections of this report.

Other information

The trustees are responsible for the other information within the Annual Report. The other information comprises the information included in the Annual Report, other than the financial statements and our Auditor's report thereon. Our opinion on the financial statements does not cover the other information and, except to the extent otherwise explicitly stated in our report, we do not express any form of assurance conclusion thereon.

In connection with our audit of the financial statements, our responsibility is to read the other information and, in doing so, consider whether the other information is materially inconsistent with the financial statements or our knowledge obtained in the audit or otherwise appears to be materially misstated. If we identify such material inconsistencies or apparent material misstatements, we are required to determine whether there is a material misstatement in the financial statements or a material misstatement of the other information. If, based on the work we have performed, we conclude that there is a material misstatement of this other information, we are required to report that fact.

We have nothing to report in this regard.

Opinion on other matters prescribed by the Companies Act 2006

In our opinion, based on the work undertaken in the course of the audit:

- the information given in the Group strategic report and the Directors' report for the financial year for which the financial statements are prepared is consistent with the financial statements; and
- the Group strategic report and the Directors' report have been prepared in accordance with applicable legal requirements.

Matters on which we are required to report by exception

In the light of the knowledge and understanding of the Group and the parent Charity and its environment obtained in the course of the audit, we have not identified material misstatements in the Group strategic report or the Directors' report.

We have nothing to report in respect of the following matters in relation to which the Companies Act 2006 requires us to report to you if, in our opinion:

- adequate accounting records have not been kept; or
- the financial statements are not in agreement with the accounting records and returns; or
- certain disclosures of trustees' remuneration specified by law are not made; or
- we have not received all the information and explanations we require for our audit.

Responsibilities of directors

As explained more fully in the directors' responsibilities statement on page 54, the trustees are responsible for the preparation of the financial statements and for being satisfied that they give a true and fair view, and for such internal control as the trustees determine is necessary to enable the preparation of financial statements that are free from material misstatement, whether due to fraud or error.

In preparing the financial statements, the directors are responsible for assessing the Group's and the parent Charity's ability to continue as a going concern, disclosing, as applicable, matters related to going concern and using the going concern basis of accounting unless the trustees either intend to liquidate the Group or the parent Charity or to cease operations, or have no realistic alternative but to do so.

Auditor's responsibilities for the audit of the financial statements

Our objectives are to obtain reasonable assurance about whether the financial statements as a whole are free from material misstatement, whether due to fraud or error, and to issue an Auditor's report that includes our opinion. Reasonable assurance is a high level of assurance, but is not a guarantee that an audit conducted in accordance with ISAs (UK) will always detect a material misstatement when it exists. Misstatements can arise from fraud or error and are considered material if, individually or in the aggregate, they could reasonably be expected to influence the economic decisions of users taken on the basis of these financial statements.

A further description of our responsibilities for the audit of the financial statements is located on the Financial Reporting Council's website at: www.frc.org.uk/auditorsresponsibilities. This description forms part of our Auditor's report.

Extent to which the audit was considered capable of detecting irregularities, including fraud

Irregularities, including fraud, are instances of non-compliance with laws and regulations. We identified and assessed the risks of material misstatement of the financial statements from irregularities, whether due to fraud or error, and discussed these between our audit team members. We then designed and performed audit procedures responsive to those risks, including obtaining audit evidence sufficient and appropriate to provide a basis for our opinion.

We obtained an understanding of the legal and regulatory frameworks within which the charitable company and group operates, focusing on those laws and regulations that have a direct effect on the determination of material amounts and disclosures in the financial statements. The laws and regulations we considered in this context were the Companies Act 2006, the Charities Act 2011, the Housing and Regeneration Act 2008 and The Accounting Direction for Registered Providers of Social Housing from April 2022 together with the Housing SORP. We assessed the required compliance with these laws and regulations as part of our audit procedures on the related financial statement items.

In addition, we considered provisions of other laws and regulations that do not have a direct effect on the financial statements but compliance with which might be fundamental to the charitable company's and the group's ability to operate or to avoid a material penalty. We also considered the opportunities and incentives that may exist within the charitable company and the group for fraud. The laws and regulations we considered in this context for the UK operations were CQC Regulations for service providers and managers, Employment legislation, the Wates Principles and requirements imposed by the Regulator of Social Housing.

Auditing standards limit the required audit procedures to identify non-compliance with these laws and regulations to enquiry of the Trustees and other management and inspection of regulatory and legal correspondence, if any.

We identified the greatest risk of material impact on the financial statements from irregularities, including fraud, to be within the timing of recognition of contract income, the override of controls by management and the assumptions used to estimate the pension liability. Our audit procedures to respond to these risks included reviewing the income recognition policy, sample testing the funding agreements and reviewing for restrictions and clawbacks, tracing the income receipts to bank, reviewing the controls in place for income recognition, enquiries with management, review of internal audit reports, review of the fraud reports made to the Audit Committee, sample testing on the posting of journals, reviewing correspondence with the regulators, reading minutes of meetings of those charged with governance, reviewing accounting estimates for biases and testing the assumptions used to estimate the pension liability.

Owing to the inherent limitations of an audit, there is an unavoidable risk that we may not have detected some material misstatements in the financial statements, even though we have properly planned and performed our audit in accordance with auditing standards. For example, the further removed non-compliance with laws and regulations (irregularities) is from the events and transactions reflected in the financial statements, the less likely the inherently limited procedures required by auditing standards would identify it. In addition, as with any audit, there remained a higher risk of non-detection of irregularities, as these may involve collusion, forgery, intentional omissions, misrepresentations, or the override of internal controls. We are not responsible for preventing non-compliance and cannot be expected to detect non-compliance with all laws and regulations.

Use of our report

This report is made solely to the Charity's members, as a body, in accordance with Chapter 3 of Part 16 of the Companies Act 2006 and Section 128 of the Housing and Regeneration Act 2008. Our audit work has been undertaken so that we might state to the Charity's members those matters we are required to state to them in an Auditor's report and for no other purpose. To the fullest extent permitted by law, we do not accept or assume responsibility to anyone other than the Charity and the Charity's members, as a body, for our audit work, for this report, or for the opinions we have formed.

V Szulist
Senior statutory auditor

for and on behalf of
Crowe U.K. LLP
Statutory auditor

3rd Floor
The Lexicon
Mount Street
Manchester
M2 5NT

Date: 28th July 2023

Group statement of comprehensive income for the year ended 31 March 2023

		2023	2022
	Note	£000	£000
Turnover	4	**152,774**	143,660
Operating charges	4	**(151,427)**	(141,230)
Operating surplus		**1,347**	2,430
Interest receivable and similar income	12	**162**	34
Loss on disposal of investment	16	**(1)**	-
Impact of changing assumptions and discount rate on pension deficit reduction plan	23	**3,803**	(737)
Surplus for the financial year		**5,311**	1,727
Actuarial gains on defined benefit pension schemes	30	**918**	1,316
Other comprehensive income for the year		**918**	1,316
Total comprehensive surplus		**6,229**	3,043

All 2023 activities relate to continuing operations.

Charity statement of comprehensive income for the year ended 31 March 2023

	Note	2023 £000	2022 £000
Turnover	5	**151,322**	142,307
Operating charges	5	**(151,326)**	(141,117)
Operating surplus		**(4)**	1,190
Interest receivable and similar income	12	**162**	34
Loss on disposal of investment	16	**(1)**	-
Impact of changing assumptions and discount rate on pension deficit reduction plan	23	**3,803**	(737)
Surplus for the financial year		**3,960**	487
Actuarial gains on defined benefit pension schemes	30	**918**	1,316
Gift aid from subsidiary	32	**1,232**	1,242
Other comprehensive income for the year		**2,150**	2,558
Total comprehensive surplus		**6,110**	3,045

All 2023 activities relate to continuing operations.
Gift aid from the subsidiary of £1,232k relates to gift aid arising on profits generated in the previous accounting period (2022: £1,242k).

Consolidated statement of financial position as at 31 March 2023

	Note	2023		2022	
		£000		£000	
Fixed assets					
Housing properties	14		**4,250**		4,228
Other fixed assets	15		**249**		292
Investments	16		**-**		1
			4,499		4,521
Current assets					
Debtors	17	**21,483**		24,283	
Cash and cash equivalents	18	**10,817**		4,772	
		32,300		29,055	
Creditors: amounts falling due within one year	19	**(21,935)**		(19,687)	
Net current assets			**10,365**		9,368
Total assets less current liabilities			**14,864**		13,889
Creditors: amounts falling due after more than one year	21		**57**		64
			57		64
Provisions for liabilities					
Defined benefit pension liability	30		**-**		-
Pension provision	23		**9,411**		14,443
Reinstatement provision	23		**1,735**		1,950
Other provision	23		**45**		45
			11,191		16,438
Reserves					
Unrestricted reserves			**13,027**		11,402
Pension reserve			**(9,411)**		(14,443)
Restricted reserves			**-**		428
			14,864		13,889

The financial statements were approved and authorised for issue by the board and were signed on its behalf on 25 July 2023.
Peter Hay (Chair), Director, Turning Point
Company number: 00793558

Charity statement of financial position as at 31 March 2023

	Note	2023		2022	
		£000		£000	
Fixed assets					
Housing properties	14		**4,250**		4,228
Other fixed assets	15		**249**		292
Investments	16		**-**		1
			4,499		4,521
Current assets					
Debtors	17	**7,692**		14,475	
Cash and cash equivalents	18	**10,789**		4,694	
		18,481		19,169	
Creditors: amounts falling due within one year	19	**(10,808)**		(12,375)	
Net current assets			**7,673**		6,794
Total assets less current liabilities			**12,172**		11,315
Creditors: amounts falling due after more than one year	21		**57**		64
			57		64
Provisions for liabilities					
Defined benefit pension liability	30		**-**		-
Pension provision	23		**9,411**		14,443
Reinstatement provision	23		**1,735**		1,950
Other provision	23		**45**		45
			11,191		16,438
Reserves					
Unrestricted reserves			**10,335**		8,828
Pension reserve			**(9,411)**		(14,443)
Restricted reserves			**-**		428
			12,172		11,315

The financial statements were approved and authorised for issue by the board and were signed on its behalf on 25 July 2023.
Peter Hay (Chair), Director, Turning Point
Company number: 00793558

Consolidated statement of changes in reserves for the year ended 31 March 2023

	Restricted reserves	Pension reserve	Unrestricted reserves	Total reserves
	£000	£000	£000	£000
At 1 April 2022	428	(14,443)	11,402	(2,613)
Comprehensive income for the year				
Surplus for the year	-	-	5,311	5,311
Actuarial gains on pension schemes	-	-	918	918
Movement on pension deficit	-	5,032	-	5,032
Transfer from profit and loss account	(428)	-	(4,604)	(5,032)
At 31 March 2023	-	(9,411)	13,027	3,616

The notes on pages 108 to 137 form part of these financial statements.

Consolidated statement of changes in reserves for the year ended 31 March 2022

	Restricted reserves	Pension reserve	Unrestricted reserves	Total reserves
	£000	£000	£000	£000
At 1 April 2021	10	(14,846)	9,180	(5,656)
Comprehensive income for the year				
Surplus for the year	418	-	1,309	1,727
Actuarial gains on pension schemes	-	-	1,316	1,316
Movement on pension deficit	-	403	-	403
Transfer from profit and loss account	-	-	(403)	(403)
At 31 March 2022	**428**	**(14,443)**	**11,402**	**(2,613)**

The notes on pages 108 to 137 form part of these financial statements.

Consolidated statement of cash flows for the year ended 31 March 2023

	2023	2022
	£000	£000
Cash flows from operating activities		
Profit for the financial year	**5,311**	1,727
Adjustments for:		
Depreciation of tangible assets	**476**	521
Loss on disposal of investments	**(1)**	-
Amortisation of capital grants	**(7)**	(6)
Interest received	**(162)**	(34)
Decrease/(increase) in debtors	**2,800**	(4,259)
(Decrease)/increase in creditors	**2,249**	372
(Decrease) in provisions	**(4,337)**	(991)
Defined benefit pension contributions	**-**	(130)
Pension interest and service costs	**8**	337
Net cash generated from operating activities	**6,337**	(2,463)

Consolidated statement of cash flows (continued) for the year ended 31 March 2023

	2023	2022
	£000	£000
Cash flows from investing activities		
Improvement to housing properties	**(339)**	(447)
Purchase of tangible fixed assets	**(115)**	(143)
Interest received	**162**	34
Net cash from investing activities	**(292)**	(556)
Net increase in cash and cash equivalents	**6,045**	(3,019)
Cash and cash equivalents at the beginning of the year	**4,772**	7,791
Cash and cash equivalents at the end of the year	**10,817**	4,772
Cash and cash equivalents at the end of year comprise:		
Cash at bank and in hand	**10,817**	4,772
	10,817	4,772

The notes on pages 108 to 137 form part of these financial statements.

Analysis of net debt for the year ended 31 March 2023

	At 1 April 2022	Cash flows	At 31 March 2023
	£000	**£000**	**£000**
Cash at bank and in hand	**4,772**	**6,045**	**10,817**
	4,772	**6,045**	**10,817**

The notes on pages 108 to 137 form part of these financial statements.

Notes to the financial statements for the year ended 31 March 2023

Accounting policies

1. General information

Turning Point is a company limited by guarantee and is incorporated in England. The registered office is America House, 2 America Square, London EC2N 2LU. The registered number is 793558.

2. Accounting policies

The principal accounting policies adopted, judgements and key sources of estimation in the preparation of the financial statements are as follows:

2.1 Accounting convention

Turning Point is registered under the Companies Act 2006 and is a registered housing provider.

The financial statements have been prepared in accordance with applicable Accounting Standards, including Financial Reporting Standard 102 (FRS 102), the Accounting Direction for Social Housing Providers from January 2022, and the Housing SORP 2018: Statement of Recommended Practice for Registered Social Housing Providers.

Turning Point meets the definition of a public benefit entity under FRS 102. Assets and liabilities are initially recognised at fair value or transaction value unless otherwise stated in the relevant accounting policy.

2.2 Going concern

On 31 March 2023, Turning Point had working capital of £10.4m (2022: £9.4m) and a cash balance of £10.8m (2022: £4.8m). Working capital has increased steadily over the last few years as surpluses have been retained in the business. Forecast cash available shows significant headroom against future working capital requirements and we are in a good position to meet the challenges ahead.

At the year-end, we had unrestricted reserves of £13.0m (2022: £11.4m) and total reserves, which include the pension reserve, of £3.6m (2022: -£2.6m). Our total reserves are now positive for the first time since FRS 102 was introduced in 2015/16, and we are progressing through our strategic period in good financial health.

We have successfully tendered for new contracts commencing in 2023/24 and look forward to opening new learning disabilities services in Birmingham, Kent and Nottingham and mental health services in Sussex and Nottinghamshire. These services demonstrate our ambition to continue with a sustainable growth of the business, which is evidenced by the year-on-year increase of both turnover and operating profit.

The business will continue to drive cost efficiencies, including roster management to improve efficiency and utilisation, and negotiating new supplier contracts. We are continuing to develop our products and find innovative ways of supporting people, through engagement with the people we support and commissioners, and this will drive future growth and secure retention of our current contracts.

These activities underpin the budgets and cash forecasts for 2023/24 and 2024/25, which have been reviewed and challenged by the Board. In addition, the Board has considered the organisation's ability to respond to the longer-term challenges facing health and social care providers and changes in the economic environment and are implementing a corporate strategy that will ensure the continuing financial viability of the business.

After due consideration, the Board has a reasonable expectation that the Group has adequate resources to continue its activities for the foreseeable future. Accordingly, the directors continue to adopt the going concern basis in preparing the financial statements as outlined in the Statement of Directors' Responsibilities.

2.3 Basis of consolidation

The financial statements consolidate the accounts of the Charity and its trading subsidiary, Turning Point (Services) Limited under the purchase method.

The Charity's jointly controlled entity, Northern Pathways Limited, incorporated under the Companies Act 2006, was accounted for under the equity method of accounting. Northern Pathways Limited was dissolved on 12 April 2022.

Notes to the financial statements for the year ended 31 March 2023

Accounting policies (continued)

Investments in subsidiaries are accounted for at cost less impairment in the individual financial statements.

2.4 Turnover

Turnover represents contract and grant income from statutory sources (including rents net of voids), payments from residents and donations. Grant income is recognised when the related provisions for the grant have been met. Donations are recognised when the charity is legally entitled to the income and the amount can be quantified with reasonable certainty. All other income is accounted for on an accruals basis.

2.5 Value added tax (VAT)

Turning Point and Turning Point (Services) Limited are members of a VAT group and operate the standard method for partial exemption. Irrecoverable VAT is recognised as an expense when the tax point of the relevant expenditure is reached.

2.6 Taxation

A current corporation tax charge is recognised for the amount of corporation tax payable in respect of the taxable income for the current or past reporting periods using the tax rates and laws that have been enacted or substantively enacted by the reporting date.

Turning Point is a registered charity that is exempt from taxation on income and gains to the extent that they fall within the exemptions for charities in Part 11 Corporation Tax Act 2010 or s.256 of the Taxation of Chargeable Gains Act 1992.

The non-charitable subsidiary typically claims relief against its taxable profits by making gift aid payments to Turning Point.

2.7 Capital grants

Capital grants (including social housing grants) are provided for in creditors and written off in the Statement of Comprehensive Income over the expected period of the useful life of the assets acquired.

2.8 Accrued income

Accrued income is classified as "Debtors" and includes contract and grant income (especially outcome related income) that will probably be received in a reporting period after that to which it relates.

2.9 Deferred income

Contract income and revenue grants are recognised as income in the period in which the performance criteria are met.

Deferred income is classified as "Creditors: amounts falling due within one year" and includes contract and grant income received in advance. These contracts and grants represent funds that have been received for specific purposes and are potentially refundable if the conditions of the contract or grant are not satisfied.

Contract and grant income received in the year but which remains unspent at the year-end is, with the agreement of the funder, carried forward in creditors at the year-end to be spent in the following year.

2.10 Fixed assets and depreciation

Depreciation is provided by the Charity to write off the cost net of grant less the estimated residual value of tangible fixed assets in equal instalments over their estimated useful economic lives as follows:

- Freehold properties and improvements to freehold properties are depreciated over 50 years.
- Improvements to leasehold properties are depreciated over the shorter of the term of the lease and the expected useful life of the asset.
- Fixtures and fittings, office equipment and motor vehicles – over 3 years
- Software – over 3 years

In accordance with the Housing SORP 2018: Statement of Recommended Practice for Registered Social Housing Providers, the overall cost of any property, fixtures and fittings, and office equipment will be split between significant components to enable each component to be depreciated according to its economic useful life. The categories of components and the relevant depreciation rates are those listed above. A 'significant

Notes to the financial statements for the year ended 31 March 2023

Accounting policies (continued)

component' will have a:

- Cost greater than £10,000, AND
- Cost greater than 10% of the whole asset, AND
- Have a useful economic life of less than half that of the whole asset

Where a component is replaced or restored, the carrying amount of the old component will be disposed of and the new component will be capitalised.

The Charity adopts a policy to write off, in the year of acquisition, items costing less than £3,000.

2.11 Improvement to properties

Expenditure on existing housing properties is capitalised to the extent that it improves the economic benefit of the asset either through an increase in rental income, a reduction in maintenance costs or through an extension of the life of the property.

2.12 Operating leases

Rents payable and motor vehicles under operating leases are charged on a straight-line basis over the term of the lease.

Rental lease commitments are measured at the full cost of the lease payments to the date on which the Charity expects to leave each property.

2.13 Provision for liabilities

Provisions are recognised when the Group has a present obligation (legal or constructive) because of a past event, it is probable that the Group will be required to settle the obligation, and a reliable estimate can be made of the amount of the obligation. The amount recognised as a provision is the best estimate of the consideration required to settle the present obligation at the end of the reporting period, considering the risks and uncertainties surrounding the obligation.

2.14 Financial instruments

The Charity's financial instruments consist of debtors, cash and creditors and as such are all basic in nature as defined in FRS 102. They are measured at the cash consideration expected to be paid or received.

2.15 Pension costs

The Charity operated a defined benefit pension scheme, which is contracted out of the State Scheme and provides benefits based on final pensionable pay. The scheme is a multi employer pension scheme and it is not possible to identify the assets and liabilities of the scheme which are attributable to the Charity. In accordance with FRS 102 the scheme is accounted for as a defined contribution scheme. The assets of the scheme are held separately from those of the Charity. The funds are valued every three years by a professionally qualified independent actuary, the rates of contribution payable then being determined by Pension Trustees on advice of the actuary. The latest completed triennial actuarial valuation took place on 31 March 2022. The Charity has provided for the committed contributions payable, discounted appropriately, to fund the deficit of the scheme.

The defined benefit scheme closed on 31 March 2012 and on 1 April 2012, Turning Point started a defined contribution scheme.

The Charity also has employees who are members of Local Government Pension Schemes which are defined benefit schemes. The defined benefit pension scheme current service costs are charged to the Statement of Comprehensive Income within staff costs. The expected return on the scheme assets less the scheme interest costs are credited within other interest. The scheme actuarial gains and losses are recognised immediately as other recognised gains and losses. The defined benefit scheme assets are measured at fair value at the year-end date. Scheme liabilities are measured on an actuarial basis at the year-end date using the projected unit method and discounted at a rate equivalent to the current rate of return on a high-quality corporate bond of equivalent term to the scheme liabilities. The resulting defined benefit asset or liability is presented separately after other net assets on the face of the Statement of Financial Position.

The Charity pays contributions to the NHS Pension Scheme in relation to employees who are members. This is a defined benefit public service scheme, and the costs are charged to

Notes to the financial statements for the year ended 31 March 2023

Accounting policies (continued)

the Statement of Comprehensive Income in the period to which they relate.

2.16 Designated reserves

The Charity has no designated reserves at 31 March 2023.

2.17 Investments

The only investments held by the Group are in its subsidiary and jointly controlled entity.

- Subsidiary undertaking – Investment in subsidiary is valued at cost less provision for impairment.
- Jointly controlled entity – Investments in jointly controlled entities are stated at the charity's share of net assets/liabilities. The charity's share of the profits or losses of the jointly controlled entity is included in the Statement of Comprehensive Income using the equity accounting basis.

3. Judgements in applying accounting policies and key sources of estimation uncertainty

The principal risks and uncertainties of the business are set out in the Strategic Report, together with the actions taken to mitigate these risks.

The directors have considered the residual risks and have received adequate assurance that they do not cast significant doubt on the business's ability to continue as a going concern.

In the application of the entity's accounting policies, which are described in note 2, the directors are required to make judgments, estimates and assumptions about the carrying value of assets and liabilities that are not readily apparent from other sources. The estimates and underlying assumptions are based on historical experience and other factors that are relevant. Actual results may differ from these estimates.

The estimates and underlying assumptions are reviewed on an on-going basis. Revisions to accounting estimates are recognised in the period in which the estimate is revised, if the revision affects only that period, or in the period of the revision and future periods, if the revision affects the current and future periods.

The key sources of estimation uncertainty that have a significant effect on the amounts recognised in the financial statements are summarised below:

- Reinstatement provision – Turning Point has provided for its potential reinstatement liability to cover expected building costs when leased properties are returned to the landlord. The potential liability has been calculated for properties where a reinstatement requirement exists in the contract, and based on a valuation of works or estimated cost per square metre.
- Pension provision – Turning Point has an obligation to pay deficit funding contributions into the defined benefit pension scheme. This provision is dependent on several factors including discount rate, life expectancy and asset valuations. The assumptions reflect historical experience and current trends.
- Defined benefit pension schemes – Turning Point has obligations to pay pension benefits to certain employees who are members of Local Government Pension Schemes. The cost of these benefits and the present value of the obligation depend on several factors including life expectancy, salary increases and the discount rate on corporate bonds. Management reviews the actuaries' estimates of these factors which determine the net pension obligations in the Statement of Financial Position. The assumptions reflect historical experience and current trends.

Notes to the financial statements for the year ended 31 March 2023

4

Turnover and operating surplus
2023 Group

	Turnover	Operating costs	Operating surplus
	£000	£000	£000
Income and expenditure from lettings			
Supported housing accommodation:			
Residential services	**66,417**	**(62,102)**	**4,315**
Non-residential services	**86,185**	**(75,546)**	**10,639**
	152,602	**(137,648)**	**14,954**
Other income and expenditure	**172**	**(13,779)**	**(13,607)**
	152,774	**(151,427)**	**1,347**

Turnover and operating surplus
2022 Group

	Turnover	Operating costs	Operating surplus
	£000	£000	£000
Income and expenditure from lettings			
Supported housing accommodation:			
Residential services	62,546	(59,298)	3,248
Non-residential services	80,913	(69,311)	11,602
	143,459	(128,609)	14,850
Other income and expenditure	201	(12,621)	(12,420)
	143,660	(141,230)	2,430

Notes to the financial statements for the year ended 31 March 2023

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Turnover and operating surplus
2023 Charity

	Turnover	Operating costs	Operating surplus
	£000	£000	£000
Income and expenditure from lettings Supported housing accommodation:			
Residential services	**65,782**	**(62,182)**	**3,600**
Non-residential services	**85,361**	**(75,366)**	**9,995**
	151,143	**(137,548)**	**13,595**
Other income and expenditure	**179**	**(13,778)**	**(13,599)**
	151,322	**(151,326)**	**(4)**

Turnover and operating surplus
2022 Charity

	Turnover	Operating costs	Operating surplus
	£000	£000	£000
Income and expenditure from lettings Supported housing accommodation:			
Residential services	61,957	(59,172)	2,785
Non-residential services	80,151	(69,324)	10,827
	142,108	(128,496)	13,612
Other income and expenditure	199	(12,621)	(12,422)
	142,307	(141,117)	1,190

The further analysis of income and expenditure from lettings in notes 6 and 7 reflects the disclosure required by the Accounting Direction for Registered Providers of Social Housing from April 2022.

Notes to the financial statements for the year ended 31 March 2023

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Income and expenditure from lettings

Group

	Residential services 2023	Non-residential services 2023	Total 2023	Residential services 2022	Non-residential services 2022	Total 2022
	£000	**£000**	**£000**	£000	£000	£000
Income from lettings						
Rent receivable	**790**	**8**	**798**	718	-	718
Service charge receivable	**1,282**	**74**	**1,356**	1,281	41	1,322
Net rents receivable	**2,072**	**82**	**2,154**	1,999	41	2,040
Revenue grants from local authorities and other agencies	**64,345**	**86,103**	**150,448**	60,547	80,872	141,419
Total income from lettings	**66,417**	**86,185**	**152,602**	62,546	80,913	143,459
Expenditure on letting activities						
Services	**48,198**	**58,259**	**106,457**	46,810	54,152	100,962
Management	**11,709**	**14,153**	**25,862**	10,336	11,958	22,294
Routine maintenance	**404**	**516**	**920**	369	508	877
Planned maintenance	**125**	**156**	**281**	109	109	218
Rent losses from bad debts	**54**	**18**	**72**	63	2	65
Property lease charges	**1,472**	**2,304**	**3,776**	1,469	2,378	3,847
Depreciation of housing properties	**140**	**140**	**280**	142	204	346
Total expenditure on lettings	**(62,102)**	**(75,546)**	**(137,648)**	(59,298)	(69,311)	(128,609)
Operating surplus on letting activities	**4,315**	**10,639**	**14,954**	3,248	11,602	14,850
Void losses			**3,816**			5,109

Notes to the financial statements for the year ended 31 March 2023

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Income and expenditure from lettings

Charity

	Residential services 2023	Non-residential services 2023	Total 2023	Residential services 2022	Non-residential services 2022	Total 2022
	£000	**£000**	**£000**	£000	£000	£000
Income from lettings						
Rent receivable	**790**	**8**	**798**	718	-	718
Service charge receivable	**1,336**	**69**	**1,405**	1,335	40	1,375
Net rents receivable	**2,126**	**77**	**2,203**	2,053	40	2,093
Revenue grants from local authorities and other agencies	**63,656**	**85,284**	**148,940**	59,904	80,111	140,015
Total income from lettings	**65,782**	**85,361**	**151,143**	61,957	80,151	142,108
Expenditure on letting activities						
Services	**48,262**	**58,114**	**106,376**	46,717	54,162	100,879
Management	**11,725**	**14,118**	**25,843**	10,316	11,960	22,276
Routine maintenance	**404**	**516**	**920**	369	508	877
Planned maintenance	**125**	**156**	**281**	109	109	218
Rent losses from bad debts	**54**	**18**	**72**	50	3	53
Property lease charges	**1,472**	**2,304**	**3,776**	1,469	2,378	3,847
Depreciation of housing properties	**140**	**140**	**280**	142	204	346
Total expenditure on lettings	**(62,182)**	**(75,366)**	**(137,548)**	(59,172)	(69,324)	(128,496)
Operating surplus on letting activities	**3,600**	**9,995**	**13,595**	2,785	10,827	13,612
Void losses			**3,816**			5,109

Notes to the financial statements for the year ended 31 March 2023

8

Operating surplus

The operating surplus is stated after charging:

	Group 2023	Group 2022	**Charity 2023**	Charity 2022
	£000	£000	**£000**	£000
Housing depreciation	**317**	364	**317**	364
Depreciation of other tangible owned fixed assets	**158**	157	**158**	157
Amortisation of capital grant on housing properties	**(7)**	(6)	**(7)**	(6)
Audit fees payable	**68**	58	**41**	29
Loss on disposal of investment in subsidiary	**1**	-	**1**	-
Hire of plant and machinery – rentals payable under operating leases	**903**	699	**903**	699

Notes to the financial statements for the year ended 31 March 2023

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Auditor's remuneration

	2023	2022
	£000	£000
Fees payable to the Group's auditor	**86**	81
Fees payable to the Group's auditor and its associates in respect of:		
Audit of charity	**34**	29
Audit of subsidiary	**34**	29
Tax compliance and advisory services	**4**	8
Accounts preparation fee	**14**	15
	86	81

10
Employees
Group and Charity

Staff costs were as follows:

	2023	2022
	£000	£000
Salaries	**104,489**	97,176
National insurance	**8,771**	7,742
Pension contributions	**3,885**	3,771
	117,145	108,689

Notes to the financial statements for the year ended 31 March 2023

10

Employees (continued)

Group and Charity

The average monthly number of employees, including the chief executive, during the year was as follows:

	2023	2022
	No.	No.
Management and administration	**772**	736
Operational	**2,949**	2,966
	3,721	3,702

The key management personnel of the charity and the group comprises the executive directors, operating board members, and non executive board members. The headcount of key management personnel during the year was 7 executive directors and operating board members, and 8 non executive directors (2022: 7 ED and 8 NED).

The total employee benefits of the key management personnel of the charity and group were £1,124k paid to executive directors and operating board members and £35k paid to non executive directors (2022: £924k, £29k).

During the year, 11 employees were paid a total of £73k as compensation for the termination of their employment before the normal retirement date. A total of £70k was paid to 10 employees who accepted the offer of voluntary redundancy. The payments are fully recognised in the Statement of Comprehensive Income for 2022/23, being the period in which the plans were finalised.

The average number of full-time equivalent persons (including the chief executive) employed during the year:

	2023	2022
	No.	No.
Management and administration	**612**	555
Operational	**2,518**	2,514
	3,130	3,069

Notes to the financial statements for the year ended 31 March 2023

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Employees (continued)

Group and Charity

The full-time equivalent number of staff whose remuneration payable in relation to the period of account fell within the following bands:

	2023	2022
	No.	No.
Group and Charity		
£60,001 — £70,000	**17**	13
£70,001 — £80,000	**7**	12
£80,001 — £90,000	**10**	12
£90,001 — £100,000	**6**	-
£100,001 — £110,000	**2**	2
£110,001 — £120,000	**3**	3
£120,001 — £130,000	**1**	1
£130,001 — £140,000	**4**	5
£140,001 — £150,000	**2**	-
£150,001 — £160,000	**2**	1
£160,001 — £170,000	**2**	1
£170,001 — £180,000	**1**	-
£180,001 — £190,000	-	1
£190,001 — £200,000	**1**	-
£200,001 — £210,000	**-**	-
£210,001 — £220,000	**-**	-
£220,001 — £230,000	**1**	1
	59	52

Notes to the financial statements for the year ended 31 March 2023

11

Directors' and trustees' emoluments

Group and Charity

	2023	2022
	£000	£000
Directors' emoluments (including pension contributions and benefits in kind)	**456**	446
Directors' pension contributions (included above)	**21**	20

The headcount of directors during the year was 2 (2022: 2).

Two directors were paid pension contributions during the year (2022: 2).

	2023	2022
	£000	£000
Non-executive trustees' emoluments (including expenses) £Nil (2022: £Nil) of travel expenditure was reimbursed to 0 (2022: 0) trustees.	**36**	28

Notes to the financial statements for the year ended 31 March 2023

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Directors' and trustees' emoluments (continued)

Group and Charity

The emoluments of directors disclosed above (excluding pension contributions and benefits in kind) include amounts paid to:

	2023	2022
	£000	£000
The highest paid director	**232**	227
Pension contributions of the highest paid director	**14**	14

The company paid emoluments of £4k to two directors of Turning Point (Services) Limited during the year (2022: £4k to two directors).

Details of the nature of the chief executive's pension arrangements:

The CEO is an 'ex defined benefit' member of the Group Personal Pension Plan with Legal & General, as she was an active member of the Turning Point Pension Scheme at 31 March 2012.

No enhanced or special terms apply.

The Group contributed 6% to the GPPP on behalf of the CEO, and did not contribute to any individual pension arrangements.

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Interest receivable

	Group 2023	Group 2022	Charity 2023	Charity 2022
	£000	£000	**£000**	£000
Interest receivable	**162**	34	**162**	34
	162	34	**162**	34

Notes to the financial statements for the year ended 31 March 2023

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Taxation

Turning Point is a registered charity. Under Part 11 Corporation Tax Act 2010 and s.256 of the Taxation of Chargeable Gains Act 1992, it is entitled to exemption from Corporation Tax on donations, certain investment income and gains, property income, and on profits from any trading activities exercised in the course of carrying out a primary purpose of the charity, so long as they are applied to Turning Point's charitable purposes.

Turning Point (Services) Limited intends to donate a sum equivalent to any taxable profits to Turning Point, to reduce the company's tax liability to nil.

Northern Pathways Limited did not trade during the year and was dissolved on 12 April 2022. The company did not make a profit for tax purposes and does not have a Corporation Tax liability.

There were no factors that may affect future tax charges.

14

Housing properties

Group and Charity

	Housing properties
	£000
Cost	
At 1 April 2022	**8,484**
Additions	**339**
At 31 March 2023	**8,823**
Depreciation	
At 1 April 2022	**4,256**
Charge for the year	**317**
At 31 March 2023	**4,573**
Net book value	
At 31 March 2023	**4,250**
At 31 March 2022	**4,228**

The aggregate amount of finance costs included in the cost of housing properties is £nil (2022: £nil).
The aggregate market value of the properties is, in the opinion of the directors, in excess of net book value.

Notes to the financial statements for the year ended 31 March 2023

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Housing properties (continued)

Group and Charity

	2023	2022
	£000	£000
Housing properties cost comprise:		
Freeholds	**2,758**	2,758
Short leaseholds (less than 50 years)	**5,217**	4,861
Long leaseholds (more than 50 years)	**848**	848
	8,823	8,467

	2023	2022
	£000	£000
Expenditure on works to existing properties		
Capitalised in the year	**339**	447
Charged to income and expenditure	**291**	356
	630	803

Notes to the financial statements for the year ended 31 March 2023

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Tangible fixed assets

Group and Charity

	Motor vehicles	Fixtures and fittings	Office equipment	Software	Total
	£000	£000	£000	£000	£000
Cost or valuation					
At 1 April 2022	22	753	817	1,016	2,608
Additions	8	88	5	14	115
At 31 March 2023	30	841	822	1,030	2,723
Depreciation					
At 1 April 2022	18	719	712	867	2,316
Charge for the year on owned assets	4	33	69	52	158
At 31 March 2023	22	752	781	919	2,474
Net book value					
At 31 March 2023	8	89	41	111	249
At 31 March 2022	4	34	105	149	292

In accordance with the Housing SORP 2018, the overall cost of any property, fixtures and fittings, and office equipment has been split between significant components to enable each component to be depreciated according to its economic useful life.

Notes to the financial statements for the year ended 31 March 2023

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Fixed asset investments

Group

	Investments in joint venture
	£000
Cost or valuation	
At 1 April 2022	1
Disposals	(1)
At 31 March 2023	-
Net book value	
At 31 March 2023	-
At 31 March 2022	1

Turning Point, Charity and Group, owned 50% of the 1,000 £1 ordinary shares in Northern Pathways Limited amounting to £500 (2022: £500) until the company was dissolved on 12 April 2022. At 31 March 2022, Northern Pathways Limited had total net liabilities of £154k and made no profit or loss in the year 2021/22.

Charity

	Investments in subsidiary company
	£000
Cost or valuation	
At 1 April 2022	1
Disposals	(1)
At 31 March 2023	-
Net book value	
At 31 March 2023	-
At 31 March 2022	1

Turning Point the Charity owns 100% of the 100 £1 ordinary shares in Turning Point (Services) Limited amounting to £100 (2022: £100). Turning Point (Services) Limited is a company incorporated in Great Britain that provides support services to the Charity. It has total assets less current liabilities at 31 March 2023 of £2,762k (2022: £2,574k). Its trading profit for the year after Gift Aid was £188k (2022: Loss of £1k).

Notes to the financial statements for the year ended 31 March 2023

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Debtors

	Group 2023	Group 2022	Charity 2023	Charity 2022
	£000	£000	**£000**	£000
Rental debtors	**126**	90	**126**	90
Less: provision for bad debts	**-**	-	**-**	-
Net rental debtors	**126**	90	**126**	90
Due from statutory sources	**15,606**	17,373	**3,809**	5,143
Less: provision for bad debts	**(320)**	(271)	**(156)**	(131)
Net statutory debtors	**15,286**	17,102	**3,653**	5,012
Prepayments and accrued income	**5,785**	6,860	**3,388**	2,368
Other debtors	**286**	231	**286**	231
Amounts owed by group companies and joint ventures	**-**	-	**239**	6,774
	21,483	24,283	**7,692**	14,475

Notes to the financial statements for the year ended 31 March 2023

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Cash and cash equivalents

	Group 2023	Group 2022	Charity 2023	Charity 2022
	£000	£000	**£000**	£000
Cash at bank and in hand	**10,817**	4,772	**10,789**	4,694
	10,817	4,772	**10,789**	4,694

In October 2019, the Charity entered into a debenture with Turning Point (Services) Limited and Barclays Bank, which includes a cross guarantee and indemnity. If either Turning Point or Turning Point (Services) Limited defaults under any agreement entered into with Barclays Bank, then Barclays Bank may seek to recover any debts due to it from the other party.

Turning Point and Turning Point (Services) Limited have entered into this agreement to best facilitate when Turning Point (Services) Limited bids for contracts and they are delivered by Turning Point.

Turning Point holds a small number of bank accounts on behalf of clients who lack the required documents to open an account in their own name. Turning Point does not have control over the bank accounts. As a result, no amounts are recognised in the financial statements. The total held in such bank accounts as at 31 March 2023 was £104k (2022: £93k).

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Creditors: Amounts falling due within one year

	Group 2023	Group 2022	Charity 2023	Charity 2022
	£000	£000	**£000**	£000
Trade creditors	**1,549**	1,592	**1,549**	1,592
Other taxation and social security costs	**6,845**	6,060	**(322)**	200
Other creditors	**1,416**	1,087	**970**	1,087
Accruals and deferred income	**12,125**	10,948	**8,611**	9,496
	21,935	19,687	**10,808**	12,375

Barclays have a legal charge over 6 Penywern Road as security for Turning Point's overdraft facility. The NBV of 6 Penywern Road as at 31 March 2023 is £2,182k.

Notes to the financial statements for the year ended 31 March 2023

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Deferred income

	At 1 April 2022	Deferred	Released	At 31 March 2023
	£000	£000	£000	£000
Group	4,340	6,702	(4,340)	6,702
Charity	2,888	3,186	(2,888)	3,186

Contract income and revenue grants are recognised as income in the period in which the performance criteria are met. Where funds are received for specific purposes and are potentially refundable if the conditions of the contract or grant are not satisfied, they will be deferred, with agreement of the funder, until the performance criteria are met.

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Creditors: Amounts falling due after more than one year

	Group 2023	Group 2022	Charity 2023	Charity 2022
	£000	£000	£000	£000
Social housing and other grants	57	64	57	64
	57	64	57	64

Notes to the financial statements for the year ended 31 March 2023

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Financial instruments

	Group 2023	Group 2022
	£000	£000
Financial assets		
Financial assets that are debt instruments measured at amortised cost	**28,533**	24,213
	28,533	24,213
Financial liabilities		
Financial liabilities measured at fair value through profit or loss	**11,191**	16,438
Financial liabilities measured at amortised cost	**7,085**	9,287
	18,276	25,725

Financial assets that are debt instruments measured at amortised cost comprise cash at bank, trade debtors, other debtors and accrued income.

Financial liabilities measured at fair value through profit and loss comprise the pension provision, reinstatement provision and other provision.

Financial liabilities measured at amortised cost comprise bank loans, trade creditors, other creditors and accruals.

Notes to the financial statements for the year ended 31 March 2023

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Provisions

Group and Charity

	Pension provision	Reinstatement provision	Other provision	Total
	£000	£000	£000	£000
At 1 April 2022	**14,443**	**1,950**	**45**	**16,438**
Releases	**(5,032)**	**(215)**	**-**	**(5,247)**
At 31 March 2023	**9,411**	**1,735**	**45**	**11,191**

The pension provision represents the discounted value of the agreed future contributions to be paid to the Turning Point defined benefit pension scheme by Turning Point. Turning Point agreed to pay contributions of £1,140k for the year ending 31 March 2022 and £1,229k for the year ending 31 March 2023, with contributions then increasing each year in line with CPI.

The reinstatement provision of £1,735k (2022: £1,950k) represents the amount set aside, based on individual property contracts, to cover expected building costs when Turning Point returns its leased properties to the landlord.

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Restricted reserves

	2023	2022
	£000	£000
Balance as at 1 April 2022	**428**	10
Restricted income/(expenditure)	**(428)**	418
Balance as at 31 March 2023	**-**	428

Restricted reserves relate to income received to support the ADDER project. The £428k balance as at 1 April 2022 was fully spent in the year and related to support for adult social care providers to reduce the transmission of COVID-19 within and between care settings.

Notes to the financial statements for the year ended 31 March 2023

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Legislative provisions

The Charity and its subsidiaries are incorporated under the Companies Act 2006.

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Statement of capital grant movements

	2023	2022
	£000	£000
Balance as at 1 April 2022	**64**	70
Amortised in year	**(7)**	(6)
Balance as at 31 March 2023	**57**	64

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Bedspaces

	Care Homes	Supported Living	Total
	No.	**No.**	**No.**
At 1 April 2022	**396**	**554**	**950**
Additions	**-**	**54**	**54**
Disposals	**(10)**	**(34)**	**(44)**
At 31 March 2023	**386**	**574**	**960**

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Capital commitments

At 31 March 2023 the group has capital commitments of £nil (2022: £nil).

Notes to the financial statements for the year ended 31 March 2023

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Pension commitments

Turning Point Pension Scheme

The total net pension cost for the group for the year was £2,949k for the defined contribution pension scheme (2022: £2,622k) and £1,229k for the defined benefit pension scheme (2022: £1,140k). Turning Point participated in the Turning Point Pension Scheme ("The Scheme") which is a defined benefit pension scheme. This is a multi-employer scheme covering Turning Point and Turning Point Scotland employees (and former employees). Turning Point Scotland left the Group and became a separate entity in 1999.

The Turning Point Pension Scheme is a defined benefit plan but is being accounted for as a defined contribution plan because the Scheme is a multi-employer non-segregated arrangement. This means that the assets and liabilities of the Scheme are not separately identified for the two participating employers.

The latest completed triennial actuarial valuation took place on 31 March 2022. The results showed assets of £113.3m, liabilities of £137.1m, and a deficit of £23.8m on a technical provisions basis. In order to remove the deficit by 31 January 2031, Turning Point agreed to pay contributions of £1,353k for the year ending 31 March 2024, with contributions then increasing each year in line with CPI.

Turning Point Scotland agreed to pay contributions of £407k for the year ending 31 March 2024, with contributions then increasing each year in line with CPI.

Contribution levels are subject to review at subsequent actuarial valuations.

The Scheme assets comprise 6% equities, 22% government and corporate bonds, 19% diversified growth funds, 51% Liability Driven Investment (LDI) and 2% property as at 31 March 2023.

We understand that the Scheme is set up on a "last man standing basis" whereby if one employer becomes insolvent, the other employer will be responsible for all the scheme's liabilities.

The pension liability shown on the balance sheet is measured as the discounted present value of the contributions payable by Turning Point to eliminate its share of the Scheme's deficit. The deficit contributions are agreed with the Scheme's Trustees as part of the three-yearly actuarial valuation of the Scheme. The rate used to discount the future contributions is made by reference to market yields at the reporting date on high quality corporate bonds whose term is consistent with the estimated period of the future contributions. The unwinding of the discount rate is recognised as a finance cost in profit or loss in the period in which it arises.

Local Government Pension Schemes

Turning Point employs members of 5 Local Government Pension Schemes (LGPS) due to the takeover of services. These LGPSs are funded defined benefit schemes, with assets held in separate trustee-administered funds.

In March 2022, Turning Point left the Leicester and Leicestershire LGPSs and provided for the estimated exit payment of £908k. In July 2022, the actuary of the LGPS confirmed that no exit payment was owed to the fund. The provision was, therefore, released to the Statement of comprehensive income in 2022/23.

At March 2023, the West Yorkshire LGPS was in surplus and Turning Point's share was valued at £529k. This surplus is not recognised as an asset in the Statement of financial position because it is not probable that Turning Point would receive a credit on exiting the fund.

The total defined benefit pension cost recognised in the Statement of Comprehensive Income is £8k and the projected cost for the year to 31 March 2024 is £6k.

Turning Point has bonds totalling £33k provided to commissioners in respect of some of the LGPSs. The reconciliation of the net pension scheme liability below relates to the Local Government Pension Schemes.

NHS Pension Scheme

Turning Point has employees who are covered by the provisions of the NHS Pension Scheme(s). Details of the benefits payable and rules of the scheme can be found on the NHS Pensions website at www.nhsbsa.nhs.uk/pensions. The scheme is an unfunded defined benefit scheme that covers NHS employers, GP practices and other bodies, allowed under the direction of the Secretary of State for England and Wales. They are not designed to be run in a way that would enable NHS bodies to identify their share of the underlying scheme assets and liabilities.

Notes to the financial statements for the year ended 31 March 2023

29

Pension commitments (continued)

Therefore, each scheme is accounted for as if it were a defined contribution scheme. The cost to Turning Point of participating in each scheme is taken as equal to the contributions payable to that scheme for the accounting period. The contributions payable to the scheme by Turning Point for the year to 31 March 2023 were £646k.

In order that the defined benefit obligations recognised in the financial statements do not differ materially from those that would be determined at the reporting date by a formal actuarial valuation, the Government Financial Reporting Manual (FReM) requires that "the period between formal valuations shall be four years, with approximate assessments in intervening years". An outline of these follows:

a) A valuation of scheme liability is carried out annually by the scheme actuary (currently the Government Actuary's Department) as at the end of the reporting period. This utilises an actuarial assessment for the previous accounting period in conjunction with updated membership and financial data for the current reporting period, and accepted as providing suitably robust figures for financial reporting purposes.

The valuation of scheme liability as at 31 March 2023, is based on valuation data as 31 March 2022, updated to 31 March 2023 with summary global member and accounting data. In undertaking this actuarial assessment, the methodology prescribed in IAS 19, relevant FReM interpretations and the discount rate prescribed by HM Treasury have also been used.

The latest assessment of the liabilities of the scheme is contained in the scheme actuary report, which forms part of the annual NHS Scheme (England and Wales) Pension Accounts. These accounts can be viewed on the NHS Pensions website and are published annually.

b) The last published actuarial valuation undertaken for the NHS Pension Scheme was completed for the year 31 March 2022. The Scheme Regulations allow for the level of contribution rates to be changed by the Secretary of State for Health, with the consent of HM Treasury, and consideration of the advice of the Scheme Actuary and appropriate employee and employer representatives as deemed appropriate.

Reconciliation of present value of LGPS plan liabilities and assets

	2023	2022
	£000	£000
Reconciliation of present value of plan liabilities:		
At the beginning of the year	**9,989**	9,330
Release of scheme assets on exit from scheme	**(8,438)**	-
Current service cost	**10**	292
Interest cost	**42**	202
Actuarial (gains)/losses	**(458)**	172
Contributions	**(12)**	(7)
Past service cost	**-**	-
At the end of the year	**1,133**	9,989

Notes to the financial statements for the year ended 31 March 2023

29

Pension commitments (continued)

	2023	2022
	£000	£000
Reconciliation of present value of plan assets:		
At the beginning of the year	**9,989**	7,313
Release of scheme assets on exit from scheme	**(8,368)**	-
Interest income	**44**	157
Actuarial gains	**9**	2,396
Contributions	**(12)**	(7)
Employer contributions	**-**	130
At the end of the year	**1,662**	9,989

	2023	2022
	£000	£000
Fair value of plan assets	**1,662**	9,989
Present value of plan liabilities	**(1,113)**	(9,989)
Non-recognition of pension scheme asset	**(529)**	-
Net pension scheme liability	**-**	-

The amounts recognised in the statement of comprehensive income are as follows:

	2023	2022
	£000	£000
Current service cost	**10**	292
Interest cost	**(2)**	45
Total	**8**	337

Notes to the financial statements for the year ended 31 March 2023

29

Pension commitments (continued)

Principal actuarial assumptions at the Statement of financial position date (expressed as weighted averages):

	2023	2022
	%	%
Discount rate	4.70	2.70 – 2.75
Future salary increases	3.95	3.65 – 4.25
Future pension increases (CPI)	2.70	3.00 – 3.15
Mortality rates		
- for a male aged 65 now	21.6	21.5 – 21.8
- at 65 for a male aged 45 now	22.9	22.4 – 22.5
- for a female aged 65 now	24.6	24.0 – 24.6
- at 65 for a female aged 45 now	25.7	25.7

Major categories of plan assets as a percentage of total plan assets

	2023	2022
	%	%
Equities	82	60
Property	3	8
Bonds	10	29
Cash	3	3
Other	2	-

Notes to the financial statements for the year ended 31 March 2023

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Leasing commitments

Group and Charity

Future minimum lease payments under non-cancellable operating leases are as follows:

	2023	2022
	£000	£000
Land and buildings		
Within one year	**1,182**	1,404
Within two to five years	**2,188**	992
After five years	**586**	148
	3,956	2,544
Other		
Within one year	**879**	765
Within two to five years	**1,087**	878
After five years	**-**	-
	1,966	1,643

Notes to the financial statements for the year ended 31 March 2023

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Related party transactions
Group and Charity

Turning Point and Turning Point (Services) Limited are both entities incorporated in the United Kingdom. Turning Point is the only entity registered with the Regulator of Social Housing and is the parent company of Turning Point (Services) Limited, a wholly owned subsidiary. Turning Point is required to prepare consolidated financial statements that consolidate the accounts of the Charity and Turning Point (Services) Limited. Northern Pathways Limited was a jointly controlled entity, controlled equally by Turning Point and The Retreat York until it was dissolved on 12 April 2022. It was accounted for in the Charity and consolidated accounts under the equity method of accounting.

During the year, Turning Point (Services) Limited made an operating profit of £1,420k (2022: £1,241k). £1,413k (2022: £1,232k) will be gift aided to Turning Point. On 31 March 2023, Turning Point (Services) Limited owed £239k to Turning Point (2022: £6,774k).

Turning Point incurs all the costs associated with providing health and social care services to commissioners, including the employment of staff and contracting with suppliers. Turning Point charges Turning Point (Services) Limited a percentage of the total income due to Turning Point (Services) Limited each month, which reflects the risk that costs might exceed income in the future. The total recharged in the year was £114,828k (2022: £105,670k).

Northern Pathways Limited was a jointly controlled entity between Turning Point and The Retreat York until it was dissolved on 12 April 2022. During the year, Northern Pathways Limited made an operating loss of £nil (2022: £8k). No management fees were charged in the years ended 2022 or 2023.

NHS contracts are not deemed to be a related party transaction for 2022/23.

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Subsidiary undertakings

The following were subsidiary undertakings of the Charity:

Name	Class of shares	Holding	Principal activity
Turning Point (Services) Limited	Ordinary	100%	The provision of health and social care services primarily to people with drug or alcohol issues, mental health issues or a learning disability. **Registered office** America House, 2 America Square, London EC3N 2LU

The aggregate of the share capital and reserves as at 31 March 2023 and of the profit or loss for the year ended on that date for the subsidiary undertakings were as follows:

	Aggregate of share capital and reserves	Profit/(loss)
	£000	**£000**
Turning Point (Services) Limited	**2,762**	**1,420**
	2,762	**1,420**

Charity information

Turning Point is a private company limited by guarantee without share capital, incorporated in England on 27 February 1964.

Non-Executive Directors

- Peter Hay (Chair)
- Paul Picknett (Resigned 21 March 2023)
- Nicola Gilham
- Christian Van Stolk
- Dr. Victoria Tzortziou Brown
- Dawn Kenson (Appointed 17 January 2023)

Executive Directors

- Julie Bass
- Amarjit Dhillon

All of the above are key management personnel of Turning Point Group and the Charity

Registered Office
America House
2 America Square
London
EC3N 2LU

Registered Company Number
00793558

Registered Charity Number
234887

Registered Provider Number
H2509

Auditors
Crowe U.K. LLP
3rd Floor
The Lexicon
Mount Street
Manchester
M2 5NT

Bankers
Barclays Bank PLC
Level 11
20 Chapel Street
Liverpool
L3 9AG

Solicitors
Eversheds Sutherland (International) LLP
Eversheds House
6 Stanley Street
Salford
M3 5GX

We are inspired by possibility. The possibility that every single one of us can change and grow, make choices, and live healthier and happier lives. With our expertise in working in the areas of substance use, mental health, sexual health, healthy lifestyles and learning disability, including with people with complex needs, we aim to continue to adapt to an ever-changing external environment in order to extend our reach and support more people to improve their health and wellbeing.

Head Office:
America House
2 America Square
London
EC3N 2LU

Web: www.turning-point.co.uk
Call: 020 7481 7600
Email: info@turning-point.co.uk

INVESTORS IN PEOPLE | Silver
Until 2019

Turning Point is a registered charity, no.234887, a registered social landlord and a company limited by guarantee no. 793558 (England & Wales).
Registered Office: America House, 2 America Square, London EC3N 2LU.

TURNING POINT
inspired by possibility

TURNING POINT

England & Wales - Charity number 234887

Accounts

TURNING POINT

inspired by possibility

Annual Report

2021/22

Who we are

Turning Point is a leading social enterprise, providing health and social care services in over 300 locations across England. We aim to inspire and empower those we support to discover new possibility in their lives and improve their health and wellbeing.

In doing so we build upon nearly sixty years of experience in the fields of substance misuse, mental health, learning disability, autism, acquired brain injury, sexual health, healthy lifestyles and employment services.

What we do

Improving health and wellbeing is at the heart of what we do at Turning Point, whether in someone's home, within the workplace or through specialist services.

To do this we must think broadly about the many factors that affect people's life chances and choices. This applies as much to our colleagues as it does to the people we support and their wider communities.

Our core business continues to be commissioned by the public sector but increasingly we're expanding direct routes to access our support. Our healthy lifestyles, mental health, sexual health, learning disability, substance misuse and employment services are largely commissioned by local authority adult social care and public health teams and the NHS through clinical commissioning groups. We also work closely with the Office for Health Improvement and Disparities, the Ministry of Justice and the Department for Work and Pensions.

As a social enterprise we invest any surplus back into the business, ensuring that the value and impact we create is sustained long-term for the benefit of the people we support.

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Chairman's introduction
Our Board of Directors
Structure, governance and management
Corporate Governance Report
Environmental and energy reporting
Achievements and performance
Financial performance
Reserves
Responsibilities for Financial statements
Independent Auditors report
Company information

Our year in numbers

Turnover in 2021/22 — **£143m**

164,787 — People supported in 2021/22

People supported by our mental health services — **89,204***

67,731 — People supported by our drug and alcohol services

People supported by our healthy lifestyle's services — **4,629**

4,390 — Number of team members

People supported by our employment services — **1,173**

1,153 — People supported by our learning disability services

People supported by our sexual health services — **897**

138 — Number of peer mentors

Regulated services rated Good or Outstanding by CQC — **96%**

68 — Number of volunteers

Percentage of team members with lived experience of the issues facing the people we support for themselves or as a carer — **59%**

*includes support provided by livelife and Rightsteps

Our vision and values

Before, during and beyond the pandemic, our vision and values continue to drive everything we do – as an employer, support provider, clinical specialists and a trusted source of advice.

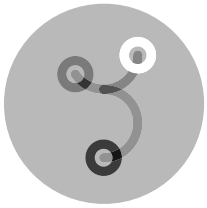
Our vision

To constantly find ways to support more people to discover new possibilities in their lives.

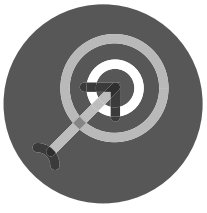
The quality of our services means everything to us. The people we work with inspire us and in turn we look for new ways to inspire change. We owe it to the people we work with to grow and shape the future, because we believe in what we do.

Our values

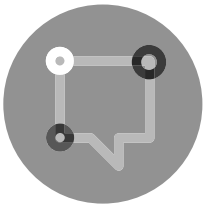
We treat each other and those we support as **individuals** however difficult and challenging.



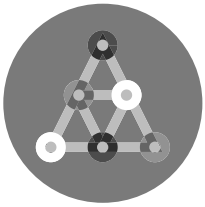
We are here to **embrace change** even when it is complex and uncomfortable.



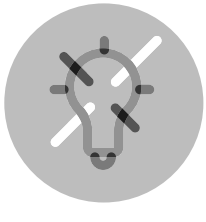
We believe that everyone has the **potential** to grow, learn and make choices.



We all communicate in an **authentic** and confident way that blends **support and challenge.**



We commit to building a **strong and financially viable** Turning Point together.



We deliver better outcomes by encouraging **ideas** and **new thinking.**

Chair and Chief Executive statements

This year has been a challenging one for those in the health and social care sector with the ongoing impact of COVID-19 throughout the year and the increasingly volatile economic environment.

However, I continue to be impressed by the strength and resilience of Turning Point colleagues. The organisation has continued to grow and is supporting more people than ever before; a 24% increase from the year before – an amazing 164,787 people in total.

The dedicated leadership of Julie Bass and of the wider team has provided the strong underpinning to enable colleagues across the country to concentrate on delivering high quality support; innovating and designing the new services that are vital to enable us to respond to the changing needs of populations.

As I visit services, both in person and online, I am so proud that I am the Chair of Turning Point. To hear first-hand how people have been supported is a true privilege that energises me and highlights the incredible personalised support people have from Turning Point.

The Board has welcomed a new member, Victoria Tzortziou-Brown, who is sharing her decades of expertise and experience of working in primary care. The Board has engaged fully with the creation and design of the new strategic goals and plans, and I am confident that Turning Point colleagues will continue to go from strength to strength in the times ahead.

The services of the future will need to be highly integrated, collaborative, and agile and Turning Point has the ingredients built on years of broad, solid experience; the future is very positive indeed.

Peter Hay
Chair

The organisation has continued to grow and is supporting more people than ever before; a 24% increase from the year before.

The last twelve months have once again been dominated by the global pandemic and yet it has felt very different.

The year before saw the whole sector facing periods of crisis as lives were lost and huge strains were placed on health and social care which was already at a breaking point with decreasing resources available to them.

This relentless first year of the pandemic had left its mark and as 2021 unfolded, people were struggling with their resilience, energy levels and motivation. The stress and strain of rising to endless challenges in an uncertain and ever-changing world was taking its toll on everyday lives. Now more than ever we needed to ensure that we were well placed to enable our colleagues and the people we support to take good care of their health and wellbeing.

Despite the continuing impact of COVID-19, we rose to this challenge by continuing to learn, grow and adapt as an organisation. We introduced new ways to engage with colleagues, the people we support and their families so that we were better informed, and we continued to develop new approaches as we sought to increase our impact.

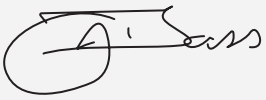
We took on new contracts in Herefordshire and Nottinghamshire, expanded existing services in multiple areas and retained long held relationships in other places. We continue to aspire to grow and reach more people because we firmly believe we offer some of the best quality services available as evidenced by our CQC ratings.

2022 is an important year for Turning Point as we enter a new strategic period. We look ahead to the next 5 years with confidence, with higher levels of skill and capability than at any other time in our almost sixty-year history and with great ambition to positively impact the lives of more people than ever before. We are very well placed to continue to play our part in addressing issues of health equity and inequalities and in transforming our workplace to be more reflective of the communities we serve.

We look forward to embracing the opportunities afforded by the new integrated commissioning landscape. We continue to offer a range of increasingly co-produced, high quality and effective integrated services, that are designed to address increased demand in volume, and the increased complexity of future mental health support.

The breadth of our service delivery and the wide knowledge and experience that this gives us, alongside truly local delivery supported by a national infrastructure, gives us a unique ability to inform and support the drive towards greater integration. We plan to use this experience wisely and to draw on the important voices of experience that must be heard as we strive to improve access, reach and outcomes.

Julie Bass
Chief Executive



1 The ever-changing health and social care landscape

Despite it being some time since the country went into its first lockdown, the COVID-19 pandemic is still having a significant impact on commissioning decisions, service delivery and government policy.

At the end of 2021, the COVID-19 pandemic had hospitalised over 520,000 adults in the UK and at least 160,000 people had died.[1] The NHS remains under intense pressure, health inequalities have been compounded and the financial impact of the pandemic is being felt with a significant rise in the cost of living. If 2020 was a year of staying at home, 2021 saw cautious steps towards reopening the economy and public life, while responding to new variants of COVID-19.

It is still too soon to understand the full impact of COVID-19 on our health and wellbeing. Inequalities have been exposed, with the World Bank calling it 'the inequality pandemic',[2] and many Turning Point services have seen an increase in referrals – some new, some deferred from the year before.

Whilst investment in mental health, substance misuse services and the wider health and care system has been made by the government since the beginning of the pandemic, it still falls far short of the amount needed to compensate for years of under investment.

Low-income households are bearing the brunt of this crisis. The Resolution Foundation estimates that an extra 1.3 million people in the UK will fall into absolute poverty in 2023, including 500,000 children.[5]

1 https://www.theguardian.com/world/2021/dec/01/covid-world-map-which-countries-have-the-most-coronavirus-vaccinations-cases-and-deaths

2 https://www.worldbank.org/en/news/feature/2021/12/20/year-2021-in-review-the-inequality-pandemic

The economy has shrunk by 9.8% – the worst contraction in 300 years – and over six million people are on Universal Credit, which is double the figure a year ago.[3] Government borrowing is at its highest since war-time levels. As of March 2022, inflation hit 5.5%, contributing to the worst cost-of-living crisis England has seen in 30 years.[4] Low-income households are bearing the brunt of this crisis. The Resolution Foundation estimates that an extra 1.3 million people in the UK will fall into absolute poverty in 2023, including 500,000 children.[5]

The pandemic has also exacerbated the pre-existing workforce challenges in the health and social care sector. Significant workforce shortages and high rates of turnover pose a real risk to the recovery of services and the quality of care, as well as to the health and wellbeing of colleagues. Data suggests that the vacancy rate in adult social care has increased steadily since April 2021 to 9.5% in January 2022.[6] Additionally, the strain on carers has intensified. Carers UK estimated in June 2020 that an additional 4.5 million people had become unpaid carers since the pandemic began.

As the government seeks to address some of the societal impacts of the pandemic, a broad range of policy announcements have been made. There is a new drug strategy, multiple mental health frameworks, social care and SEND (Special Educational Needs and Disabilities) reviews underway and the ongoing journey of the **Health and Care Bill** through Parliament. This legislation is expected to put integrated care systems (ICSs) on a statutory footing from July 2022 and to increase collaboration between different parts of the system so that there is 'no wrong door' for those seeking support.

3 https://www.centreformentalhealth.org.uk/publications/covid-19-and-nations-mental-health-may-2021

4 https://www.ons.gov.uk/economy/inflationandpriceindices/bulletins/consumerpriceinflation/january2022

5 https://www.resolutionfoundation.org/publications/inflation-nation/

6 https://www.skillsforcare.org.uk/adult-social-care-workforce-data/Workforce-intelligence/publications/Topics/COVID-19/Vacancy-information-monthly-tracking.aspx

The NHS Long Term Plan remains relevant, informing subsequent white papers and frameworks for substance misuse, mental health, learning disability and autism services.[7]

In December 2021 the government published **a white paper 'People at the Heart of Care'**[8] which outlined a 10-year vision of adult social care. It focuses on people having choice, control and support to live independently, in a fair and accessible system. It commits:

- at least £300m to integrate housing into local health and care strategies
- at least £150m to drive the adoption of different technologies and digital tools
- at least £500m to the training, wellbeing and qualifications of the workforce
- up to £25m to provide support for unpaid carers
- further funding to increase and improve the support offer and delivery of care.

Despite a headline figure of over £5bn for social care accompanying the white paper, experts claim this falls far short of what is needed.

Despite a headline figure of over £5bn for social care accompanying the white paper, experts claim this falls far short of what is needed.

7 https://www.longtermplan.nhs.uk/

8 https://www.gov.uk/government/publications/people-at-the-heart-of-care-adult-social-care-reform-white-paper

A clear priority is housing and planning changes needed to increase the supply of appropriate housing for people to live in independently, increasing supported housing and making adaptations to current property to help people to stay safely in their own homes longer. Given broader challenges around housing, planning and infrastructure facing councils, the provision of new housing is not a quick solution.

The care white paper was accompanied by **the Fair Cost of Care Fund**, which sets out to support local government to prepare markets for reform and towards 'a fair cost of care' – seeking to make the market more sustainable.[9] Turning Point will be working with commissioners to ensure the relevant data pertaining to our services is available to fully contribute to this review.

The comprehensive two-part independent review headed by **Dame Carol Black** has played a significant role in shaping drug policy over the last year. Part 2 of her review was released in July 2021, focusing on drug treatment, recovery and prevention.[10] The Joint Combating Drugs Unit was also formed that month followed by the Office for Health Improvement and Disparities in October 2021.[11] The formation of these cross-departmental organisations is informed by the recognition that treatment alone is not enough and wider support, including housing and employment, is essential to aid recovery.

Dame Carol Black's recommendations to government have served as the foundation of the **new 10-year drug strategy** which was released in December 2021,[12] against a backdrop of increasing substance misuse deaths and financial cuts. In August 2021, the ONS recorded the highest rate of drug-related deaths since records began in 1993. There has also been a 60% increase in drug-related deaths over the past decade.[13] The strategy was underpinned with £900m of new investment, £533m of which is to be targeted at rebuilding local authority commissioned substance misuse treatment services in England over the next three years.

The government also published **the Reforming the Mental Health Act white paper** in August 2021, which sets out proposed changes to modernise the Mental Health Act 1983 (MHA) and wider reforms of policy and practice around it to improve the experiences of black and people of colour, those with serious mental illness in contact with the criminal justice system and a focus on reducing re-offending.[14] It is anticipated that the new Mental Health Act will be introduced as law in 2023 but this is not confirmed.[15]

New **mental health access standards**[16] build on commitments in the NHS Long Term Plan to ensure patients have timely access to community mental healthcare. This was quickly followed by the long-awaited discussion paper on a long-term plan for mental health,[17] which Turning Point will be contributing to.

Indeed, a crisis in the cost of living is unfolding in the UK economy and the impact on the most vulnerable within society will be significant. ONS data suggests that Britain's economy contracted by 0.1% in March 2022,[18] as rising inflation (9% in April 2022)[19] and the burgeoning cost-of-living crisis takes its toll. The Bank of England warned that a recession is a possibility.[20]

Against the backdrop of health and social care reforms, funding pressures, economic decline and growing demand, current policy priorities provide significant opportunity for Turning Point to support more people as a leading health and wellbeing organisation, helping to redress inequalities and improving population health.

9 https://www.gov.uk/government/publications/market-sustainability-and-fair-cost-of-care-fund-2022-to-2023-guidance/market-sustainability-and-fair-cost-of-care-fund-2022-to-2023-guidance

10 https://www.gov.uk/government/publications/independent-review-of-drugs-by-dame-carol-black-government-response

11 https://www.gov.uk/government/news/new-cross-government-unit-to-tackle-drug-misuse-following-major-independent-review

12 https://www.gov.uk/government/publications/from-harm-to-hope-a-10-year-drugs-plan-to-cut-crime-and-save-lives

13 https://www.ons.gov.uk/peoplepopulationandcommunity/birthsdeathsandmarriages/deaths/bulletins/deathsrelatedtodrugpoisoninginenglandandwales/2020

14 https://www.gov.uk/government/consultations/reforming-the-mental-health-act/reforming-the-mental-health-act

15 https://www.local.gov.uk/parliament/briefings-and-responses/reforming-mental-health-act-white-paper-2021?msclkid=9be2e49eb0de11ec8df75d345b76413d

16 https://www.england.nhs.uk/2022/02/widespread-support-for-proposed-nhs-mental-health-access-standards-for-patients/

17 https://www.gov.uk/government/consultations/mental-health-and-wellbeing-plan-discussion-paper-and-call-for-evidence/mental-health-and-wellbeing-plan-discussion-paper

18 https://www.ons.gov.uk/economy/grossdomesticproductgdp/bulletins/gdpmonthlyestimateuk/march2022

19 https://www.ons.gov.uk/economy/inflationandpriceindices/bulletins/consumerpriceinflation/april2022

20 https://news.sky.com/story/interest-rate-raised-to-1-by-bank-of-england-hitting-13-year-high-12605700

2 Our strategic intent

Our last strategic period ran from April 2017 through to March 2022 and we are now entering a new period commencing in April 2022. We have carried out extensive engagement in the last eighteen months as we have built plans for the next five years, ensuring that we are well informed by the experience, thoughts and views of our key stakeholders.

The strategic period that has just ended saw Turning Point forging a new era of health and social care delivery. Drawing upon almost 60 years of experience, we sought opportunities to integrate health and social care while extending our reach and effectiveness through the opportunities presented by technology. We continued to respond to increasing health inequalities, brought into acute focus by the pandemic, and strengthened our focus on wider health and wellbeing.

Our strategic goals for this year were:

People

To recruit, retain and develop high performing individuals and teams who are driven by our values, passionate about delivering innovative, high-quality services and who inspire possibility in each other and in the people we support.

Quality

To ensure that we deliver on our promises to our clients, customers and the people we support, meeting or exceeding their expectations in terms of both quality and cost.

Diversification and Integration

To extend our reach into services which improve health and wellbeing in the population. Working closely together as one Turning Point, sharing our knowledge and expertise, we will provide integrated services to the people who need them to simplify and improve their support.

Growth

To realise our vision through responsible growth and by retaining and increasing our market share for our existing products, delivering on expectations in terms of both quality and cost.

Innovation

To innovate in the way we operate, finding new ways of supporting people, embracing digital technology thereby offering greater choice and flexibility.

Financially Secure

To ensure that we are financially secure for the future and that we can continue to reinvest in our services, in innovation and improvement and in our people.

As we move into our new strategic period, we have evolved our strategic goals to fully reflect external conditions and internal developments and we have adopted new articles of association with refreshed charitable objectives. Our vision and values remain an important constant in an uncertain world.

From April 2022 our strategic goals are to:

1. Support people to improve their health and wellbeing and bring about positive change in their lives
2. Seek to reach more people and provide support at the earliest opportunity
3. Prevent the escalation of need and reduce demand on the wider health and social care system, and thereby
4. Create enduring value for communities and society as a whole

3 Our stakeholders

Section 172(1) Statement

During the year ended 31 March 2022, the Directors of Turning Point have fulfilled their duty and acted in the way that is most likely to benefit the people we support.

Strategy and vision

The Turning Point Board met in November 2021 to agree the strategic goals and strategic intent for the new period commencing April 2022. The charitable objects were also reviewed in 2021 and updated to align with the new strategic period. The Board regularly monitors and reviews the progress against the strategic intent through reports presented on operating and financial performance.

Our approach to stakeholder engagement during 2021

We have many stakeholders including the people we support, local communities, our colleagues, the purchasers of our services (public sector commissioners, businesses, and private pay clients), our regulators and our suppliers.

Through active engagement, supported by a new framework and oversight, the views of stakeholders are gathered throughout the year and inform decisions made by the Board.

The people we support

At Turning Point, we support a whole cross section of society. It is critical to our success that we engage, listen to and act on what the people we support tell us.

Regular Board and senior leadership visits to our services take place and though these were largely held virtually during the pandemic, some face-to-face visits took place during the year. These visits allow senior colleagues to connect with the people accessing our services and those who support them, to hear about local issues and to celebrate successes.

Our regional people's parliaments, networks and surveys encourage the people we support to regularly provide their feedback, raise any concerns they have and make suggestions about the support we provide.

Over the last year, based on the needs of the people we support, and the changes brought by the pandemic, we have continued our telephone and online support, introduced remote counselling and coaching, and ensured the people we support were able to maintain contact with their families and carers digitally, when they couldn't meet in-person. We have continued what has worked well, extending options to meet different needs and where appropriate we returned to face-to-face delivery, recognising the limitations of remote delivery for some.

Communities

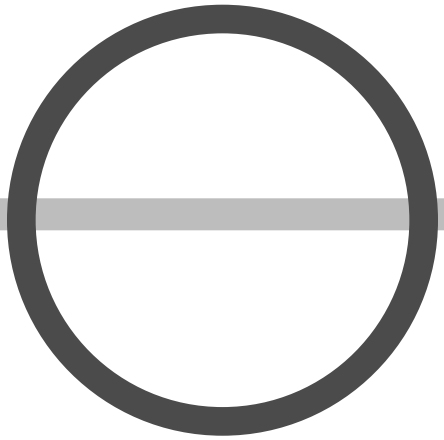
Turning Point operates nationally but it has always been essential for our services to be embedded within their wider community and positively contributing to it. Therefore, we are always looking for opportunities to support local events and community initiatives and to build relationships with other community bodies, charities and faith-based organisations.

Services work positively and collaboratively with community partners in order to meet the needs of their local population, improve access for under-represented groups and involve the people we support in improving services.

Colleagues

We encourage effective and open communication at all levels within our organisation. As a result of the pandemic, we have introduced new ways to communicate to keep our people safe and supported, including a number of new communication channels, for example listening sessions, network groups, a range of manager forums and supporting tools such as our dedicated microsite as a one-stop location for covid-related advice.

Our colleague survey, the employee voice national forum, the annual leadership event in June and the introduction of the social networking site Yammer, have enabled colleagues to contribute ideas, connect and collaborate. We also engaged our people through pulse surveys, focus groups, and team discussions on the future of work. The insight from our colleagues has been invaluable and has already led to new ways of working with people we support, as well as digital connectivity across teams, shifts and locations. An example of this in our public health and substance misuse services is the increased move to online groups, giving our services users access to the support they need when they need it and in the way in which they want it. Technology also enabled our colleagues to work remotely where this was possible.



Our regional people's parliaments, networks and surveys encourage the people we support to regularly provide their feedback, raise any concerns they have and make suggestions about the support we provide.

The environment

As well as our engagement with local communities, we are very aware of the impact our activities have on the environment. That is why we have developed the Green Heart of Turning Point intranet site, encouraging an environmentally conscious workplace. The introduction of a new Green Heart Yammer channel helps engage colleagues in environmental matters and encourage individual action both at work and at home. The appointment of the Director of Corporate Governance as the Net Zero Lead for the organisation is also a clear commitment to our green future.

Our Green Plan objectives are:

- To minimise environmental impact by managing the supply chain to ensure suppliers comply with environmental legislation where required and certify to ISO14001
- To minimise environmental impact in terms of waste production with particular focus on clinical waste
- To raise awareness of environmental matters to the workforce so that personal behaviours at work are sensitive to environmental consequences
- To ensure compliance with policies and procedures to meet compliance obligations
- To influence property providers to consider environmental impacts at key decision points in relation to the provision of accommodation for the people we support
- To reduce the likely adverse impact of climate change effects on the services we provide and the people we support through service design and the locations from which services are provided

The Board of Directors is committed to minimising the impact on the environment from the activities of Turning Point in delivering health and social care outcomes. This commitment is enduring to ensure sustainable development in line with the Green Plan, the Environmental Policy and the Environmental Management System accredited to ISO14001.

Purchasers

We have always worked closely with those buying our services to best meet the needs of the people we support, deliver value for money, fill gaps in the market and prepare for future demands. Throughout the pandemic good links with commissioners were vital, as we were continuously adapting to changing regulations and requirements.

The Care Quality Commission (CQC)

As a provider of regulated activity, the relationship with the CQC is a very important one, with regular meetings taking place between our CQC corporate provider relationship manager, a member of our Operating Board and our Head of Risk and Assurance. We also have nominated people across the organisation who liaise with the CQC on specific details regarding the different types of regulated activity.

Suppliers

We rely on various suppliers throughout the year for the delivery of technology, facilities management, harm reduction products and agency colleagues, amongst other things. We maintain good working relationships with our suppliers to ensure good value, social impact and environmental commitments are in place throughout the duration of our contracts.

Policy makers

Given the changing political and economic landscape in which we are operating, it has been important to maintain good links with decision makers. We have continued to work with partners and to deepen our links with organisations including VODG, the Association of Mental Health Providers, Social Enterprise UK, the NHS Confederation, the Local Government Association, the Royal College of GPs, the Royal College of Psychiatrists (where Turning Point's Dr Luisa Searle is the Equality and Diversity Champion and Dr David Bremner is the incoming Vice Chair of the College's Addictions Executive), Collective Voice (where Turning Point's National Operations Director, Clare Taylor, is Deputy Chair) and National Voices (of which Ezra Ben-Yisrael, a leadership development manager at our DAWS service, is a new trustee).

We have kept constituency MPs and councillors updated on our activity and on the impact of the pandemic on the people we support. We have also hosted ministerial visits to several services.

The introduction of a new Green Heart Yammer channel helps engage colleagues in environmental matters and encourage individual action both at work and at home.

"The Association's strategic and policy work, in support of the VCSE mental health sector, has benefited greatly from the contribution of our colleagues at Turning Point over the last year.

I have been particularly grateful for the support of Julie and her team for the Policy and Oversight Group for Mental Health & Wellbeing, convened by The Association and co-chaired with the Association of Directors of Adult Social Services, which continues to provide strategic and operational advice and intelligence to the Department of Health and Social Care and other national partners on mental health social care, including the government's Winter Plan for Social Care for 2021–2022.

Turning Point have engaged with our various projects informing national mental health policy by sharing stories of people using their services as well as how their services are providing the valuable support needed in the community; connecting our Lived Experience Advisory Group with Turning Point's coproduction group has been crucial in ensuring the voices of lived experiences remain central to our work and that of Government."

Association of Mental Health Providers

Ensuring good governance

The Board is committed to the principles of good governance and subscribes to the Wates Principles as its governance code. The Board conducts annual effectiveness reviews with an externally facilitated review every third year. The company has robust policies in place on risk management, anti-fraud, bribery and corruption, procurement, information governance and clinical governance.

Acting fairly between members of the company

Turning Point has a trading subsidiary Turning Point (Services) Limited with which it has entered into an inter-company agreement to deliver health and social care services as a sub-contractor. The company is committed to ensuring it fully meets all contractual obligations for the delivery of health and social care services whether delivered directly or indirectly.

Principal Decisions in 2021–2022

For each matter that comes before the Board, the Board considers the likely consequences of any decision in the long term, identifies stakeholders who may be affected, and carefully considers their interests and any potential impact as part of the decision-making process. The principal decisions considered by the Board during the year were:

i. **Amendment of Articles of Association:** Written Charity Commission consent was obtained on changes to the charitable objects in order to better reflect current and future activities in line with the new strategic period commencing April 2022. Additional updates were made to trustee and member benefits following Charity Commission consent. Following the consent of the Charity Commission, the Board adopted the amended Articles in September 2021.

ii. **Change in the workplace pension provider:** We engaged with our people via formal consultation to understand views on proposals to change the workplace pension provider. The Operating Board considered the outcome of the consultation with employees and the union and accepted the recommendation of the Pensions Committee to change workplace pension provider and appoint Legal & General.

4 The Turning Point team

The Turning Point team is made up of over 4,500 people (colleagues, peer mentors and volunteers) spread over 300 sites and supporting over 164,787 people this year across all kinds of health and social care.

We are immensely proud of Turning Point colleagues; their commitment and dedication to each other and the people we support has been exceptional during another challenging pandemic year and we greatly appreciate their hard work, resourcefulness, passion, and resilience.

Engaging our people

We provide many opportunities for people to give feedback and share their views on their experience of working with us. One such opportunity is our Colleague Engagement Survey which collects thoughts, feedback and ideas to enable us to continuously improve making our organisation a better place to work for all and enabling us to further enhance the quality services we provide.

Our overall colleague engagement score has increased again this year by 4 percentage points to 72%, this is a testament to the work our teams are doing across the organisation to enhance the experience of our colleagues. This year's survey enabled us to further review the progress we have made since our 2019 survey and our COVID-19 survey last year. We saw improvements in engagement levels despite another pandemic year in one of the most challenging employment sectors to work in. We are proud of the positive feedback colleagues have shared including an increase in:

- I understand how my role contributes to achieving Turning Point's outcomes. **89%**
- I trust and respect my manager/supervisor. **83%**
- I would willingly put in extra effort in order to help Turning Point. **81%**

Colleagues have continued to show sustained dedication through a second year of the pandemic. Turning Point is ambitious about the future and we can now, post pandemic, accelerate the delivery of our ambitions particularly in the areas of future ways of working, increasing diversity, equity and inclusion, co-production and involvement, leadership and management development, the environment and climate change.

Shaping the way forward together

Working remotely and more flexibly during the pandemic has shown what is possible and what opportunities there are to consider doing things differently as we move on from COVID-19.

Results from our Colleague Engagement Survey on future ways of working, made it clear that our people are keen to explore a new, more flexible, agile and hybrid future, something we are progressing well in collaboration with colleagues across all of our settings.

Attraction and retention of colleagues has been a national and sector challenge during the pandemic, and this shows no sign of improving any time soon. Despite this, we have been resourceful and successful in our recruitment and retention efforts. In the last year we interviewed over 5,000 candidates and made 1,845 offers of employment. By the end of the fiscal year, we were recruiting over 170 people per month. Radio advertising in particular regions enabled us to reach 1.8m listeners and we

attracted more visitors to our new look careers website as well as using some of the more traditional methods to reach more people such as leaflet drops and job fairs. We have also invested in developing around 100 managers across Turning Point and improved recruitment and selection techniques, supporting our efforts to retain our colleagues in the current market with turnover rates consistently below the national average.

We have focused our efforts on broadening our benefits programme, ensuring that we remain competitive in a rapidly moving market and this saw the introduction of our new benefits portal which offers our colleagues one platform to access all of their benefits – support and guidance is available for health and wellbeing (including financial wellbeing education) and discounts and incentives are offered to help our colleagues' money go further. In addition, we moved our Pension provision to the Legal & General Master Trust and introduced a new provider of financial wellbeing (Salary Finance) which has been accessed by around 10% of colleagues already, allowing them to draw on their earnings up to 2 weeks in advance of the next pay day.

Building capability to support quality service delivery that also responds to new commissioning requirements is a key focus with an emphasis on learning. We know that most learning happens on the job, but we also have a range of foundation learning programmes for frontline workers. We have run over 400 additional workshops this year compared to last, developing over 8,000 colleagues in key skills for their roles, and 57,584 e-learning modules were completed via our Learning Management System (LMS). We have also supported a growing number of colleagues with their professional development through studying for an Apprenticeship.

Meanwhile future managers and leaders work through our Management Development Programme, seven modules have been designed, and over 1,000 delegates participated across 85 learning sessions. We have also facilitated 69 coaching sessions to support the learning from this programme.

We have run over 400 additional workshops this year compared to last, developing over 8,000 colleagues in key skills for their roles, and 57,584 e-learning modules were completed via our Learning Management System (LMS).

Iona's story

Iona completed the Level 3 Adult Worker Apprenticeship – achieving one of the first distinctions at Turning Point.

Soon after completing her first Apprenticeship, Iona wanted to progress to the Level 4 qualification, specifically choosing modules around Positive Behaviour Support (PBS) so that she could directly apply this knowledge to the support we provide. Iona's proven ability to learn and develop her skillset, and her commitment to providing the best service possible, resulted in her being nominated for and winning an Inspired by Possibility award in 2021.

"I have really enjoyed completing both the Level 3 & 4 apprenticeships. Personally, they have helped me grow in confidence as well as my knowledge and understanding within all different areas of my role. The positive behaviour module helped when supporting individuals with Positive Behavioural Support within the home as well as building more in-depth knowledge.

This experience has encouraged me to develop within my role, most recently applying for a team manager role.

I have had a few assessors whilst studying for both apprenticeships and have been supported really well throughout."

Working environments

The environment we are co-creating at Turning Point is a place of work rooted in psychological safety which is diverse, inclusive, collaborative and innovative, creating high levels of engagement and many opportunities for recognition.

The person-centred way in which we work directly with people we support determines our approach to flexible and hybrid working. In services where our support needs to be in-person, a creative approach to working patterns is required to accommodate different lifestyles. In other services we are capturing the best of remote and in-person service delivery, where a hybrid approach can work for both our people and the people we support.

Our office-based colleagues are also contributing to a review of their workplaces, to ensure that our office locations are appropriate for future working patterns and to support more flexible service delivery in the future. This collaborative approach will continue into 2022–23.

Employee Health and Wellbeing

In 2021–22 COVID-19 has still been very present in our lives and the wellbeing of our teams, including physical, mental and financial health, has continued to be a focus for our organisation.

Through our Rightsteps Wellbeing service, we have continued to increase the range of support available, and our colleagues can now self-refer for Rightsteps Therapy, that can be accessed in a confidential, on-demand way. We have also focused on resilience with a range of targeted interventions to support the most challenged roles, supported by our skilled team of psychologists. Our Mental Health First Aiders (MHFAs) are an additional asset, able to recognise and provide peer support. We have trained 45 MHFAs to date, with plans to extend this in the coming year.

Through our employee assistance provision, we now have 24/7 online GP access, mental health support, a get fit programme and more, to support our colleagues at their time of need.

In response to wider economic conditions, we have broadened our financial wellbeing package to include access to advanced earned pay, loans repaid through salary, saving direct from salary and help to save. We have introduced a new reward and benefits platform which gives further support to our people's financial wellbeing, with information and guidance on a range of topics from managing debt to saving for the future.

This year we have worked to keep the menopause in the conversation at Turning Point and are committed to continuing to work to break down barriers. We have started a new Menopause Network as well as signed the Workforce Menopause Pledge and colleagues can now benefit from Rightsteps Menopause Counselling. We will continue to engage with colleagues to keep the agenda growing.

We raised awareness of available smoking cessation support through an organisation wide No Smoking Day campaign, introducing the opportunity for colleagues to attend stop smoking support during working hours without loss of pay to increase access to support, in line with NICE guidelines (NICE NG209).[21]

We carried out four webinars as part of the campaign bringing in external and internal experts from across the organisation to encourage the use of e-cigarettes as a safer alternative to smoking and to help colleagues consider alternative ways of coping with stress.

A key focus for our leadership population has been to further develop the skills and behaviours required to create a psychological safe space for all colleagues. This year we have developed around 500 managers in emotional intelligence and managing self-awareness with the intention of enabling leaders to foster safe spaces at work for all colleagues.

21 https://www.nice.org.uk/guidance/ng209

CASE STUDY

Bedworth partnership working

Despite having many challenges throughout the last two years Jon, a Support Worker at one of our services in Bedworth, was nominated internally by his manager as having been 'a beacon of hope, positivity and energy. Inspiring those around him to go the extra mile in the series of changing restrictions.'

Jon has worked with the people we support, particularly Neil in Bedworth, to establish a communal hub in a coffee shop style socially distanced facility for residents and their families.

They have helped establish a food pantry for the local community to access surplus food donations. Jon has worked with Neil to apply for a grant to help create an environmentally carbon neutral garden and has helped organise for some volunteers to come and help establish an urban allotment in Bedworth.

Jon and Neil have also worked with Warwickshire County Council to develop a grant application for individuals to have help with fuel and food poverty during the winter months.

Working with Jon and Neil has been inspirational for the team over the last year and shows how positive partnership working is the way forward.

CASE STUDY

Oxfordshire

Turning Point continues to contribute to the safeguarding of children and vulnerable adults within our services. One example of this is our involvement within the Family Solutions Plus model within Oxfordshire.

Family Solutions Plus (FSP) is run by Oxfordshire County Council and is formed of 17 fully integrated, locality-based, multidisciplinary teams that work with families throughout their journey in social care. In 2021, Turning Point supported over 170 families as part of the FSP programme.

Families work with one social worker from assessment through any subsequent intervention meaning there is no hand-over or referrals. The social worker is backed up by a team of 'adult-facing practitioners'. who support people in overcoming challenges which impact the whole family.

Anna, a drugs and alcohol recovery worker at Turning Point, is among those fully integrated within the FSP service. Anna describes the success of the FSP model and the value of multi-disciplinary working:

"There is less delay, whereas previously there may be a bit of a wait when you request something, and a social worker must talk to their manager. It's a really timely way of updating and making sure that everyone is aware of what's going on for those families. There's less formality in referring from one agency to another so it's a bit more streamlined."

Equity, Diversity and Inclusion

Turning Point is further developing a Diversity, Equity and Inclusion approach that focuses on four key areas:

- Creating dialogue, awareness and engagement
- Role-modelling, leadership, and governance
- Fostering Diversity and Inclusion Network Groups
- Enhancing and monitoring diversity and inclusion measures

At an organisational level we support this agenda through our proud commitment to external accreditations of good practice, including Disability Confident, Stonewall Diversity Champion and Mindful Employer.

For colleagues across Turning Point we have continued to extend our Diversity and Inclusion microsite of tools and resources including a statement on anti-racism and links to anti-racism materials.

- We have black and people of colour (BPOC), LGBTQ+ and disability network groups. Each network has a community group that is open to all colleagues, this is to help improve access and visibility of the networks and support for all colleagues across Turning Point.
- We are working with the networks to co-produce learning materials and review our current Diversity, Equality & Inclusion learning content. Research suggests that short-term learning interventions have limited impact on changing people's behaviours, therefore we want to create an iterative learning conversation around diversity.[22]
- Yammer continues to be an essential tool for our networks and colleagues across the organisation, sharing ideas and seeking to combat isolation.

As an organisation we strongly value lived experience. Many of our colleagues have some sort of lived experience of the challenges that face the people we support. This makes us stronger, and it helps us to ensure our services are fit for purpose, representative of the communities we serve, accessible and welcoming to all. Our services are leading the way on developing new pathways for people once supported by Turning Point to become peer mentors and move on to voluntary and paid positions – with a clear package of training, support and progression.

Joseph
BPOC Network Chair

Since becoming Chair of the BPOC (black and people of colour) network – I have become even more aware that we must be the change that we want to see. It is an honour to be the Chair and of service to my colleagues. As a network we are able to have really honest and interesting conversations, which makes being a Chair very rewarding.

I have found that the support for this network from the senior management team is not only something that is stated but we can see this in action by their support offered, attendance and willingness to engage with the network members.

The network is an opportunity to support each other, educate and to be part of changes to improve the working environment for BPOC at Turning Point and this in turn will improve the work environment of all staff.

The members are very engaging and come from a variety of Turning Point services. We also shared not only areas that require developing but we also acknowledge the positive experience too.

Rob
LGBTQ+ Network Chair

I feel really privileged to be able to chair the LGBTQ+ forum for Turning Point, being part of its creation from discussions of why and how it would be a good idea to try to make those things actually happen has been personally very rewarding. Having a positive impact on company policies that directly benefit my LGBTQ+ community that I feel so strongly connected to, adds another level of pride and sense of worthwhile to my job.

Being able to reach out across the whole organisation and support or positively affect those individuals who may not have felt comfortable enough to just be their authentic selves or whose family members were going through things they didn't know how best to respond to and being able to talk to, reassure and signpost them to the specialist support they may have needed has also been incredibly rewarding.

I also believe that for those still on their journey figuring out how to be their authentic selves and exactly what that looks like, being a visible sign that it's OK to be a loud and proud part of the LGBTQ+ community and that Turning Point supports this, they can benefit without even having to come to a meeting or talk to me, just knowing the organisation supports them could be enough to make someone happier in their job, feel seen and then go on to better be able to support others in a more authentic and honest way.

Kayley
Disability Network Chair

I took the opportunity to be the disability network Chair as I thought it was an exciting and progressive step to explore and generate ideas, change and growth around disability for colleagues.

This journey has had a personal effect on me in becoming a voice and the challenge of being a critical friend to the organisation and having courageous conversations around disability. I feel that Turning Point through wanting to have those with disability in its workforce, it aims to create an environment of belonging, understanding that to achieve this many obstacles may need to be identified and addressed.

With this in place the future looks positive with Turning Point moving forward to being a significant disability confident employer, far beyond its current expectations.

22 https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/944431/20-12-14_UBT_BIT_report.pdf

CASE STUDY

Working in partnership to promote diversity

The City & Hackney Recovery Service is a service for residents struggling with alcohol and substance misuse issues, including a specific project for members of the LGBTQA+ community and those with black heritage. The project is commissioned by Hackney and City councils and is delivered by Turning Point, London Friend and Mind in City, Hackney and Waltham Forest.

Due to the joint effort of Turning Point, London Friend and MIND, from October 2020 to November 2021, City & Hackney teams helped over 3,000 residents on their drug and/or alcohol recovery journey.

In addition, front line staff have:

- dealt with over 41,000 emails and phone calls
- issued over 20,200 prescriptions
- conducted 271 recorded blood tests
- received only 16 complaints and
- trained over 200 professionals in alcohol awareness and substance misuse.

"We're really proud of the impact we are beginning to have on the communities we serve. The pandemic impacted services across the board – and we've done our utmost to make sure that clients were getting the support they needed."

Paul
Deputy Operations Manager

5 Responding to the pandemic for a stronger future

While we didn't return to the restrictions of 2020, local outbreaks and the arrival of the Omicron variant proved that the pandemic was by no means over during 2021.

Despite the many challenges of the last year, Turning Point has continued to grow, innovate, learn and ensure quality support for both our colleagues and the people we support.

Our people have done a tremendous job ensuring our support continued at a high quality, at the most difficult of times, with 96% of our services with a good or outstanding rating by the CQC. We have worked hard to limit the impact of the pandemic on the people we support through embedding flexible and technological solutions, while developing new solutions to address some of the longer-term health and wellbeing issues resulting from the pandemic. This puts Turning Point in a strong position as we look to the future, beyond COVID-19.

We have worked hard to limit the impact of the pandemic on the people we support through embedding flexible and technological solutions.

Vaccines keeping people safe

Vaccines continued to offer a significant shift in the way we were able to battle the virus. We invested in ensuring our colleagues and people we support were aware of the vaccines available and encouraged them to have the full course.

In London we were part of an initiative that delivered vaccines to the most vulnerable. Our service in Croydon hosted a COVID-19 vaccination team, targeting homeless and vulnerable people. At the first event in early April 2021, 68 people were vaccinated, and they were able to receive their second dose at our service.

Trauma doctors, nurses, recovery workers and volunteers worked throughout the day to provide additional support. In the health tent, 14 hepatitis C and B tests were given to vulnerable adults as well as tests for diabetes and a general health check. The events were hosted by South West London NHS in partnership with Turning Point, Crisis, SPIRES, Croydon Reach and the Archbishop of Croydon. Clinical teams from Covid Crisis Rescue Foundation, Rainbow Health Centre and local Croydon GPs gave the vaccine.

No appointment was necessary and there were free 'Vaxi Taxis' running to collect those attending, people who are homeless households, rough sleepers, asylum seekers, sex workers or living in emergency accommodation. There was also free food and drink provided.

Those attending did not need to bring a letter, NHS number or be registered with a GP, further reducing barriers to vaccination.

The prevalence and impact of COVID-19 has been felt differently across the country. As a national organisation with local services, supporting people with a broad range of needs, there was no single approach or definition of 'back to normal.' Although the vaccines were a big help, it has been imperative that we continue to maintain high standards of safety in our services through robust prevention and control measures including PPE, regular testing and requiring colleagues to stay home if they had any symptoms or tested positive.

As public spaces and businesses slowly re-opened and restrictions were lifted, Turning Point continued to benefit from the digital solutions we had swiftly put in place over the previous year.

While retaining many new ways of working, with caution and robust guidance in place, we transitioned back to some face-to-face support where we had been completely online before, welcomed back family and friends into our services and re-engaged with external partners.

CASE STUDY

COVID-19 vaccines for people with learning disabilities

Our Warwickshire learning disability service hosted three virtual workshops to raise awareness of the COVID-19 vaccination for adults with autism and learning disabilities. Support workers were engaged in explaining the benefits, providing reassurance and facilitating take-up among individuals we support. These one-to-one conversations have been vitally important as illustrated by this quote from someone we support in one of our learning disability services:

"I listen to the news about the COVID pandemic, my support workers came and talked to me about the COVID vaccine and explained how it will help keep me safe and stop me being more poorly if I was to have COVID. I was a little worried as I don't like nurses or injections but staff reassured me. On the day I was having the vaccine staff stayed with me and reassured me and the two lovely nurses that came to my home to do the vaccine also reassured me and chatted to me throughout, this made me feel relaxed. Once I had received my vaccine the nurse explained to my support staff of possible side effects and what to look out for, I didn't feel anxious or nervous as I was reassured throughout the process."

"I didn't feel anxious or nervous as I was reassured throughout the process."

Redressing health inequalities and digital poverty

As the country starts to move beyond covid, our Turning Point teams are acutely aware of the health inequalities the pandemic exposed and exacerbated. Our services support some of the most marginalised people in society and seek to redress the inequalities they face; brought into sharper focus by the pandemic.

Our new strategic goals and engagement strategy, build on our commitment to improve the health and wellbeing of all. Everyone at Turning Point is ambitious for the people we support and we seek to improve their experience, their access to support, their health outcomes and their life expectancy wherever we can.

The range of measures put in place to stop the spread of COVID-19 led to increased isolation and hardship for many, placing a toll on some of the most vulnerable in society. The last two years have been particularly challenging for people with limited capacity and despite the efforts from support colleagues, access to family, friends and day services has been limited, impacting people's routines and community.

The pandemic has also impacted access to health services. A recent study found that interruptions to standard health and social care left over 70% of autistic people without everyday support. In addition, they found that despite people with autism being at elevated risk of severe illness due to co-occurring health conditions, there was a lack of accessibility of COVID-19 testing and that many COVID-19 outpatient and inpatient treatment services were reported to be inaccessible, predominantly resulting from individual differences in communication needs. Digital exclusion has also been a barrier, with an assumption that everyone is able to access services online.

The health inequalities people with a learning disability experience are well documented, with COVID-19 worsening the physical and mental health of people with a learning disability, compared to those without.

The pandemic has also impacted access to health services. A recent study found that interruptions to standard health and social care left over 70% of autistic people without everyday support.

In 2021 colleagues providing learning disability support embarked on a programme of activity to improve health and wellbeing, reduce health inequalities for people living with a learning disability and enhance the way individuals authentically engage and make choices. Following a health survey this programme was informed by the view of over 400 people we support and multiple colleagues from across 80% of our learning disability provision. This led to two major developments in the way we work:

- In September 2021 we launched a newly developed **Handbook for Health and Wellbeing** as a resource to aid effective and broad health and wellbeing support planning for our frontline workforce. Alongside physical health the handbook covers emotional and social wellbeing topics including, healthy lifestyles, wellbeing, sexual health, home life. Since its roll out our colleagues have been using it to guide effective support planning as well as a learning resource for new and existing social care colleagues.
- In November 2021 we began to pilot a new way of developing Health Action Plans which brought in some of the wider themes detailed in the handbook and was designed to be used in conjunction. It is a "live" document which has been developed in Easy Read with the ability to adapt for the differing communication needs of the people we support. It can help ensure the plans are owned by the individual themselves and facilitates a cyclical review of short- and long-term actions set and achieved throughout the year. Most importantly it helps to re-engage individuals with pre-COVID-19 health and wellbeing activities.

During the pandemic Turning Point shifted to primarily digital ways of working, which has improved access for many, but we remained conscious of digital exclusion and the risk of further marginalising groups who already find it difficult to access services. There are 11.9m people (22% of the population) who do not have the digital skills needed for everyday life in the UK and this is more prevalent in people with mental health issues.[23]

- **In our talking therapy services** we understood that some of the people we support are unable to access services online and so have offered telephone support.
- **In our learning disability services** we introduced telemedicine, enabling colleagues and residents to communicate with a healthcare professional via a video link. Having telemedicine in care homes has allowed services to support people in a far more person-centred and compassionate way and has reduced their anxiety.
- **Online groups have been a vital tool in our substance misuse services.** From April to December 2021, we delivered 2,203 online groups across our substance misuse services with 14,671 attendances (this includes multiple attendances not unique individuals). Based on 2,040 data sets given to us by the people we support who attend our online therapeutic groups, on average, 90% were satisfied with this aspect of their treatment.

23 https://digital.nhs.uk/about-nhs-digital/our-work/digital-inclusion/what-digital-inclusion-is

We are continually working to improve the online groups, particularly where technology is concerned. We continue to support those who are in digital poverty by providing tablets, laptops, and data coverage so that they can attend the online groups, mutual aid meetings and make online contact with family and friends. As a comparison, in November 2020, the satisfaction rate with technology was 83% and is now 91%.

The comments below are a clear indication of the benefits of being in an online group and the professionalism, compassion and supportive nature of those who facilitate the groups.

"I feel the set up is fantastic and the staff are easy to talk to and very supportive. I can't fault the staff or the program."

"A very good starting point for my recovery, feels like laying very good foundations for a successful recovery."

"Such a warm and friendly safe space. No judgement ever! The facilitators are so truly wonderful. This group is life changing as long as you are willing to be open and make changes."

"I cannot thank you enough for helping me change my life and so grateful for how I have been taught the Mindfulness techniques which I will now use in my everyday life."

"I really love the group I feel listened to and like I'm not alone."

"First time user and I felt hope for the first time all I can say is thank you."

"Such a valuable life changing group! The facilitators are just so amazing. A safe space that not only helps you change your life around for the better but gives you so much hope."

"It's always so good to connect with people who understand addictions, and learn ways to cope with it, for me the group flows with care."

"Wonderful group as always! 10/10."

- The total number of women receiving structured treatment (irrelevant of referral date) increased by 24% when comparing 2019 to 2021. This is, in large part, due to the availability of online and remote interventions, which break down some of the barriers for women accessing treatment. For many women, coming into a treatment service can feel incredibly stigmatising but also intimidating in terms of an often-heavy male cohort present and the trauma women have often experienced at the hands of men. Whilst we want to retain a blended treatment offer to support choice, the continuation of remote access supports women engaging better in treatment.

CASE STUDY

Digital alcohol treatments helping to reduce drinking

At the start of the pandemic Turning Point moved much of our drug and alcohol support online due to lockdown with telephone support, video conference group work and online sessions or modules.

March 2021 saw a 32% increase in referrals for alcohol treatment compared with the previous year. Over half of these were self-referrals, a 44% increase on the year before, meaning more people are contacting the services for support rather than going through a professional or loved one. More non-dependent drinkers have accessed the service in this way.

There was a 650% increase in the number of people engaging with the 'My Turning Point' digital tool this year compared to last (pre-pandemic). Since March 2020, our self-directed online alcohol modules were used over 4,500 times, more than double that of the next most used. 1,839 people accessed the cannabis module.

David Bremner, Chief Medical Director at Turning Point, explains: "When treatment moved online we saw a very clear interest and engagement from people who wouldn't normally walk into their local drug or alcohol service. There are obvious differences in those who seek support once their life has been impacted from years of heavy drinking and someone who isn't yet dependent on alcohol but is still suffering physically and mentally."[L]

"Online work suits some people more than more traditional models, which we continue to deliver as part of our broad range of treatment options."

March 2021 saw a 32% increase in referrals for alcohol treatment compared with the previous year.

Reaching new people through growth and commercial ventures

New funding streams

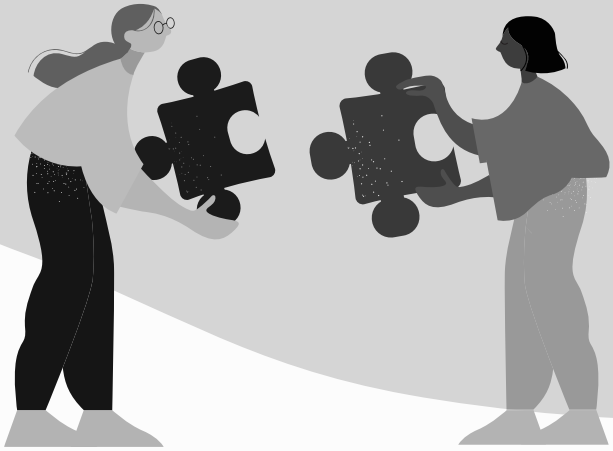
Over the last year we have continued to develop new and existing services to reach more people. We have worked closely with many of our commissioners to utilise monies from Public Health England to extend our activities via Universal, Rough Sleepers and ADDER funding. As we look to the future, additional funding from the new Office for Health Improvement and Disparities (OHID), launched in October 2021, will enable Turning Point to support even more people.

Securing new services

Turning Point was also successful in the retender for the reconfigured contracts in Leicester and Leicestershire and secured new services in Allensgreen, Aldwick, Nottinghamshire and Manchester, along with wins in Sheffield.

Commercial ventures

By working in different ways, utilising technology and building partnerships, we are meeting the growing demands of the people we currently support as well as growing the numbers of younger people, those looking to privately pay for mental health support and employers able to benefit from the expertise we offer.



Rightsteps

Expanding our reach

Within Rightsteps we continually seek out new opportunities to extend our reach, work with diverse organisations and meet the health and wellbeing needs of those we support.

During 2021–22 we built upon existing relationships with a number of benevolent organisations who provide services and support to their beneficiaries. Our long-standing relationships with The Retail Trust, Grocery Aid and The Ambulance Staff Charity enable thousands of people to access our expert health and wellbeing support online and through remotely delivered therapy. In the last year we have significantly extended this reach. We also work with The Royal Medical Benevolent Fund to support doctors and trainee doctors and the Firefighters Charity.

Beyond the benevolent sector, in 2021 we launched a suite of mental health focused e-learning for the Association of British Insurers which was made available across the insurance industry. To date, it has been accessed over 4,700 times.

The importance of employers supporting employees' mental health in the workplace continues to be more widely recognised and prioritised. A key development in recent years has been the introduction of Mental Health First Aid in the workplace. This has been hugely successful with thousands of Mental Health First Aiders being trained in the UK in recent years. However, with the success have come some challenges for employers in how they oversee and support this cohort. For this reason, Rightsteps has launched a Mental Health First Aid support service, providing Mental Health First Aiders with regular support and supervision by Turning Point's expert therapists and providing employers with assurance that their colleagues are both appropriately supported and guided to act within the boundaries of their role.

Rightsteps has launched a Mental Health First Aid support service, providing Mental Health First Aiders with regular support and supervision by Turning Point's expert therapists.

livelife

Testing and Learning

livelife is Turning Point's new direct-to-consumer therapy service. Since launching last year, we have been testing and learning a lot about the private therapy market, extending our reach and developing our online profile.

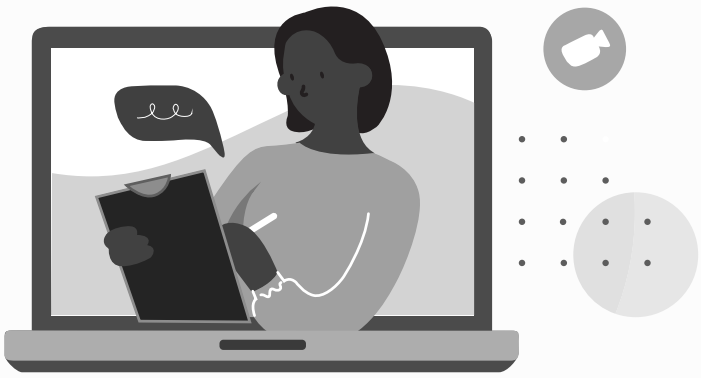
We have launched our first customer newsletter, run several innovative therapist-led TikTok campaigns, worked with influencers, grown our follower count on Instagram and developed our profiles on Hub of Hope and in the Social Enterprise UK directory. We have also used our blog to reach new clients and share our expertise. Our therapists regularly share tips on reducing stress, the importance of positive affirmations, how to manage the impact of changes as lockdown eased and the anxiety linked to war and conflict in the news and how to approach difficult topics like this with children.

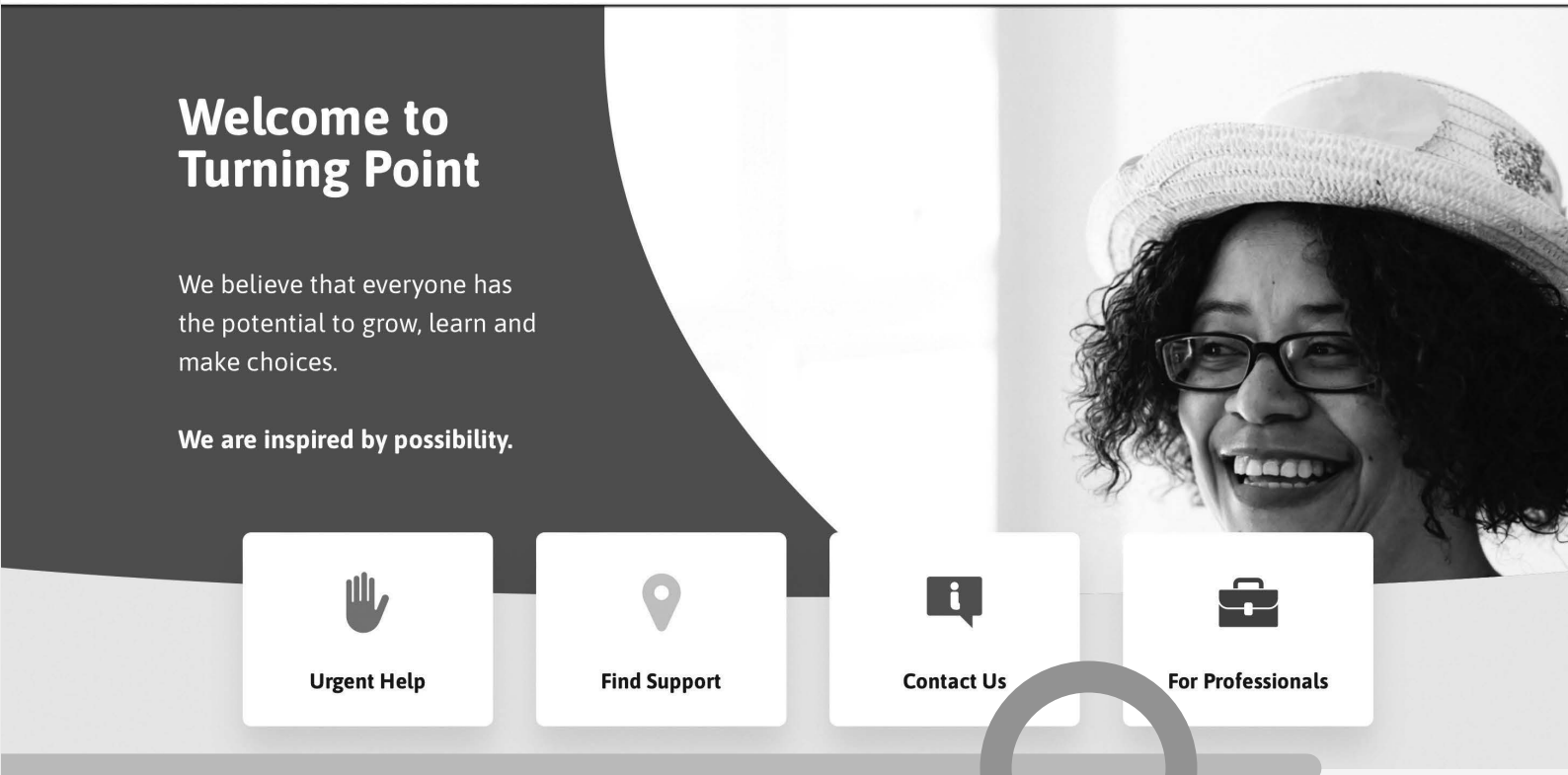
We continue to listen to the voice of the customer to inform how we can best support them, what services and experience they need and what we need to do to grow.

A great example of this client-led approach is us reducing the customer age down to 16 years old following feedback about the need and interest in this type of service among young people. Our therapists have promoted awareness weeks and positive approaches to reducing stress and anxiety

The quality of therapy is high, and customers continue to engage again and again. Our ambitions for 2022 are reach and scale, underpinned by the best-in-class digital user experience.

We continue to listen to the voice of the customer to inform how we can best support them, what services and experience they need and what we need to do to grow.





Improving access to our services through a new website

Our website plays a huge part in supporting those who need our help. Each year our website facilitates thousands of referrals to our services across the country. We plan to deliver a fully optimised and dynamic website with an effortless user journey to allow people to find the services and information they require easily. The new website will also consider how our customer groups (e.g. family and friends seeking information, Health Care Professionals and commissioners) utilise the Turning Point site to ensure that the user journey is smooth for everyone.

For this project, we have made sure to involve our colleagues through multiple engagement meetings where we discussed what parts of the website are important to them and the people they support. To engage with the public, we implemented a pop-up survey on our site for a short period of time that asked a number of questions around usefulness and how easy it is to find information. The results showed 73% of users were able to find what they were looking for and 43% of users found it easy to understand what we do as a company. These results outline that there are improvements needed on our user journey, the story telling of what we do and the impact we have on people's lives.

Although there is much work to be done, we are grateful to all those who have dedicated time to helping with this project, whether that was by contributing to the engagement meetings or taking the time to fill out the survey.

"The team at OrangeGrove are really excited to be working with Turning Point. Our aim from this project is to understand their website visitors and then take our learnings into the redesign project with a sprinkling of behavioural science. Ultimately we want to turn the website into an invaluable resource to help Turning Point deliver their services effectively and increase their positive social impact."

Website designers

6 Moving forward: Innovation and research

Despite the challenges of the pandemic, it was never an option to stand still. The impact of covid on the people we support was disproportionately high, as were the numbers of people starting to seek help for drug and alcohol misuse and mental health issues.

Innovation has been at the forefront of our response to the pandemic, with short and longer-term benefits for our colleagues, people we support and the communities we work in.

Collaboration and research: Universities

At Turning Point, we have always been involved in work with researchers and universities and in autumn 2021 we established a research co-ordination group which meets bi-monthly and includes membership from senior clinicians and operational managers to consider, shape and approve research proposals with the aim of being closely connected with academia and exploring how we can further develop an organisational culture that is 'research minded'. We seek to translate research into practice and to utilise and be involved in research that supports improvements, developments and changes across our sector and helps to reduce broader health inequalities and improve outcomes for the clients we work with.

We are currently working with King's College London, the University of Bath and Manchester University on research projects and involving our colleagues and people we support in this work:

- **The Institute for Crime and Justice Policy Research at Birkbeck University of London, and the Centre for Death and Society at the University of Bath** are undertaking research to explore bereaved peoples' experience in inquests. The benefits of this research will be for the family and friends of the people we support who die. The research findings will raise awareness of the needs of bereaved people who have to engage with inquests and wider coronial investigations. The research will also inform the work of Turning Point's Morbidity and Mortality Group, and the organisation's Coroner's Group.

We seek to translate research into practice and to utilise and be involved in research that supports improvements, developments and changes across our sector.

- **Kings College London – Buvidal research.** Researchers at Kings College have been conducting a qualitative study to understand patient experiences of prolonged-release buprenorphine depot injections and to obtain patients' views of this treatment over a 6-month period (starting from Day 1 of the treatment program). The benefits of this research will help to understand clients' views and experiences of long-acting buprenorphine depot injection; any difficulties clients experience and any concerns they may have, including about dosage and treatment outcome. This will inform and support Turning Point's clinical decision making in relation to further development and roll out of Buvidal across Turning Point.
- **The National Confidential Inquiry into Suicide and Safety in Mental Health (NCISH)/ The University of Manchester.** This is an 18-month study awaiting final ethics sign-off, investigating deaths by suicide of people under the recent care of alcohol and drug services. The team will undertake this by (1) linking existing data, (2) using existing data for case-control exploration, and (3) collecting and analysing additional clinical data from Serious Incident Reports. This will include data on contact with substance misuse and mental health services (including those in contact with Turning Point services) in the 12 months prior to suicide and the nature of that contact.

Technology-enabled homes for people with learning disabilities

In our Learning Disability, autism and transforming care services we have devoted time to consider the aspirations and expectations of the people we support. In response, we established strategic relationships with ethical property investors to deliver more flexible technology-enabled homes that support greater opportunities for independent living and self-management of health and wellbeing.

We supported new assistive technologies, enabling more people to self-manage aspects of their support and assist preventative support provision. We piloted first-of-its-kind interactive light projection technology such as Magic Table 360, expanding the scope of available wellbeing and social support opportunities and providing innovative solutions to physical and cognitive challenges.

COVID-19 impacted the Transforming Care programme, with the pace of transformation slowing. Anticipating a revitalised programme in the coming year, we continued to invest in infrastructure to ensure that more people can live successfully in the community with the right support. We further developed our Positive Behaviour Support resource and reinforced links between our clinical and social support teams across mental health, learning disability, substance misuse and forensic services. Using our expertise in delivering a blended support model, we continued to assist people with complex multiple needs to safely move into their new homes.

We are evolving innovative personalised support through a skilled workforce; better homes; integrated technology-enabled support solutions; improved health and wellbeing; and growth in co-production and shared delivery opportunities. We always take the opportunity to learn, grow and improve from the challenges and opportunities that come our way.

We supported new assistive technologies, enabling more people to self-manage aspects of their support and assist preventative support provision.

Fighting back against liver disease

The Royal College of General Practitioners identifies liver disease as one of the five most common causes of premature death in the UK and it is the only major cause of death that has a year by year increasing incidence. More than 90% of liver disease is preventable.[24]

Those at most risk include many of the people we support who are heavily drinking, are obese or have chronic hepatitis B or hep C virus infection.

Increasing numbers in treatment for alcohol suggested that a high proportion of the people Turning Point supports would benefit from the offer of a FibroScan exam to support earlier assessment and intervention. Over several years now Turning Point colleagues have been offering FibroScan in the community, in people's homes via a mobile couch and machine and as part of our work with the army barracks in Chatham.

From a pilot run by our Leicestershire, Leicester and Rutland service from August 2021 to January 2022 we found people we support who had results indicating advanced fibrosis, cirrhosis and fatty liver changes, otherwise unknown to them or their GP.

The benefits of offering scans have been clear in assisting the prevention of alcohol related liver disease via earlier prevention through access to assessment of liver health through quick and non-invasive MR Electrography Liver Fibrosis assessment, reducing the need for biopsy to support accurate diagnosis and identification of liver disease. The approach has improved integrated care by supporting more individuals who may be hard to reach or higher risk and vulnerable to access liver assessment and provide earlier referral/access to specialist liver care and treatment. We have enhanced partnership working with primary and secondary care in relation to liver care and treatment, information sharing, multi-agency clinical assessment and our treatment offer.

In the future our plans are to run fully funded FibroScan exams routinely to those entering treatment with Turning Point, expand links with primary care and broaden its reach to more diverse communities via established recovery networks.

The approach has improved integrated care by supporting more individuals who may be hard to reach or higher risk and vulnerable.

24 https://britishlivertrust.org.uk/about-us/media-centre/statistics/

CASE STUDY

Dry Barracks, Medway

Following a health fair event at the Army Barracks in Chatham, Turning Point's substance misuse team have been working closely with military personnel on the base to support soldiers to become alcohol and drug free. The team worked with a Sergeant and military medical team to devise a clinic that would be a safe space for barracks personnel to discuss their alcohol and/or drug use, to access information about harm reduction and to undertake a scan of their liver, using FibroScan, to ascertain any damage that existed.

The first clinic held had 20 military personnel booked in and successfully scanned using the FibroScan. All 20 personnel results were given to the military medical team. Motivational interventions were given to each person in order to address their alcohol and drug use. Further clinics have been scheduled, taking place monthly from April 2022, for new personnel and to undertake regular reviews of those already engaging. This proactive approach with the armed forces to support high risk and dependent substance misuse and to prevent increasing or escalating use, is a demonstration of the flexible evidence-based approach taken by our clinical team.

Connecting services for those with complex needs

For nearly 60 years Turning Point has championed and supported those with complex needs, seeking new ways of reaching those seldom heard. The pandemic has bought into sharp focus the country's most vulnerable and underserved groups, enabling us to build on our expertise and existing service models to reach new groups.

Across our mental health and forensic services, we continue to grow levels of peer involvement which is fundamental to our current and future success. Notably we have expanded the reach of our pioneering 'Connect' service in Nottingham and Nottinghamshire, based on the strengths of our peer networks.

Connect is an intensive group and 1-2-1 support programme for people living with personality disorders, with follow-on peer and personal supporter networks building resilience and sustaining positive outcomes. Delivered through a psychology and peer recovery worker partnership, it continues to establish and deliver ground-breaking outcome expectations, with evidence of net savings to health and social care budgets.

The Connect programme enables participants to centre themselves in a crisis and to survive a crisis by identifying their triggers and impulse actions and exploring how to respond instead of reacting.

The course includes elements of dialectical behavioural therapy (DBT), a talking therapy adapted for people who feel emotions very intensely and designed specifically for people diagnosed with a borderline personality disorder.

With referrals from crisis or local mental health teams increasing, this model of support is proving vital.

CASE STUDY

Innovative new drug and alcohol service for Herefordshire

Turning Point was commissioned to deliver an integrated drug and alcohol recovery service for the county of Herefordshire on 1st April 2021. The service provides a holistic treatment model to meet the needs of people accessing the service, including a specific young person's service for ages 11–24, and adult service for those aged 25+.

Self and professional referrals are accepted and provide access to a range of treatment pathways depending on the person's needs. This could be an online programme for non-opiate users, managing alcohol support scheme, or skills development for those affected by opiate and complex drug use.

The service offers access to treatment using a hybrid delivery model of virtual and face-to-face interventions.

Since implementation, the service has developed a unique relationship with local mental health services to offer a dual diagnosis pathway for people with multiple needs.

We have also developed an effective pathway with Probation, offering assessments to determine suitability for community treatment, which informs recommendations by the Probation Officer. Those who are on Alcohol Treatment Requirement (ATR) or Drug Rehabilitation Requirement (DRR) orders receive targeted support in line with their order and engagement is reported back to Probation as part of licence conditions and sentencing arrangements.

Additionally, we have established a link with HMP Prescoed's CHASE programme, which provides an accredited training programme for serving prisoners in open conditions. We currently have three new colleagues pending clearance through this process who are funded via Universal Funding, which we hope will continue beyond the current timescale.

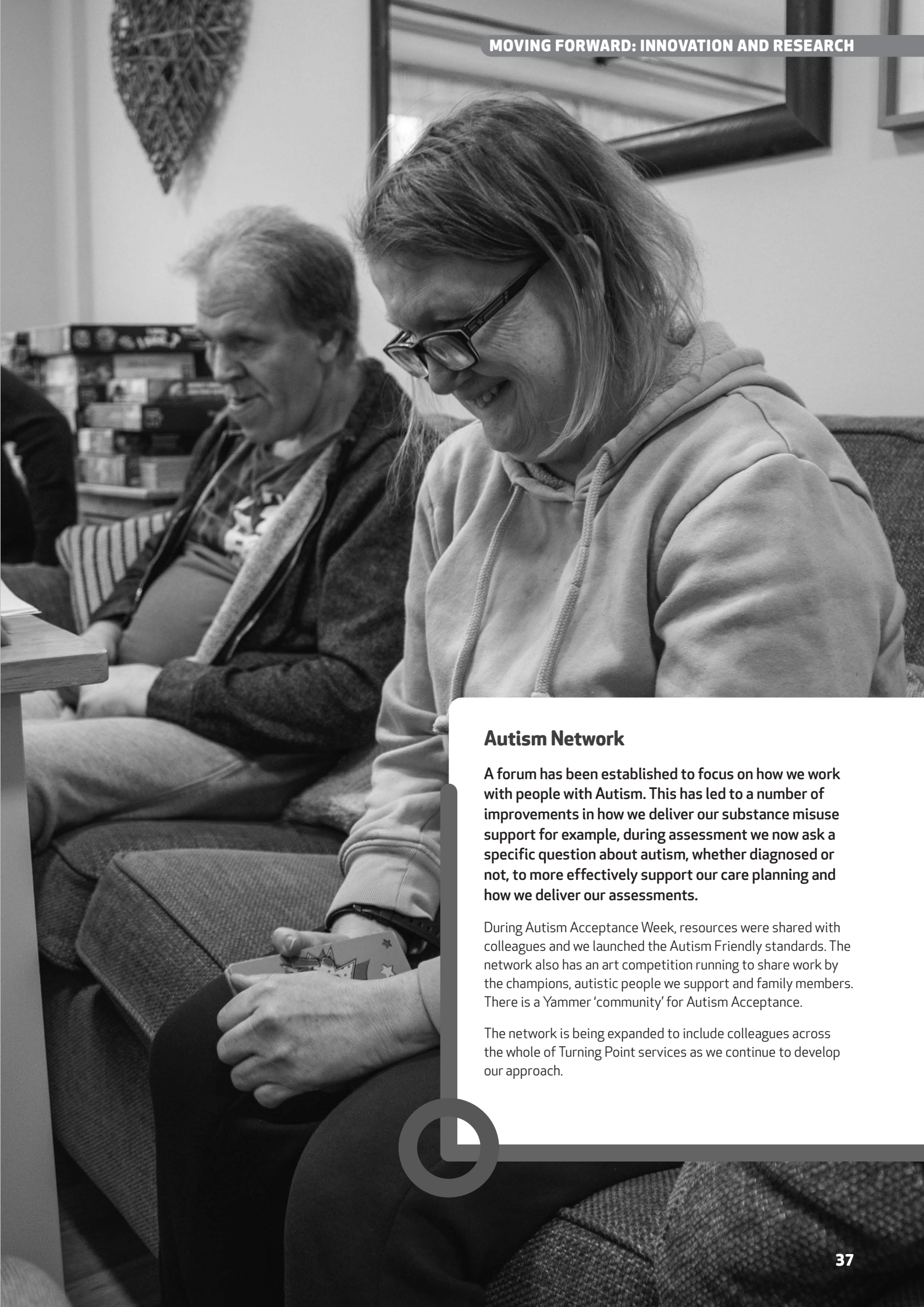
Looking forward, the Young People's service will explore greater awareness of treatment options through promotion in schools and youth centres. The service will utilise social media to further increase awareness and ensure promote harm reduction messages and advice to support young people in their decision making.

There are also plans to purchase a Mobile Outreach Vehicle to enhance the offer of harm reduction advice, needle exchange, naloxone, and other outreach support to more people across the county, with a focus on providing an 'out there, everywhere' offer for people in more remote areas or with limited options to travel to Turning Point hubs.

Dr Victoria Tzortziou-Brown, Non-Executive Director at Turning Point said: "It is awe-inspiring to see the work that Turning Point does. Truly inspired by possibility and believing that everyone has the potential to grow, learn and make choices, if supported. Few organisations show the same level of teamwork, compassion, and commitment to improvement. When talking to Turning Point staff, a quote by Rabindranath Tagore comes to mind: "I slept and dreamt that life was joy. I awoke and saw that life was service. I acted and behold, service was joy."

"It is awe-inspiring to see the work that Turning Point does. Truly inspired by possibility and believing that everyone has the potential to grow, learn and make choices, if supported."

Dr Victoria Tzortziou-Brown, Non-Executive Director at Turning Point



Autism Network

A forum has been established to focus on how we work with people with Autism. This has led to a number of improvements in how we deliver our substance misuse support for example, during assessment we now ask a specific question about autism, whether diagnosed or not, to more effectively support our care planning and how we deliver our assessments.

During Autism Acceptance Week, resources were shared with colleagues and we launched the Autism Friendly standards. The network also has an art competition running to share work by the champions, autistic people we support and family members. There is a Yammer 'community' for Autism Acceptance.

The network is being expanded to include colleagues across the whole of Turning Point services as we continue to develop our approach.

7 Clinical expertise and oversight

The impact of the pandemic on the health and social care workforce has been felt across the whole sector. Turning Point's clinical team – led by our Chief Medical Director, Head of Nursing, Head of Psychology, Head of Medicines Optimisation and Pharmacy Service and other clinicians – have continued to take a leading role across all of our services, informing safe and clinically-led practice while also managing ongoing issues around supply and access to equipment, medications and other supplies that have to be managed.

Psychology-informed services

Since the inception of the Practitioner Psychology team in Turning Point twelve years ago, its function and purpose has been to support colleagues responding to client complexity, particularly with regard to their mental health needs. Our psycho-social interventions model is built on evidence-based therapeutic models for mental health problems, incorporating elements from Dialectical Behaviour Therapy, Acceptance and Commitment Therapy and Compassion Focussed Therapy.

We currently have a team of twelve Forensic, Counselling and Clinical Psychologists, CBT therapists and fourteen Assistant and Senior Assistant Psychologists. In the last year we have focussed on extending the quality and depth of these interventions in a number of ways.

- Within core substance misuse services a key priority has been for colleague teams to work in a trauma-informed way. To avoid this being simply a label, we have distinguished three areas to focus on:

  - The emerging evidence base on the benefits to people we support of routinely asking about experience of trauma, how this has affected them and what they have done in order to survive. Training all frontline substance misuse in the rationale for and use of this approach has been challenging, yet the practice of Routine Enquiry has begun and one of our Lead Clinical Psychologists is working on evaluation of this process with colleagues and clients.

  - Trauma-informed approaches in the provision of specific interventions aimed at supporting clients to stay safe and understand the effects of trauma.

  - The development of Psychologically Informed Environments with marginalised populations, such as those experiencing homelessness. We are drawing on this evidence base to provide guiding principles for service development, for example, in Rough Sleepers projects.

- In accordance with government priorities and increased **funding for clients in the Criminal Justice system**, we have developed psycho-social interventions for Out of Court Disposals and renewed a focus on providing mental health-focussed support for criminal justice clients who often re-present to treatment due to underlying social and mental health issues. An exciting development in this regard has been the development of two Mental Health Requirement services, offering those who offend an opportunity to have a twelve week individually formulated and planned intervention, led by a Clinical Lead Forensic Psychologist.
- Our continued focus on **mental health** has benefited from the creation of two community-based services, which are Practitioner Psychologist-led and represent some interesting opportunities for future implementation and growth. The creation of a mental health team within a substance misuse service in Leicestershire, Leicester and Rutland with dedicated, trained and supervised colleagues has enabled us for the first time to develop and resource a suite of interventions to help clients manage emotional crisis, suicidality and longer-term difficulties with low mood, anxiety, shame and guilt. In our Mental health and learning disability services, the creation of a community-based service for people with diagnoses of personality disorder, staffed by Assistant Psychologists and Support Workers with lived experience has started to produce some fascinating outcomes with an increase in social connectedness and decreased use of statutory services.

There are many more opportunities for psychologically-informed service development and as a team, we are excited to be at the forefront of innovative and evidence-based approaches which will benefit those we support and their families.

Addiction specialists

The importance and training of addiction GPs and Psychiatrists is something Turning Point has long championed and is a key principle within the new drug strategy. Specialist Doctors are essential to the delivery of a safe substance misuse sector yet the loss of training places across the country risks a whole generation of addiction Psychiatrists being lost. Turning Point remains the only third sector organisation to have successfully secured an addiction psychiatry training post. Through collaboration between Health Education England, the NHS and Turning Point, we have put in place a secondment agreement with the Trust with whom Turning Point share the costs of employing, contracting and training a ST4-6 grade doctor. The approach is mutually beneficial to Turning Point and the NHS and most importantly, those accessing substance misuse support.

Our experience demonstrates that third sector organisations can provide high quality training opportunities and should play a bigger role in averting the crisis we face.

In August 2021 one of our London substance misuse services noticed there had been a spike in hospital admissions in relation to drug poisoning from opiates and further reports of fatal overdoses. One of our clinicians contacted Public Health England to advocate for an alert to be placed regarding contaminated heroin providing extensive data on the incidences in Croydon. The service also informed other services in the area about the risks regarding this batch of heroin and there was an extensive campaign to distribute Naloxone to everyone accessing substance misuse services and people using heroin in the Greater London area and prioritising anyone that wasn't in opioid substitute treatment to start/receive medication. This proactive approach undoubtedly prevented an unquantifiable number of drug related deaths.

Turning Point remains the only third sector organisation to have successfully secured an addiction psychiatry training post.

CASE STUDY

Leading on Blood Borne Virus Testing

Following the introduction of restrictions and lockdowns due to COVID-19, blood borne virus (BBV) testing figures dropped drastically. To increase dry blood spot testing and surpass pre-covid figures, we engaged in multiple Hepatitis C virus (HCV) campaigns. In April 2021, an HCV 'Awareness Week' increased awareness of HCV and BBVs, leading to an uptake in testing in April and May. Momentum continued through the summer as we also celebrated World Hepatitis Day in July. We ran our own 'Look After Your Liver' campaign in December 2021 to once again promote HCV testing and treatment, but also increase awareness of liver disease in general, including key causes such as alcohol and poor diet.

Unfortunately, the omicron variant prevented some services from running events for the campaign and contributed to a decline in testing over the winter months. We are working hard to raise BBV testing levels back to the high levels seen in summer 2021, through increased training (virtual and face-to-face), taking part in key campaigns throughout the year, and working closely with services to develop tailored operations plans to achieve micro elimination by the end of 2023.

Supporting planned move-on and discharge from hospital

Unplanned discharges from hospital and the lack of move-on support in the community from secure settings, are significant issues, particularly affecting those with learning disabilities and severe mental ill health. Turning Point supports planned discharges within the best practice guidance.

- A process has been developed within our learning disability services around raising concerns regarding unplanned discharges, an escalation process to the senior clinical team is in development and we work with local managers to support and empower them to advocate and challenge unplanned discharges on behalf of the people we support. We are in a unique position within Turning Point that our clinical infrastructure can support us to amplify rights and address the health inequalities of the people we support with a learning disability.
- There is also a demonstrable need to grow capacity to meet the needs of those with mental health issues. Turning Point's ability to inform and deliver integrated solutions sits well within the context of evolving Integrated Care Systems, especially in support of people with complex co-occurring conditions and co-morbidities.

This expertise secured Turning Point the Greater Manchester Health & Social Care Partnership move-on pilot for people with complex support needs. In this pilot our multidisciplinary team spans nursing, occupational therapy, psychology, social work and housing. They will design innovative person-centric solutions for providers, supporting people who are at risk of placement breakdown or who require seamless multi-agency cooperation to remove move-on barriers. We are confident this will evidence a superior model of integrated working, providing short-term expert assessment and intervention leading to long-term reduction in the need for complex intervention.

- We continue to increase our specialist transitional housing support, retained our two Talking Therapy Services in Wakefield and Luton and delivered significant growth in our crisis and rehabilitation specialist response, prevention and community intervention services. This included expanding our crisis helpline provision in partnership with the NHS in Nottinghamshire and Leicestershire; and delivering new crisis house and café provision in areas such as West Sussex and Manchester.
- In Market Harborough our newest Crisis Café is open to anyone who feels they would benefit from some mental health support, whether they are feeling lonely, anxious, or are finding it hard to manage difficult feelings. The drop-in service will offer a safe space for those who are struggling as well as one-to-one sessions where they can learn practical coping strategies.

Zoe's story

Before I lived in my new home, I used to live in a hospital where there were 14 patients on one ward. In my last hospital it was noisy and it used to make me upset because the other girls were not nice and the staff used to hurt me. They were really strict and did not talk to me very nicely. It made me want to stay in my room all day. I only came out for food and to do my laundry. When I was in hospital I had anorexia, I used to self-harm and I tried to kill myself. I used to feel stuck in hospitals and I knew I didn't want to be that person anymore.

When Turning Point said they would help me I couldn't believe it because they were going to help me get out and I was going to have my own home. I was so excited because I had been waiting for such a long time.

I had some visits with Turning Point but then because of COVID-19 they were only on the computer.

When I came to my home for the first time, I was 'over the moon'. I started to have a good life then. I like my staff; they are kind, friendly, gentle and helpful. My family have always supported me, now I am here I can see them all a lot more.

My cat makes me really happy. I also like going out in the garden – we got really muddy and it was really fun. My garden looks nice and pretty now with some lovely flowers.

"When I came to my home for the first time, I was 'over the moon'. I started to have a good life then."

I have been out of hospital for a year now and I have not self-harmed, I eat all my meals – I even cook with my staff and we choose a menu and go shopping together. I go to all my doctor appointments too, they annoy me a bit but I know they are helping me get better. My staff remind me to take my medicine too.

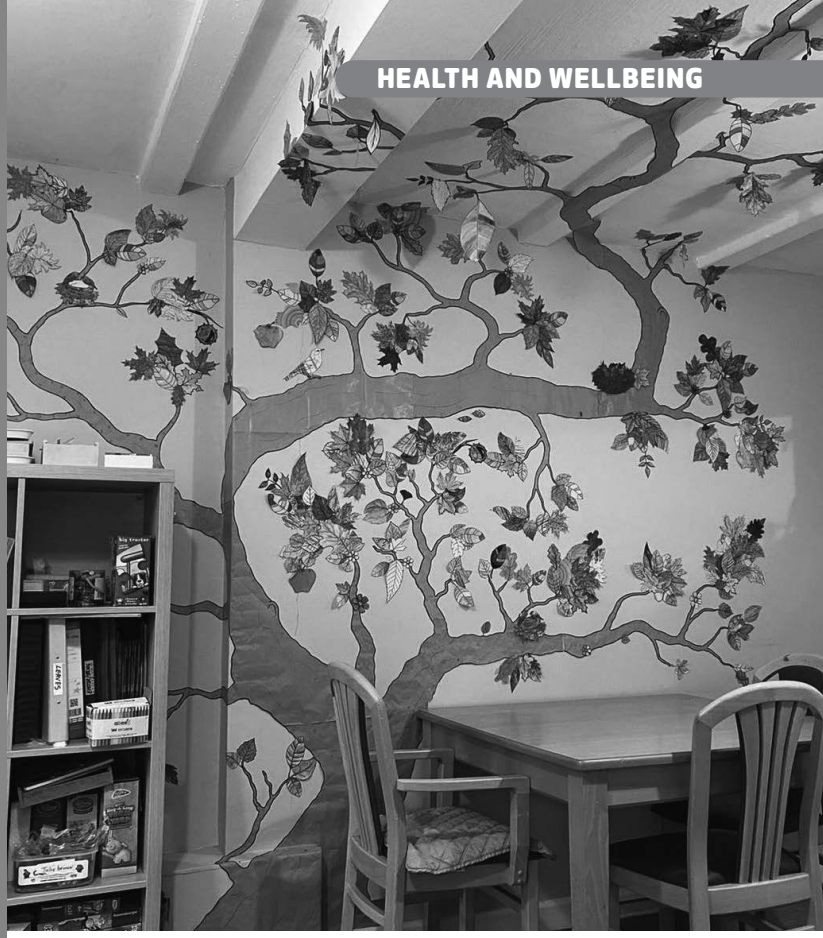
I used to swear a lot but now I have learnt new words. We do lots of reading, we even play games when we are out and I read the signs. Sometimes I get them wrong but I don't care anymore if I get it wrong, I will try again. Staff have helped me understand how I feel too so I can tell them what I like and don't like.

I went to mummy's house on Christmas Day on my own. It was the best day!! My family tell me they are ever so proud of me and my support workers say I am really cheeky and have a funny sense of humour with great banter. I am really thankful for everything they do to help me because now I am always smiling.

8 Health and wellbeing

The health and wellbeing of our colleagues, people we support and the communities we work in is at the heart of everything we do. Over the last decade we have successfully developed health and wellbeing models that address the wider determinants of ill health, such as financial stability, safe housing and access to health services, along with bespoke interventions that promote healthy lifestyles. These have never been more relevant, as we move beyond COVID-19 into a new normal.

We also place high importance on peer support – whether that's through formal interventions or informal interactions.



CASE STUDY

Art combatting isolation

A small residential care home on the outskirts of Buntingford, Hertfordshire, has been using arts and crafts to cope with isolation for over a year since all the residents have learning disabilities and are considered medically vulnerable.

All the residents at Brickfield Cottage have relied upon each other and colleagues to pass the time and keep themselves busy. Like many people stuck indoors, crafts and activities have helped them manage the time they would have spent outdoors, meeting loved ones, or visiting places they enjoy.

Susan, who lives at Brickfield, explains: "The dining room is the hub of our home, and we all spend a lot of time there – eating, drinking, listening to music, playing games, doing activities and socialising. We are transforming the space through art into a wooded wonderland. I have been so passionate about this project. Every leaf, flower, and animal you see in the photos has been made by me and the creative team. I support my housemates to create additions to the project, as well as encouraging members of the staff team to join in and even prompting family members to contribute – they've sent leaves to us through the post!"

"When the outside world has been off limits to us, we've been able to bring it indoors. It has bought joy and happiness to everyone living here and colleagues at Brickfield Cottage. I am exceptionally proud of the work by Susan and all the other residents."

Joe
Manager at Brickfield

Healthy Lifestyles

Leading a healthy lifestyle is essential for everyone in looking after our minds and bodies both now and in the future. For some people we support, making healthy changes such as keeping active, making healthy food choices and stopping smoking, can be particularly challenging.

Our drug and alcohol service "ROAR" in Oldham has been leading the way on healthy lifestyles in partnership with ABL Health, a national Integrated Healthy Lifestyles Service provider. Through the joint recruitment of a Healthy Lifestyle Advisor, dedicated to supporting people struggling with addiction, ROAR has been able to provide:

- In-house stop smoking clinics, tailored to local needs
- MOT health checks, assessing early risk factors for longer term health problems
- Assisted people in accessing five free sessions at the gym, helping them to grow in confidence and strength with the right support

Our substance misuse services also have a range of psycho-social interventions contributing to the wellbeing of individuals and communities, these include programmes on parenting skills, mindfulness and support for carers.

Sabina's story

Stats show that if you feel ready to quit smoking you are three times more likely to succeed with the right support. Sabina is still smoke free after 10 months of getting support from the Total Wellbeing Luton Stop Smoking Service and feeling fitter than ever.

Sabina had been wanting to stop smoking for the last 2–3 years having smoked 8–10 cigarettes a day, for almost 8 years. Her family and sisters in particular had given her lots of encouragement but she had never quite managed to quit for good. Finally, however, she realised she needed to stop.

"One day I just woke up, smoked the last of my cigarettes and I just said to myself, 'that's it'. I called my GP as I felt that was the place that was going to help me do that, but I had to do it – it was my health and my life or cigarettes."

Sabina's GP offered her various options as to how she wanted to take things forward and she picked Total Wellbeing.

Following a phone call to Total Wellbeing Luton, Sabina met with Michelle, Healthy Lifestyles Specialist. "Michelle completed a health check and asked me a few questions about my general health – how long I had been smoking, how many I smoked a day and if I had any health problems – and she explained how everything worked. I had a constant cough and I had lost a lot of weight. I couldn't put it back on and had no appetite, so it was quite difficult for me."

Sabina started on a free prescription product through the service, but not being used to taking tablets and finding them quite strong, she decided to change over to patches after about 10 days.

A key factor in Sabina still being smoke free is the support she received from Michelle. She said: "I have spoken to Michelle so many times – I have never seen such a supportive person in my life. She is so experienced; she knew how to explain things to me and was so good at what she was doing, and so happy and helpful."

Now Sabina no longer feels that a cigarette is the answer to stressful situations, her bank balance has benefitted and she's feeling fitter.

"I feel completely different now and I'm so grateful to Michelle that I met her. I have quit smoking and the cough has disappeared."

Debbie's story

Can you share the difficulties you were experiencing prior to accessing Total Wellbeing Luton?

I lost my son Ben on April 21st 2019. I tried going to the doctors for help a few weeks after and was put on medication. My doctor gave me some contact numbers of organisations that offer support. I did try groups for bereaved mothers and found that they only offered group support and I didn't want to sit in a group with a group of people, I wanted to someone to talk to directly. I sort of gave up at that point to be honest.

What made you come to Total Wellbeing Luton for support?

When I went to the doctors after a few weeks of losing Ben, they put me in touch with the Single Point of Contact. This person spoke to me on the phone and then I didn't hear from them again. Fast forward to last year and I felt like I was dropped by everyone. I contacted Turning Point and had my initial assessment over the phone where they asked me questions about why I reached out. I told the person I don't want CBT or group sessions; I just want someone to speak to. About an hour later I got a call back and had to answer a few more questions. She said a counsellor called Nathaniel will call you back. The person said that Nathaniel is an amazing counsellor reassured me that he would help. Nathaniel called and asked me a few similar questions to what I was asked before and then said that he would be able to support and speak to me weekly. And that's where it started.

Can you discuss your first interaction? How were you treated?

Nathaniel is just amazing. I'll never forget in the first session when he appeared on my screen it was a bit awkward but then we started to talk, and that feeling left, and I felt comfortable. He kept challenging me. No one has ever challenged me before and that's what I needed. It helped me get a different outlook on everything. Nathaniel is in a bag of his own and I would imagine he has saved quite a few lives.

How did you feel during and after getting the support you needed?

I'd have dips in how I'm feeling, and Nathaniel would say that's normal when grieving. He would say there are stages to it and sometimes you do go back.

How has Total Wellbeing Luton and the support you received impacted your life?

It had a massive positive impact on my life. The number of days in the week that I don't want to be here is less than 7 thanks to those sessions with Nathaniel. I would 100% recommend Total Wellbeing Luton to others.

It might not work for everyone as it's not a one size fits all. If there is a spark of hope I would say give it ago, just give it two sessions as there is nothing to lose. Two hours of your time can change a lot.

"It might not work for everyone as it's not a one size fits all. If there is a spark of hope I would say give it ago, just give it two sessions as there is nothing to lose. Two hours of your time can change a lot."

Education

In our SASH (Support and Advice on Sexual Health) London service, free, non-judgemental, and confidential support is provided to improve sexual health, relationships and mental health.

SASH provides bespoke professional training to local partner organisations which helps to provide more diverse and inclusive support. Bespoke educational workshops address sexual health from all aspects such as: women's health, contraception, HIV awareness, STI's, healthy relationships. There are also a wide range of education sessions to young people and people from BAME communities, including comprehensive Relationships and Sex Education (RSE) across local education settings.

Employment

Being in "good work" can help us to maintain our financial wellbeing whilst developing social networks and giving us a sense of purpose. We support people to prepare for and gain employment in many ways across our multitude of services nationally.

"My coach has encouraged and supported me with employment. I am now working in my dream job…I am now settled in a happy and healthy relationship and abstinent from any substance misuse. I would be happy to encourage or speak to anyone struggling with sexual health/chemsex issues to engage with SASH it is a truly wonderful organisation thank you" – (SASH client).

Specialist Social Prescribing

Social prescribing is an approach that aims to tackle unmet socioeconomic needs of individuals, who would otherwise present at their GP. Traditionally this would be connecting patients to community activities, weight loss support and befriending services. While social prescribing is not new, the opportunities it provides to provide community-based, accessible and early support post-pandemic are starting to be realised.

In 2021 Turning Point implemented the UK's first Specialist Social Prescribing Service, targeting patients with more complex social issues, they could for example be homeless, a sex worker, abuse drugs and alcohol, engage in offending behaviour, or come from a traveller community.

Doctors across parts of Birmingham are now able to direct patients who otherwise struggle to access support to a range of health-enabling activities. The scheme is designed to relieve pressure on doctors who have been overwhelmed during Covid and now face a backlog of patients whose health issues may have worsened over lockdowns.

Patients are referred to specialist social prescribers – known as link workers – to help them improve their health, wellbeing and social welfare. The team of five link workers, managed by Turning Point, have a range of experiences in their respective fields providing a significantly higher level of support than seen anywhere else before in the UK.

The multidisciplinary team works together with existing link workers, local services and voluntary, community and social enterprise organisations across Birmingham. This is to ensure people are supported to break down barriers, including stigma, in accessing whatever help they need.

The initiative is a UK first involving 25 GP practices managed by Our Health Partnership (OHP), one of the biggest GP partnerships in England, and Turning Point.

This approach looks to address the situation where vulnerable individuals who present with more than one social issue get passed between services. The hope is that a personalised approach can achieve better results for groups that typically have poor health outcomes. By using the NHS Personalised Model of Care, providing longer appointments, transitional support into services and outreach visits, we can engage with seldom heard individuals. Drug problems, domestic abuse and dementia are just some of the issues supported by our multidisciplinary team of staff who have the expertise and training to identify the right help in the community.

Since going live in August 2021, the team have supported over 380 people to engage with services including Birmingham Healthy Minds, Psychiatry, Housing services including Birmingham City Council and SIFA Fireside, Bernardo's, Bright Sky, RSVP – Rape and Sexual Violence Project, Early Help, New Leaf Recovery Project and Ocean Recovery.

The initiative is a UK first involving 25 GP practices managed by Our Health Partnership (OHP), one of the biggest GP partnerships in England, and Turning Point.

CASE STUDY

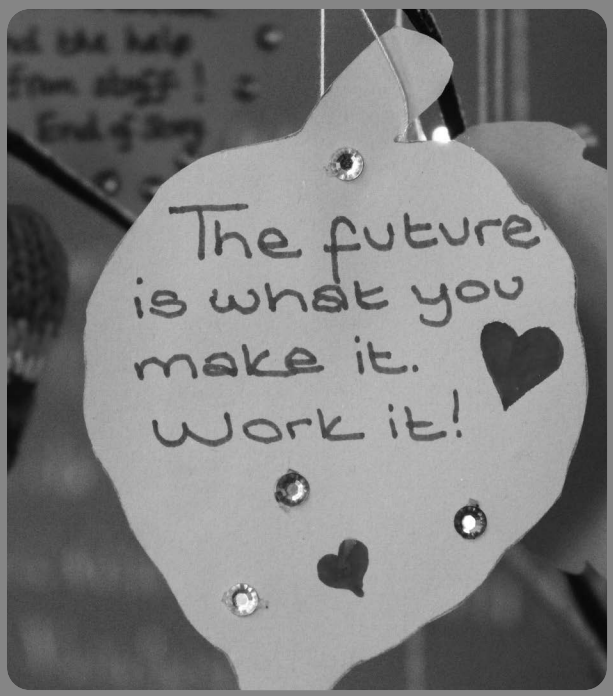
Angel Lace, Nottinghamshire

The Angel Lace Supported Living service in Nottingham commenced 1st June 2021. Angel Lace is a converted building with 13 individual flats and has colleagues area on site for support.

Each flat is fitted out to a high standard and comprise of living, kitchen area, bathroom and bedroom. Turning Point work closely with the residents and their team to understand peoples support needs, and to ensure their move into independent living is as smooth as possible.

Housing: Sam's story

Sam moved into the Angel Lace service in January and a key reason for his move was to enable him to receive and access support during the evening and night as these are the times when he struggles with his mental health, experiencing voices and seeing demons. Where Sam was staying previously was a service which was not staffed 24 hours a day. Since moving into the service Sam has primarily accessed support from the team during the night. Sam says that he has been struggling during the night at times but simply having the knowledge that staff are physically there enables him to manage at these times. Sam's sleep has also improved and he feels that this is due to staff support and the fact that his flat is new, bright and airy rather than a dark and enclosed bedsit; Plus there are benefits to having a nice new double bed which can be a struggle to get out of.



Volunteering: Bob's story

As well as employment, volunteering is another way of improving our own wellbeing and building our skills through giving back to causes that are important to us.

People in Nottingham who experienced Mental Health issues who are currently in residential care settings, experiencing long acute ward stays or have a history of acute ward admissions can access the Angel Lace Supported Living service.

Bob is a resident at Angel Lace who is quite settled with his mental health experience and has been supported to access volunteering opportunities. He is due to commence a volunteering placement with young people in the coming weeks having previously worked in Youth Services a number of years ago. For the last 4 months with the support of his keyworker Bob has been helping an elderly couple who have relocated to the Nottingham area from Hong Kong with learning English. This has given Bob a sense of satisfaction at been able to help others and demonstrates to himself that he can commit to regular appointments with others and have a positive impact which benefits and helps others. This has empowered him in to applying and achieving the volunteer opportunity with young people.

9 Our Social Value

At Turning Point, we are committed to the communities we work with. As a social enterprise, we put people ahead of profit, and any surplus we generate is reinvested into initiatives which support people to improve their health and wellbeing and our drive to tackle health inequalities. We are focused on the importance of maximising social value and creating a positive and lasting impact in all that we do.

For Turning Point, social value is the added value our services can provide for the economy, community life, the health of the local population and the environment.

The COVID-19 pandemic has highlighted just how important the health and social care sector is and the social value it provides in our society. As such, social value is now, more than ever, an integral part of our provision. Our commitment to being 'inspired by possibility' and delivering the best for those we support, and our communities is what makes this topic so important to us.

In 2020, we created a social value strategy for 2020–22. This set out our commitment to social value, our vision and our strategic objectives as well as setting out our goals over the longer-term in the areas of economy, wellbeing, community, and environment.

The COVID-19 pandemic has highlighted just how important the health and social care sector is and the social value it provides in our society.

WELLBEING

Tackling health inequalities and improving services for people with complex needs

In response to feedback from the people who access our services, Turning Point published a new guide in July 2021 for practitioners working with people with co-existing substance misuse and mental health issues.

Research estimates that 70% of people in drug services and 86% of people in alcohol services have experienced mental health problems in the past year. It's common for someone receiving support for drug and/or alcohol problems to also be experiencing mental health difficulties. Unfortunately, this isn't always reflected in the way services operate.

The Substance Use Mental Health (SUMH) Resource Pack aims to provide resources and a set of operating principles which frontline colleagues, managers and commissioners working in community drug and alcohol and mental health services can use to guide practice in what is a fragmented and complex environment.

The pack includes questions to help practitioners reflect on working arrangements in their localities and areas for improvement, as well as good practice case studies from the NHS, Turning Point and other third sector organisations across the country.

Despite changing attitudes amongst the public towards mental health and government commitments to increase investment, mental health services continue to struggle to meet demand. The recently published Dame Carol Black review shone a light on the gaps between mental health and substance misuse services; Turning Point hopes this guide will provide some practical ideas on collaborating more effectively.

CASE STUDY

Defibrillators

As part of our commitment to the physical health of those we support and the communities we work in, Turning Point is putting defibrillators in all of our substance misuse community services and some of our mental health services.

Where possible we will ensure access to the wider community to add to our social value offer and the community benefits this life-saving equipment can bring.

COMMUNITY

Supporting the local community voluntary sector to thrive

In 2021/22 we spent £3.38m with local community and voluntary organisations through our supply chain.

We have established partnerships with a number of organisations and we are committed to supporting them to grow and develop. A good example is the lived experience recovery organisation Dear Albert which has grown significantly over the lifetime of our partnership. Turning Point works collaboratively with Dear Albert in Leicester to support and deliver a strong recovery network.

Dear Albert delivers Turning Point's aftercare support in Leicester City where those that have finished treatment with us and are on their next part of their recovery can engage in peer support, mutual aid groups and interests. This is an opportunity to have the best possible support in the first six month of their recovery, using this to assist in reducing lapses and relapses, by mutual assistance and recovery groups with like-minded peers. Turning Point support this engagement with Dear Albert as we recognise the benefits of local community groups supporting those that want help and those in recovery and we also encourage them to access the range of support available be it the writers' group, arts group or women's group just to name a few.

Dear Albert and the recovery community, supported by Turning Point are the driving force of our successful recovery week in Leicester which has a great following and gets better every year.

In 2021/22 we spent £3.38m with local community and voluntary organisations through our supply chain.

ECONOMY

Creating employment opportunities for people at the margins

At Turning Point we know the value of employment opportunities in promoting good health and wellbeing. Last year we supported 1,251 people to access new education, training or employment opportunities, with over 10% finding paid work as a result. Forty-one of our peer mentor volunteers moved into paid work over the past year.

Crisis Cafés provide a warm and welcoming space for those experiencing mental health difficulties. Turning Point's Mental Health Recovery Workers provide practical and emotional support to people whilst empowering them and supporting them to build on their strengths and resilience. The team all have lived experience of mental health issues which means the Crisis Cafés are creating a fantastic route into employment for people who have used mental health services in the past as well as creating an invaluable space where individuals feel accepted and understood.

Last year we supported 1,251 people to access new education, training or employment opportunities, with over 10% finding paid work as a result.

In many of our substance misuse services we have a dedicated criminal justice teams who will support individuals to rebuild their lives once they have come out of the system. This includes supporting people to access education, training or employment opportunities.

One of the individuals referred to our substance misuse service in Herefordshire on release from prison said:

"After nearly a year in prison I had to re-think what my life would be when I got out. I could not go on as I was. When I started working with Probation and Turning Point, I was open and honest, trying to take one day at a time.

"My recovery worker gave me tips and guidance, and soon I was four months into treatment and doing well."

Being honest with myself and everyone else made the difference. I am now over 2 years abstinent and studying to become a support worker."

ENVIRONMENT

Playing our part in tackling the climate emergency

- **Switching to a green energy tariff:** In line with Turning Point's commitment to monitoring and minimising its environmental impact Turning Point transitioned to electric green energy as of April 2022.
- **Reduced waste and increased recycling:** The procurement team is continuing to work with our waste provider – Wynsdale – to migrate all Services to one central agreement from April 2022 for both general and clinical waste which will drive increased recycling. The aim is to increase recycling bins and reduce general waste bins with a target 75% and potential savings of 10%.
- Turning Point joined **The Big Plastic Count** campaign which seeks to help push the government, brands and supermarkets to take bold action to tackle the plastic crisis. The campaign asked people to count the plastic they consumed in the week commencing 16th May 2022 to raise awareness of waste.

10 Involvement and engagement

Involvement and the engagement of our colleagues, carers and families, our local communities and most importantly the people we support make us who we are.

Our surveys, regional people's parliaments, networks and forums, all encourage the people we support and colleagues to regularly provide their feedback, raise any concerns they have and make suggestions about the support we provide. Engagement with all colleagues is outlined in the 'Turning Point team' section of this report, with the below evidencing some of the many ways Turning Point has encouraged and prioritised feedback from the people we support over the last year.

A National Council for people accessing our substance misuse services

Talk of a National Service User Council (NSUC) began in February 2021. The idea was promoted through all Turning Point Substance Misuse Services and the first meeting was held in June 2021.

The Council is made up of nine people who represent people who use our services across the country. There are peer mentors, people we support and a representative from our Family and Carer's service.

The Council has achieved much in a short time. It has:

- established the remit of the Council
- designed their own training programme
- completed consultation exercises
- started planning a Service User Conference for 2023
- written their own Terms of Reference
- started to look at stigma and how to influence culture change through language and asset-based conversations.
- recruited new members.

The Council is in the process of developing a Plan of Works for 2022–23.

Co-production is never a straight-line process, but it is an inspiring one, and the level of commitment, enthusiasm, challenge and desire of every member of the Council to serve other people is astounding.

Turning Point is also looking to take a test & learn approach to a new feedback form that would seek to collect feedback from those using our services across a number of key questions which are akin to the NHS Friends & Family Test.

Co-production is never a straight-line process, but it is an inspiring one, and the level of commitment, enthusiasm, challenge and desire of every member of the Council to serve other people is astounding.

Always in partnership with people who have learning disabilities

In 2021–22, people we support with a learning disability broadened the opportunities in which they and others can be involved in the work we do at Turning Point.

Through consultation and collaboration, ten new workstreams were identified and prioritised by people we support, choosing the topics that matter to them. Amongst other things, some themes they chose to focus on include:

- Developing **communication** methods, including accessibility of documentation, forms, Easy Read, newsletters
- Involvement in **quality** checking and assurance
- Cooking and **food** waste
- Additional **training** for colleagues
- **Sharing** their experience with others – "My First Year"

A team of colleagues at Turning Point has been formed to help support this new approach and help mobilise each workstream.

What I want from my support worker

An exciting development sitting within these workstreams is a project which was initiated by two services in Warwickshire and Cumbria – "What I want from my support worker". A video has been made by people we support to initially be used with new colleagues as part of their induction. Whether new to social care or not, this video will help to welcome new colleagues to Turning Point by the very people who are already being supported. They will be helped from the very beginning of their journey with Turning Point by people with lived experience, guiding their experience and practice in making sure each individual receives the right support for them.

Peer Ambassadors

The effects of COVID-19 continued to disproportionately affect the lives of people with a learning disability. People we support told us that their full health and wellbeing needs weren't being met through continued reduced access to services and activities in the communities that create meaningful activity and social connections.

To help accelerate our response to this feedback we were successfully granted funding from NHS England to carry out a project which incorporated the positioning of Peer Ambassadors in local services from the population of people we support. The Peer Ambassador role has been developed to:

- Lead and inform health and wellbeing activities
- Advocate actions including vaccinations and screening
- Explore new opportunities
- Engage in continuous improvement
- Deliver in-reach and outreach engagement opportunities

To date we have been able to co-produce inclusive recruitment and induction practices to support the Peer Ambassadors within their role, including the promotion of Support Workers into the role of Health Champions who will work with and support the Ambassadors.

Already the project has put a spotlight on improving health literacy amongst people with a learning disability, helping to improve control over their own health and to feel comfortable in accessing the services and opportunities they want and need.

It remains true that people with a learning disability experience inequalities in healthcare provision and often experience poorer health. We prioritised tackling the systemic barriers such as exclusion from decision-making and planning, missed observation of deteriorating health, diagnostic overshadowing, inconsistent responses to communication and behavioural considerations, and the need for personalised desensitisation strategies to access to healthcare opportunities.

Over 2021 we conducted a comprehensive survey of self-rated wellbeing and experience of received healthcare. As well as providing insight into psychological and social impacts of the pandemic, it highlighted prevailing inequalities experienced by the hidden majority. As a result of the survey, we published 'Supporting Health' – a comprehensive handbook for health and wellbeing. We launched 'Happy and Healthy?' to be an ongoing person-centric review of physical, emotional, social and community aspects of individual health and wellbeing. We secured a grant from NHS England to fund the deployment of health and wellbeing champions and to develop peer ambassadors for better health awareness and choices across our services.

Cameron's story

Cameron, who has a diagnosis of autism, moved into his new home in Northumberland on the 1st May 2021. Prior to this he lived in the family home, with support from his sister following the death of their father who he'd previously lived with.

Cameron led a sheltered life. He missed out on having life and social experiences like others in his age group.

Soon after moving, it was evident that Cameron was keen to develop his independent living and social skills and was quickly using public transport alone and exploring his local area. He began cooking for himself and started doing his own laundry.

Cameron became friendly with an online group who performed livestream internet DJ-ing and mixing dance music.

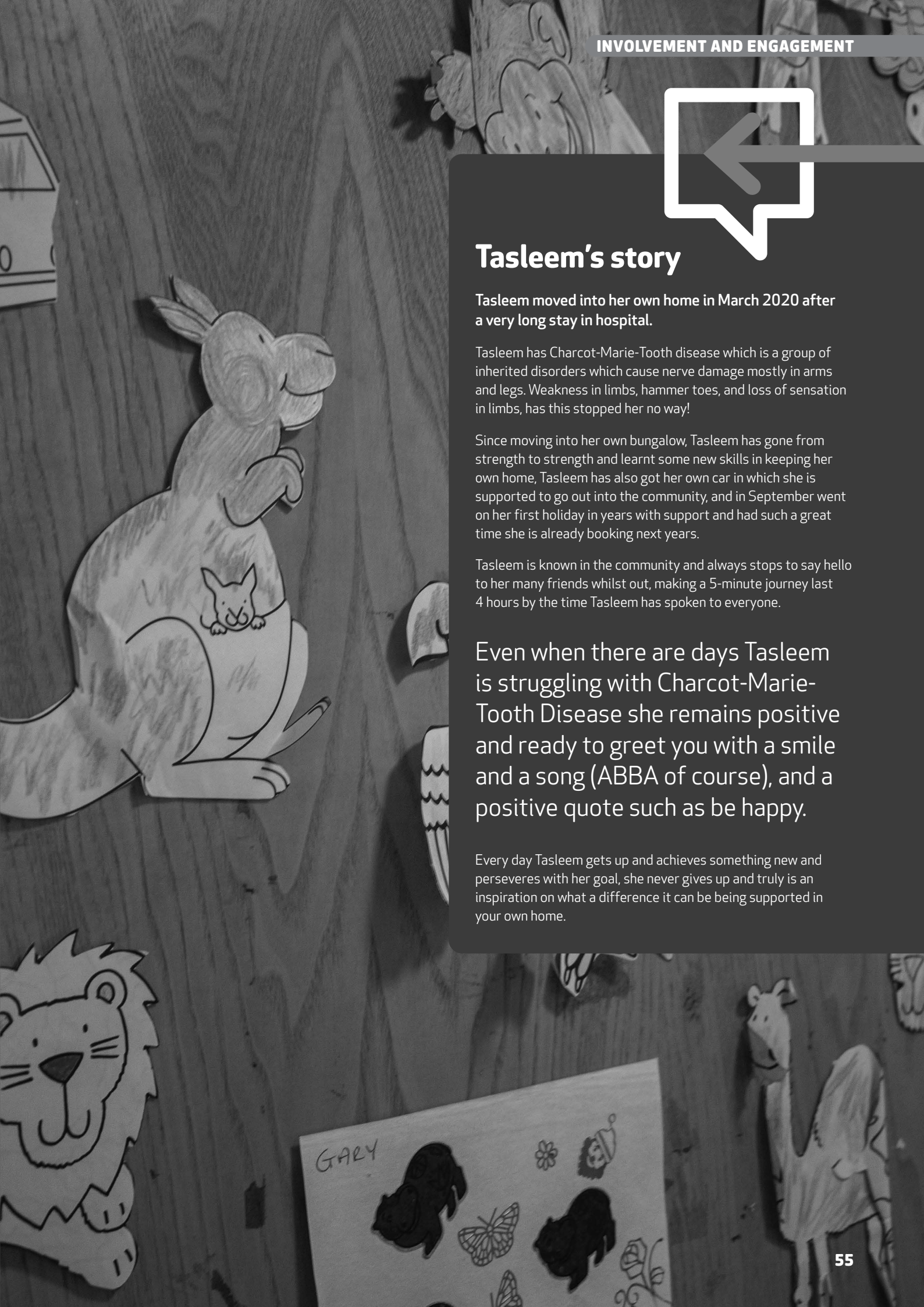
In October 2021 he told colleagues that he planned to attend a New Year's Eve Party with his friends in a city which is over 60 miles away from home. His family were very concerned and didn't want the trip to go ahead. Cameron became very unhappy and frustrated however he was not deterred.

Colleagues continued to work on building a trusting relationship with Cameron and he eventually agreed to accept support from colleagues. Following a visit to the city and a meeting with one of his friends, it turned out that the party was a livestream DJ-ing event between six men, including Cameron, who are all on the autistic spectrum. The six men had built up their own support group and shared their love of music. They had also planned and prepared for the event to be safe. They had taken into consideration, sleeping arrangements, rest breaks, food and refreshments. Additionally, they had all agreed to meet up outside in the open and each take LFT COVID-19 tests.

Cameron worked with colleagues to produce a risk assessment and contingency plan which was presented to and agreed and signed off by Social Services.

On 31st Dec 2021, Cameron independently made the 60-mile journey and met up with his friends. Apart from having a fantastic time and sticking to what was agreed in the risk assessment, Cameron hosted his first ever livestream DJ gig and 'totally smashed it'.

Since his return, Cameron has been a different person. His relationship with colleagues and the other house mates has improved greatly. He often talks about the event and what a great experience he had. His confidence and desire to lead a meaningful active life has grown immeasurably which has been a pleasure to witness.



Tasleem's story

Tasleem moved into her own home in March 2020 after a very long stay in hospital.

Tasleem has Charcot-Marie-Tooth disease which is a group of inherited disorders which cause nerve damage mostly in arms and legs. Weakness in limbs, hammer toes, and loss of sensation in limbs, has this stopped her no way!

Since moving into her own bungalow, Tasleem has gone from strength to strength and learnt some new skills in keeping her own home, Tasleem has also got her own car in which she is supported to go out into the community, and in September went on her first holiday in years with support and had such a great time she is already booking next years.

Tasleem is known in the community and always stops to say hello to her many friends whilst out, making a 5-minute journey last 4 hours by the time Tasleem has spoken to everyone.

Even when there are days Tasleem is struggling with Charcot-Marie-Tooth Disease she remains positive and ready to greet you with a smile and a song (ABBA of course), and a positive quote such as be happy.

Every day Tasleem gets up and achieves something new and perseveres with her goal, she never gives up and truly is an inspiration on what a difference it can be being supported in your own home.

11 Risk management

Principal risks and uncertainties

Turning Point operates in a business with significant risks. The people we support can have mental health conditions and learning disabilities requiring intensive support, or substance dependency requiring clinical prescribing of medicines.

Principal risk or uncertainty	Mitigation & Controls	Movement
Financial risk: Possible loss of contract income due to highly competitive operational environment.	Corporate Strategy & Commercial Ventures plans. Investment in cost control measures and robust financial monitoring. Regular assessment and monitoring of the quality of service and performance.	Increase
Operational risk: By the very nature of the contracts undertaken the people supported through those service contracts are often adults at risk of self-harm, injury, abuse and even death.	Investment in robust clinical governance frameworks, policies and procedures (including health & safety) that meet or exceed regulatory requirements. Comprehensive risk management and incident reporting and monitoring systems.	No change
Cyber Security: Increasing dependency on technology systems gives rise to cyber risk comprising the risk of financial loss, disruption to business operations or potential damage to the reputation of the organisation from a failure of information technology systems. **Information security:** Increasing reliance on data, information held in systems gives rise to information security risk leading to potential Data Protection Act breaches and harm to data subjects as well as potential damage to the reputation of the organisation.	Implementation of a robust information security model drawing upon the ISO27001 standard, Control Objectives for Information Technologies (COBIT 2019), NHS Data Security & Protection Toolkit, Centre for Internet Security (CIS Top 20) and Cyber Essentials. The organisation is ISO27001 certified and working towards Cyber Essentials certification. Investment in a Data Protection Officer and implementation of robust policies and awareness training serves to minimise risk from social engineering.	Increase
Strategic: Changes in government policy, continuing public sector funding cuts in a challenging economic trading environment.	PESTLE analysis. Business plans. Commitment to the principles of emergent strategy, being agile and responsive to market risks and opportunities.	No change
People: Our people are our most important asset and the primary means through which we are able to add value to the lives of the people we support. Within a low margin business and increasingly competitive market, this presents risks around the recruitment, retention and development of colleagues.	We benchmark our pay and benefits across the sector. We have appropriate recognition and development opportunities. Succession planning and talent mapping for critical roles. Recruitment and attraction strategy aligned with the outcomes of our talent management process.	Increase

Internal Controls Assurance

The Board recognises that no system of internal control can provide absolute assurance or eliminate all risk. The system of internal controls is designed to manage risk to an acceptable level and to provide reasonable assurance that key business objectives and expected strategic outcomes will be achieved.

The Board confirms that the process for identifying, evaluating and managing the significant risks faced by the company is on-going, has been in place for the whole of the financial year and up to the date of approval of the annual financial statements, and is regularly reviewed by the Board.

The company adopts a "three lines of assurance" model for risk management. The board has reviewed the effectiveness of the system of internal controls in existence for the year ended March 2022 and until the date of approval of these accounts. No significant weaknesses were found in the internal controls that resulted in material losses, contingencies or uncertainties that required disclosure in the financial statement or in the auditor's report on the financial statements.

Emerging Risks

The Operating Board considers long term trends in the social care sector that could present both risk and opportunity for the organisation.

Any new emerging risks identified by the management are considered in detail and reported to the Board.

Trustees Report

Chair's introduction

The Board of Directors presents their annual accounts and reports for the year ending 31 March 2022.

Since April 2019 the Board has adopted the Wates Corporate Governance Principles for large private companies as the framework. The table on page 63 summarises how we have applied the Wates Principles.

This year the Board has increased its focus on stakeholder engagement, including the people we support, the communities in which they live, colleagues, and suppliers. Further information about stakeholder engagement can be found on page 14.

The following pages set out the composition of the Board of Directors, the Operating Board and sets out our corporate governance arrangements, processes and activities throughout the year for the Board and the Committees.

We have strengthened our Board with the appointment of Dr. Victoria Tzortziou Brown who joined the Board in May 2021.

Our Board of Trustees approved this report on 26 July 2022.

Peter Hay
Chair of the
Turning Point Board

Our Board of Directors

Executive Board Members

Julie Bass, Chief Executive

Julie has been an executive board director at Turning Point since 2009 and now holds the position of Chief Executive from April 2020. Prior to this Julie worked in financial services in the UK and overseas in a wide variety of roles including holding responsibility for strategy, organisational effectiveness, performance and development and people related functions. She is passionate about supporting individuals to discover new possibilities in their lives through the provision of high quality, constantly evolving services and interactions. Julie is a Chartered Insurer and a fellow of the Chartered Institute of Personnel and Development.

Amarjit Dhillon, Chief Information Officer

Amarjit joined Turning Point in March 2014 as Chief Information Officer with accountability for Commercial Ventures since September 2018 and was appointed as an executive board member in April 2020. Amarjit trained as a technologist in the NHS and then moved into the corporate sector where he specialised in directing transformation and change in global organisations. He has technology and information management experience as well as time spent in production and operations management, sales and customer facing roles. Amarjit is a non-executive director for a housing association. He is a Chartered Engineer, a Chartered IT Professional and a Fellow of the British Computer Society and a Member of the Institution of Engineering and Technology.

Non-Executive Board Members

Peter Hay, CBE, Chair of the Board

Peter became Chair of Turning Point Board in September 2018. After a long career as a director of social care services, and a past president of the Association of Directors of Adult Social Services, Peter is now pursuing a range of interests in different roles across social care, housing and wellbeing. Peter is curious about ways of developing people's control over their own health and wellbeing, passionate about building good lives and fascinated by the leadership styles that support these aims. Peter was awarded a CBE in 2012 for services to health and care.

Nicola Gilham

Nicola joined the Turning Point Board in May 2018. She also sits on the Audit Committee. As a qualified chartered accountant, she enjoyed her first career with Arthur Andersen where, for many years, she led consulting assignments, both in the UK and overseas. Whilst living in Australia, she moved into recruitment and worked in the sector for over twenty years. Nicola now pursues a portfolio non-executive career working for businesses across health and social care. She also has a long-standing interest in her local community. As such, currently, she is non-executive director for the Vale of Aylesbury Housing Trust, a provider of social housing for 21,000 residents, Brighter Futures for Children in Reading which runs Children's Services for the Borough, and also the Buckinghamshire Healthcare NHS Trust. She is Vice Chair of Child Bereavement UK, and separately she spent several years, in a voluntary capacity, as a telephone counsellor for emotional support services.

Paul Picknett, Chair of the Audit, Risk & Quality Committee

Paul joined the Turning Point Board in March 2014 after working in financial services for more than 30 years both in the UK and overseas. His career included 14 years as a main board director of Groupama Insurance company, where he was Corporate Services Director. He has been actively involved in a number of strategic acquisitions, including the acquisition of an award-winning healthcare operation. He is Trustee Chair of a pension scheme with assets over £310m. He has a degree in management studies and is a Fellow of the Chartered Insurance Institute.

Dr. Christian Van Stolk

Christian joined the board in December 2020. He has worked extensively on health and wellbeing in the workplace including research on improving the health and wellbeing of staff in the National Health Service in the UK, maintaining and gaining employment for those with common mental health conditions, building an evidence base for health interventions in workplace settings, and looking at the relationship between productivity and health and wellbeing outcomes.

Christian sits on several expert panels for the UK government including those on occupational health, mental health, and employee health and wellbeing in the NHS. He holds a Ph.D. from the London School of Economics and Political Science and fellowships at the Royal Society of Medicine and Royal Society of the Arts.

Dr. Victoria Tzortziou Brown

Victoria joined the Turning Point Board in May 2021. Victoria is an east London GP and also the Research Lead of East London Health and Care Partnership. In her academic role at Barts and The London School of Medicine and Dentistry, Victoria undertakes research on the design and evaluation of healthcare interventions and their impact on professional behaviour and health inequalities.

Victoria is also the Royal College of General Practitioners joint Honorary Secretary, a director at Healthcare Quality Improvement Partnership (HQIP) and a Founding Senior Fellow and Council member of the Faculty of Medical Leadership and Management. She has extensive clinical commissioning experience and served as a board member and clinical vice chair of the Tower Hamlets Clinical Commissioning Group.

Victoria is a Council member of the Faculty of Sexual and Reproductive Health. She also sits at the Council of the Faculty of Sport and Exercise Medicine and has a clinical and research interest in musculoskeletal medicine and education.

Structure, governance and management

Turning Point is a registered charity incorporated under Companies Act, being a Private Company limited by guarantee and not having a share capital. The governing document is the Articles of Association.

Subsidiary companies

Turning Point has one wholly owned subsidiary, Turning Point (Services) Limited which is the trading arm of the parent charity. The subsidiary board meets twice a year is and has a board composition of five directors from the Turning Point board and two independent directors.

Turning Point also had a 50% shareholding in Northern Pathways Limited with The Retreat York. Northern Pathways Limited ceased trading on 31 March 2019 and the application for strike off was approved by Northern Pathways board in its meeting held on 5 January 2022. The strike off application was filed at Companies House on 12 January 2022 and the company dissolved on 12 April 2022.

Turning Point Board meetings

The Turning Point Board met formally six times between April 2021 and March 2022. Board meetings are ordinarily face to face but have largely taken place by video conference via Microsoft Teams in 2021 due to the COVID-19 pandemic. The Board met face to face in November 2021 and March 2022.

Board attendance in 2021–22	Turning Point
Number of meetings in 2021–22	**6**
Numbers attended:	
Peter Hay (Chair)	5 out of 6
Paul Picknett (Vice Chair)	6
Alison Hill	1 out of 1
Nicola Gilham	6
Julie Bass	6
Amarjit Dhillon	6
Christian Van Stolk	4 out of 6
Victoria Tzortziou Brown	5 out of 6

Board appointment

The directors of Turning Point form a unitary board of non-executive and executive members as defined by the Articles of Association. The directors are also the Trustees under charity law. Executive members are appointed according to the terms of their employment with the company under a Relevant Qualifying Position. Non-executive members are appointed by the board following an open recruitment process overseen by the Nomination Committee. Directors are appointed for a three-year term with the option to be reappointed to a second term on a vote of the Board. Directors can, following sufficient review, be appointed to a third three-year term should circumstances require this. Newly appointed directors go through an induction process that includes service visits, meetings with key senior managers and other directors of the board. There is also an introduction to the regulatory and market environment, the strategic intent of the company and the associated risk and challenges.

Dr. Victoria Tzortziou Brown was appointed as Non-Executive Director of Turning Point on 11 May 2021.

Statement of Directors' Responsibilities

The directors are responsible for preparing the Annual Report and the Financial Statements in accordance with applicable law and regulation.

Company law and requires directors to prepare financial statements for each year which give a true and fair view of the state of affairs of the company and of the income and expenditure for the period of account.

In preparing these financial statements, the Board is required to:

- Select suitable accounting policies and then apply them consistently;
- Make judgements and estimates that are reasonable and prudent;
- State whether applicable accounting standards have been followed, subject to any material departures disclosed and explained in the financial statements; and
- Prepare the financial statements on the going concern basis, unless it is inappropriate to presume that the charity will continue in business.

The Board is responsible for keeping proper accounting records which disclose with reasonable accuracy at any time the financial position of the Charity and enable it to ensure that the financial statements comply with the Companies Act 2006, Charities Act 2011 and the Housing and Regeneration Act 2008, Housing SORP 2018 and the Accounting Direction for Private Registered Providers of Social Housing 2019. The Directors are also responsible for safeguarding the assets of the company and hence for taking reasonable steps for the prevention and detection of fraud and other irregularities.

Board effectiveness

Turning Point Board conducts annual effectiveness reviews every year on a 3-year cycle with an externally facilitated triennial review which the Board considers important in the identification of key areas for improvements, focus and for strengthening its overall performance.

The last externally facilitated review was conducted by White Water Group in 2020, which was reviewed by the Board in January 2021 due to delays because of the pandemic. Next triennial review will be conducted in 2023.

At the beginning of 2022, the board carried out an internal board effectiveness evaluation via a self-assessment questionnaire focussed on key areas including strategy, board composition, risk management, stakeholder engagement, agenda management, virtual ways of working and knowledge and information with outcomes reported in May 2022.

Conflicts of interest

Turning Point has a policy in place to manage conflicts of interest. Upon appointment, all directors are required to declare their interests. On an annual basis, all members are asked to update the register of interests, which includes the fit and proper persons requirements. At each meeting of the Board and Audit Risk & Quality Committee, members and attendees are required to state any interests with regard to specific items on the agenda in line with their duties under the Companies Act 2006.

Payments to Directors

Non-executive directors of Turning Point receive remuneration of £7,500 per year for the Chair and £5,000 per year for the other non-executive directors. There has been no increase in non-executive director remuneration during the year. Executive directors are paid for their executive roles and do not receive additional payment for their responsibilities as directors of the organisation. Apart from the reimbursement of expenses entailed in the course of the company's business, there have been no other payments to executive directors in 2021–22.

Corporate Governance Report

For the year ended 31 March 2022, under the Companies (Miscellaneous Reporting) Regulations 2018, the Company has applied the Wates Corporate Governance Principles for Large Private Companies.

Each of the six Wates Principles has been considered individually within the context of the company's specific circumstances and a short supporting statement is set out below to explain how each principle has been applied to achieve better outcomes.

Principal	Summary
Purpose and leadership: An effective Board develops and promotes the purpose of a company, and ensures that its values, strategy and culture align with that purpose.	The Board periodically reviews the Charitable objectives and develops and promotes the purpose through its Strategy. It ensures that its values, strategy and culture align with that purpose.
Board composition: Effective Board composition requires an effective chair and a balance of skills, backgrounds, experience and knowledge, with individual Directors having sufficient capacity to make a valuable contribution. The size of a Board should be guided by the scale and complexity of the company.	The Turning Point Board comprises of Independent Non-Executive Chair, Chief Executive, Chief Information Officer and four Independent Non-Executive Directors. The size and composition of the Board is appropriate to the size, nature and complexity of the Company. The Board has delegated some functions to committees which focuses on audit, risk & quality, and a committee for remuneration. More information regarding committees is included on page 65. There is a process in place for regular Board effectiveness reviews. More information regarding Board effectiveness is included on page 62.
Director responsibilities: The Board and individual Directors should have a clear understanding of their accountability and responsibilities. The Board's policies and procedures should support effective decision-making and independent challenge.	The Board receives regular reports on strategy, financial performance, stakeholder engagement, and management of key business risks along with updates on activities and decisions of its committees. In addition, certain responsibilities are delegated to the committees in accordance with the approved Governance Standing Orders. At each Board meeting, all Directors are asked to declare any potential conflict of interest. Any declaration is noted and where there are potential conflicts, appropriate safeguards are implemented.
Opportunity and risk: A Board should promote the long-term sustainable success of the company by identifying opportunities to create and preserve value, and establishing oversight for the identification and mitigation of risks.	The Board seeks out opportunity while mitigating risk. The Board annually discusses emergent strategy and the operational performance at the Board away day. The Audit Risk & Quality Committee, consisting of Independent Non-Executive Directors receives assurance report from the internal and external auditors. Material risks are identified and managed and where required the substantive issues are escalated to the Board. The principal risks of the company are set out on page 56.

Corporate Governance Report

Principal	Summary
Remuneration: A Board should promote executive remuneration structures aligned to the long-term sustainable success of the company, taking into account pay and conditions elsewhere in the company.	The Remuneration Committee has clearly defined terms of reference and is responsible for determining remuneration. The Committee considers benchmarking data and where appropriate advice from external consultants. The Company updated the Trustee benefit clause in the Articles of Association after receiving written consent from the Charity Commission. More information regarding Committees is included on page 65.
Stakeholder relationships and engagement: Directors should foster effective shareholder relationships aligned to the company's purpose. The Board is responsible for overseeing meaningful engagement with stakeholders, including the workforce, and having regard to their views when taking decisions.	Accountability and transparency with stakeholders is key to the long term success of the Group. The Section 172(1) Statement on page 14 sets out the details of some of the engagements that take place at the operational or group level with the key stakeholders.

Our people

In 2021–22 COVID-19 was still present in our lives and health and wellbeing continued to be a focus for our organisation and people. Working remotely and more flexibly during the pandemic has shown what is possible and what opportunities there are to consider doing things differently as we move on from COVID-19.

This year our focus has been on further embedding our engagement strategy, diversity and inclusion, attraction and retention activity, building capacity to support quality service delivery and a collaborative approach to designing future ways of working.

Our suppliers

We rely on various suppliers throughout the year for the delivery of technology, facilities management, harm reduction products and agency colleagues, amongst other things. We maintain good working relationships with our suppliers to ensure good value, social impact and environmental commitments are in place throughout the duration of our contracts.

Board committees

Audit Risk & Quality Committee (the "ARQ Committee")

The ARQ Committee is a standing board committee and it supports the Board by providing assurance that robust and effective mechanisms are in place to manage risks and ensure standards in Finance & Financial management, Internal & External audit and Quality Safeguarding and Clinical Governance. The ARQ Committee receives reports from both internal and external auditors as well as executives and senior managers.

As at 31 March 2022, the members of the audit risk & quality committee were as follows:

- Paul Picknett, non-executive director (Chair)
- Nicola Gilham, non-executive director
- Victoria Tzortziou Brown, non-executive director

The Chief Financial Officer is invited to ARQ Committee meetings as a matter of course. Other executives and senior managers are invited to ARQ Committee meetings as required. The committee met four times between April 2021 and March 2022. All meetings were quorate. The Chief Financial Officer attended all ARQ Committee meetings.

Nomination committee

When required, the Nomination Committee is convened to make recommendations to the Board on recruitment, membership and succession planning. Saxton Bampfylde was appointed to conduct the initial market search and shortlisting on behalf of the committee. The committee interviewed the shortlisted candidates for the position of Non-Executive Director with clinical background and recommended the appointment of Dr. Victoria Tzortziou Brown as director of the company to the board. The board accepted the recommendation of the Nomination Committee and appointed Dr. Victoria Tzortziou Brown to the board on 11 May 2021.

Remuneration committee

In January 2021 the board took the decision to create a permanent Remuneration Committee to deal with executive and non-executive remuneration with different membership to manage conflicts of interest. The membership comprises three non-executive directors for executive director remuneration.

In February 2022, the Remuneration Committee met to consider executive director pay. The committee was chaired by Nicola Gilham and it resolved to hold the basic pay at the current levels.

Review of objectives

The charitable objects of the Company are for the public benefit, to promote or assist in promoting the advancement of health of those with Learning Disability, those at risk of or with mental health conditions, alcohol, drug or alcohol use, misuse or dependency, and/or other addictive behaviour.

We meet our charitable objects through the provision of services across England for people to improve their health and wellbeing whether that is at home, within the workplace or through specialist services. In doing so we build upon nearly sixty years of experience in substance misuse, mental health, learning disability, autism, acquired brain injury, sexual health, healthy lifestyles and employment services.

The board of directors, members of which are also trustees under charity law, has given careful consideration and due regard to the Charity Commission's general guidance on public benefit in reviewing the activities of the Turning Point group. The directors are satisfied that the objectives of the charity and the activities it undertakes remain entirely for the public benefit in accordance with Section 17 of the Charities Act 2011.

Environmental and energy reporting

Turning Point greenhouse gas emissions, reportable under SECR for the financial year were 1,777 tonnes CO_2e.

These include the emissions associated with UK electricity and natural gas consumption, as well as business travel in company operated and private vehicles by colleagues.

Turning Point's greenhouse gas emissions were 7.9% lower this financial year than in the 2020–21 reporting period. The intensity of 12.4 tonnes CO_2e per £m revenue is 14.9% lower than the last financial year.

Greenhouse gas emissions

Emission source	2020/21	2021/22	% share of current year	Annual % change
Fuel combustion: Natural gas	1,118	962	54.1%	-14%
Purchased electricity	623	469	26.4%	-24.6%
Fuel combustion: Transport	189	346	19.5%	-83.1%
Total emissions (tCO_2e)	**1,930**	**1,777**	**100%**	**-7.9%**
Annual Turnover (£m)	133	143		
Intensity: (tCO_2e £m Turnover)	**14.6**	**12.4**		**-14.9%**

Figure 1 Greenhouse gas emissions by year (tonnes CO_2e)

Emission source	2020/21	2021/22	% share of current year	Annual % change
Scope 1	1,155	1,062	59.7%	-8.1%
Scope 2	574	431	24.3%	-24.9%
Scope 3	201	284	16%	-41.4%
Total emissions (tCO_2e)	**1,930**	**1,777**	**100%**	**-7.9%**

Figure 2 Greenhouse gas emissions by scope (tonnes CO_2e)

Scope 1: Natural gas and company-operated transport. Scope 2: Electricity. Scope 3: Losses from electricity distribution and transmission, private vehicles used for business travel. This only includes emissions reportable under SECR and may not reflect the entire carbon footprint of the organisation.

Energy consumption

Category	2020/21	2021/22	% share of current year	Annual % change
Fuel combustion: Natural gas	6,079,819	5,252,131	60.3%	-13.6%
Purchased electricity	2,460,779	2,031,257	23.3%	-17.5%
Fuel combustion: Transport	445,761	1,423,706	16.4%	219.4%
Total	**8,986,359**	**8,707,093**	**100%**	**-3.1%**

Figure 3 Energy consumption by year (kWh)

Boundary, methodology and exclusions

An 'operational control' approach has been used to define the Greenhouse Gas emissions boundary1.

This approach captures emissions associated with the operation of buildings in the Turning Point Estate for example the residential properties, independent hospital, office sites and storage facilities, plus company-owned, leased and employee-owned vehicles. This information was collected and reported in line with the methodology set out in the UK Government's Environmental Reporting Guidelines, 2019.

Emissions have been calculated using the latest conversion factors provided by the UK Government. The emissions from the transmission and distribution of electricity are voluntarily reported under Scope 3. There are no material omissions from the mandatory reporting scope. A percentage of emissions relating to gas and electricity has been estimated, due to invoicing end dates, this is allowed under the guidance of the Regulation.

The reporting period is April 2021 to March 2022, as per the financial accounts.

Energy efficiency initiatives

In the period covered by the SECR Report Turning Point has not undertaken any significant energy efficiency actions within the business. This is in part due to the capital spend limitations, generated by the uncertainty of the long-term impact of COVID-19, which has necessitated a pause in investment.

Achievements and performance

As the strategic report details, over the last year despite the pandemic still being a significant factor on how services have been commissioned and delivered, Turning Point has continued to grow, innovate, learn and ensure quality support for both our colleagues and the people we support.

Our people have done a tremendous job ensuring our services continued to deliver for the people we support at the most difficult of times, while further embedding flexible and technological solutions to help address some of the longer-term health and wellbeing issues resulting from the pandemic.

Commercial ventures have continued to reach new people, while service innovation and expansion has offered much needed solution to national challenges, such as delayed discharge from hospital, support for people with personality disorders and reducing the impact of liver disease.

Financially, Turning Point has returned another year of income growth and sustained positive contribution. The organisation has recovered well from the impact of COVID-19 and adapted to a changed operating environment. We enter the 2022–23 financial year in a robust position and better placed to face the challenges ahead.

Governance and Viability standard

The company has carried out an annual assessment of compliance with the Governance and Viability Standard and the board confirms continued compliance.

Value for money

For Turning Point value for money means delivering the best possible health and social care outcomes for the service price. We deliver value by continually improving the efficiency and effectiveness of our people, processes and systems to drive ever better outcomes. This means we need to ensure there is money available to invest in our people and our technology infrastructure. We understand value for money along the lines of the National Audit Office definition which assesses value across three criteria:

- **Economy:** minimising the cost of resources used or required.
- **Efficiency:** the relationship between the outcomes delivered through our services and the resources needed to produce them.
- **Effectiveness:** the relationship between the intended and actual outcomes delivered through our services.

This approach is governed through our Governance Framework and provides us with the means of achieving cost effectiveness, which we define as the optimal use of resources to achieve the intended health and social care outcomes.

As a provider of health and social care services Turning Point benchmarks its Care Quality Commission (CQC) regulated services against other providers to ensure that service effectiveness compares favourably and serves as an indicator of value we deliver through the quality of our services.

Turning Point Overall Ratings (April 2022) – 96% Good or Outstanding

Our overall rating for our CQC regulated services is 96% Good or Outstanding. We are regulated by the CQC for our care home services with and without nursing; community-based services for people who misuse substances; domiciliary care services; hospital services for people with mental health needs; rehabilitation services; residential substance misuse treatment and/or rehabilitation services and our supported living services.

Our services remained open throughout the pandemic to meet increased demand. In line with guidance for health and social care, our ways of working evolved and a greater proportion of our support was provided remotely. Due to the skill and dedication of our workforce, we maintained a superb quality profile throughout this period; and saw sustained growth in positive outcomes achieved by people we support.

Our substance misuse services are also benchmarked on the basis of successful completion outcomes for each Public Health England Partnership Area compared to other Partnership Areas that share the same client characteristics. This information forms part of the Public Health England official statistics and is therefore subject to reporting restrictions beyond internal use for management, quality assurance and briefing purposes.

Turning Point is first and foremost a national provider of health and social care services and therefore provides little social housing and where it does so this is only in conjunction with, and for the purpose of health and social care provision. Most of the value for money metrics required of a typical Registered Provider by the Regulator for Social Housing do not provide meaningful information for the annual report and are therefore not included. The following two metrics are included: **The capital margin and return on capital employed metrics for the organisation are set out below:**

Category	2021	2022
Return on Capital Employed	34%	23%
Capital Margin	3%	2%

Financial performance

Turning Point has returned another year of income growth and sustained positive contribution. The organisation recovered well from the impact of the first year of COVID-19 and adapted to a changed operating environment. Financial control remains strong, and we enter the 2022–23 financial year in a robust position and better placed to face the challenges ahead. Overall turnover reached £143.7m, generating an operating surplus of £2.4m.

Government funding, including the Workforce Recruitment and Retention Fund, has been accessed wherever possible to address additional costs caused by COVID-19. Personal Protective Equipment (PPE) has continued to be supplied by the NHS portal, again mitigating the additional expenditure required to ensure the safety of our colleagues and the people we support.

Within the Public Health and Substance Misuse business unit, we have worked closely with many of our commissioners to utilise monies from Public Health England to extend our activities via Universal, Rough Sleepers and ADDER funding totalling £6.0m. As we look to the future, additional funding from the new Office for Health Improvement and Disparities (OHID), launched in October 2021, will enable Turning Point to support even more people. This initiative has an initial timeframe of 3 years, showing progressive increases over this period. We will use the extra income to reduce caseloads for our colleagues and increase the number of clients in treatment.

Growth opportunities widened in 2021–22 after the constraints in the prior year caused by the pandemic. Turning Point was also successful in the retender for the reconfigured contracts in Leicester and Leicestershire. Unfortunately, our contract in Croydon was not retained. The Mental Health business unit secured new services in West Sussex and Manchester. Learning Disabilities services were boosted by contract wins in Northumberland and Sheffield, as well as more activity in the supported housing multi-disciplinary arena.

The Commercial Ventures arm of the business continues to develop its Rightsteps and livelife brands, supporting business to business and direct to customer activity respectively. The product range has extended, with market exploration and customer engagement increasing.

The organisation has continued to grow revenue and maintain financial viability. Looking ahead, we have fiscal challenges, particularly with high inflation rates and the increases to National Insurance and National Living Wage, but we are working closely with our commissioners to ensure that we deliver safe and high-quality services for the people we support and our colleagues.

During the year we undertook a market review of workplace pension providers. Our objectives were to get the best governance support to protect the retirement savings of members, offer a strong default investment option, provide online tools to help members engage with their pension plans and secure low fund charges so a larger proportion of contributions goes into members' pensions. After consultation with our colleagues, it was decided to change from a Group Personal Pension Plan to a master trust with Legal & General. The new arrangement will be in place from April 2022 and is another way in which we have improved the benefits available to colleagues.

We also reviewed our internal audit provision during the year and after a full market review appointed RSM UK. Our new partners will support us in scrutinising our ways of working to ensure that risks to the business, the people we support, and our colleagues are mitigated.

Reserves

Reserves are that part of a charity's unrestricted income funds that are freely available to spend to further the charity's objects and have been set aside for future use. Turning Point has no designated and £428k (2021: £10k) restricted funds.

On 31 March 2022, we transferred a surplus of £3.0m to reserves, giving us unrestricted reserves of £11.4m (2021: £9.2m) and total reserves, which include the pension reserve, of -£2.6m (2021: -£5.7m). The pension reserve represents the discounted value of the Group's future contributions to the defined benefit pension scheme, which is provided for on the Group's balance sheet in compliance with FRS 102. This is an accounting adjustment and does not directly impact our operating cashflows.

Our total reserves are now in the strongest position since FRS 102 was introduced in 2015–16, and we are entering our new strategic period in good financial health. The continued improvement in our financial sustainability throughout the year has been achieved through our focus and flexibility as an employer and provider, our agility in adapting to the changing external environment with new ways of working and new service delivery models and our innovative approach to finding new ways of reaching more people.

We are ambitious for the years ahead and aim to continue building our reserves through a determined focus on key priorities, including:

- Attracting and retaining people who share our values and who are driven to provide high quality support.
- Evolving our data visuals and dashboards to better inform management decisions.
- Driving efficacy of outcomes so we can reduce the impact of health inequalities.
- Nurturing product development and innovation to extend our reach and impact.
- Delivering and highlighting social value.

The board assesses the risks to the organisation annually and sets the target level of unrestricted funds. In the short term, the Trustees have set the target for unrestricted reserves to cover the pension reserve, thereby bringing total reserves back to a positive position. Thereafter the target is one twelfth of income (8.33%), which is £12m based on the income from operations in 2021–22.

The board has reviewed the budgets and cashflow forecasts for 2022–23 and 2023–24, which reflect all the known opportunities and challenges, both internally and in the external environment. They consider the cash balance to be adequate for the purpose of meeting the working capital requirements for the foreseeable future and coping with the financial impacts of the risks faced by the organisation. The approach to reserves is approved with input from the Audit, Risk & Quality Committee.

Responsibilities for Financial Statements

Company, charity and registered social housing legislation require the Board to prepare financial statements for each financial year which give a true and fair view of the state of affairs of the Charity and of the income and expenditure for the period of account.

In preparing these financial statements, the Board is required to:

- Select suitable accounting policies and then apply them consistently;
- Make judgements and estimates that are reasonable and prudent;
- State whether applicable accounting standards have been followed, subject to any material departures disclosed and explained in the financial statements; and
- Prepare the financial statements on the going concern basis unless it is inappropriate to presume that the Charity will continue in business.

The Board is responsible for keeping proper accounting records which disclose with reasonable accuracy at any time the financial position of the Charity and enable it to ensure that the financial statements comply with the Companies Act 2006, Charities Act 2011 and the Housing and Regeneration Act 2008, Housing SORP 2018 and the Accounting Direction for Private Registered Providers of Social Housing 2019. It has general responsibility for taking reasonable steps to safeguard the assets of the Charity and to prevent and detect fraud and other irregularities.

Disclosure of information to auditor

As far as each of the directors is aware, there is no relevant audit information of which the charitable company's auditors are unaware. The directors have each taken all the steps that they ought to have taken as directors in order to ensure they are aware of relevant audit information and to establish that the charitable company's auditors are aware of that information.

The board of directors is responsible for setting and monitoring vision and values. The unitary board includes non-executive and executive members who together agree corporate strategy and review corporate risk and associated internal controls. Day-to-day management of the company is delegated to the Operating Board and the senior managers. The responsibilities and function of the board are set out in the Governance Standing Orders, which are based on the Turning Point Articles of Association and the principles of the Wates Corporate Governance Principles for Large Private Companies (the Wates Principles). The Directors apply the corporate governance they consider to be appropriate given the nature of the entity, having due regard to the principles of governance set out in the Wates Principles and Section 172 of the Companies Act 2006.

This report was approved by the board on 26 July 2022 and signed on its behalf.

Peter Hay
Chair of the
Turning Point Board

Independent Auditor's Report

to the Members of Turning Point

Opinion

We have audited the financial statements of Turning Point (the 'parent Charity') and its subsidiaries (the 'Group') for the year ended 31 March 2022, which comprise the Group and Charity Statements of comprehensive income and Statements of financial position, the Group Statement of cash flows, the Group Statement of changes in reserves and the related notes, including a summary of significant accounting policies. The financial reporting framework that has been applied in their preparation is applicable law and United Kingdom Accounting Standards, including Financial Reporting Standard 102 'The Financial Reporting Standard applicable in the UK and Republic of Ireland' (United Kingdom Generally Accepted Accounting Practice).

In our opinion the financial statements:

- give a true and fair view of the state of the Group's and of the charitable company's affairs as at 31 March 2022 and of the Group's incoming resources and application of resources, including its income and expenditure for the year then ended;
- have been properly prepared in accordance with United Kingdom Generally Accepted Accounting Practice; and
- have been prepared in accordance with the requirements of the Companies Act 2006, Housing and Regeneration Act 2008 and The Accounting Direction for Registered Providers of Social Housing from April 2019.

Basis for opinion

We conducted our audit in accordance with International Standards on Auditing (UK) (ISAs (UK)) and applicable law. Our responsibilities under those standards are further described in the Auditor's responsibilities for the audit of the financial statements section of our report. We are independent of the Group in accordance with the ethical requirements that are relevant to our audit of the financial statements in the United Kingdom, including the Financial Reporting Council's Ethical Standard, and we have fulfilled our other ethical responsibilities in accordance with these requirements. We believe that the audit evidence we have obtained is sufficient and appropriate to provide a basis for our opinion.

Conclusions relating to going concern

In auditing the financial statements, we have concluded that the Board's use of the going concern basis of accounting in the preparation of the financial statements is appropriate.

Based on the work we have performed, we have not identified any material uncertainties relating to events or conditions that, individually or collectively, may cast significant doubt on the Group's or Trust's ability to continue as a going concern for a period of at least twelve months from when the financial statements are authorised for issue.

Our responsibilities and the responsibilities of the Board with respect to going concern are described in the relevant sections of this report.

Other information

The trustees are responsible for the other information within the Annual Report. The other information comprises the information included in the Annual Report, other than the financial statements and our Auditor's report thereon. Our opinion on the financial statements does not cover the other information and, except to the extent otherwise explicitly stated in our report, we do not express any form of assurance conclusion thereon.

In connection with our audit of the financial statements, our responsibility is to read the other information and, in doing so, consider whether the other information is materially inconsistent with the financial statements or our knowledge obtained in the audit or otherwise appears to be materially misstated. If we identify such material inconsistencies or apparent material misstatements, we are required to determine whether there is a material misstatement in the financial statements or a material misstatement of the other information. If, based on the work we have performed, we conclude that there is a material misstatement of this other information, we are required to report that fact.

We have nothing to report in this regard.

Opinion on other matters prescribed by the Companies Act 2006

In our opinion, based on the work undertaken in the course of the audit:

- the information given in the Group strategic report and the Directors' report for the financial year for which the financial statements are prepared is consistent with the financial statements; and
- the Group strategic report and the Directors' report have been prepared in accordance with applicable legal requirements.

Matters on which we are required to report by exception

In the light of the knowledge and understanding of the Group and the parent Charity and its environment obtained in the course of the audit, we have not identified material misstatements in the Group strategic report or the Directors' report.

We have nothing to report in respect of the following matters in relation to which the Companies Act 2006 requires us to report to you if, in our opinion:

- adequate accounting records have not been kept by the parent Charity, or returns adequate for our audit have not been received from branches not visited by us; or
- the parent Charity financial statements are not in agreement with the accounting records and returns; or
- certain disclosures of trustees' remuneration specified by law are not made; or
- we have not received all the information and explanations we require for our audit.

Responsibilities of directors

As explained more fully in the directors' responsibilities statement on page 66, the trustees are responsible for the preparation of the financial statements and for being satisfied that they give a true and fair view, and for such internal control as the trustees determine is necessary to enable the preparation of financial statements that are free from material misstatement, whether due to fraud or error.

In preparing the financial statements, the trustees are responsible for assessing the Group's and the parent Charity's ability to continue as a going concern, disclosing, as applicable, matters related to going concern and using the going concern basis of accounting unless the trustees either intend to liquidate the Group or the parent Charity or to cease operations, or have no realistic alternative but to do so.

Auditor's responsibilities for the audit of the financial statements

Our objectives are to obtain reasonable assurance about whether the financial statements as a whole are free from material misstatement, whether due to fraud or error, and to issue an Auditor's report that includes our opinion. Reasonable assurance is a high level of assurance, but is not a guarantee that an audit conducted in accordance with ISAs (UK) will always detect a material misstatement when it exists. Misstatements can arise from fraud or error and are considered material if, individually or in the aggregate, they could reasonably be expected to influence the economic decisions of users taken on the basis of these financial statements.

A further description of our responsibilities for the audit of the financial statements is located on the Financial Reporting Council's website at: www.frc.org.uk/auditorsresponsibilities. This description forms part of our Auditor's report.

Extent to which the audit was considered capable of detecting irregularities, including fraud

Irregularities, including fraud, are instances of non-compliance with laws and regulations. We identified and assessed the risks of material misstatement of the financial statements from irregularities, whether due to fraud or error, and discussed these between our audit team members. We then designed and performed audit procedures responsive to those risks, including obtaining audit evidence sufficient and appropriate to provide a basis for our opinion.

We obtained an understanding of the legal and regulatory frameworks within which the charitable company and group operates, focusing on those laws and regulations that have a direct effect on the determination of material amounts and disclosures in the financial statements. The laws and regulations we considered in this context were the Companies Act 2006, the Charities Act 2011, the Housing and Regeneration Act 2008 and The Accounting Direction for Registered Providers of Social Housing from April 2019 together with the Housing SORP and Charities SORP (FRS 102). We assessed the required compliance with these laws and regulations as part of our audit procedures on the related financial statement items.

In addition, we considered provisions of other laws and regulations that do not have a direct effect on the financial statements but compliance with which might be fundamental to the charitable company's and the group's ability to operate or to avoid a material penalty. We also considered the opportunities and incentives that may exist within the charitable company and the group for fraud. The laws and regulations we considered in this context for the UK operations were CQC Regulations for service providers and managers, Employment legislation, the Wates Principles and requirements imposed by the Regulator of Social Housing.

Auditing standards limit the required audit procedures to identify non-compliance with these laws and regulations to enquiry of the Trustees and other management and inspection of regulatory and legal correspondence, if any.

We identified the greatest risk of material impact on the financial statements from irregularities, including fraud, to be within the timing of recognition of contract income, recording the impact of the CQC regulatory review and the override of controls by management. Our audit procedures to respond to these risks included enquiries of management, review of internal audit reports, review of the fraud reports made to the Audit Committee, sample testing on the posting of journals, reviewing accounting estimates for biases, reviewing regulatory correspondence with the Charity Commission and CQC and reading minutes of meetings of those charged with governance.

Owing to the inherent limitations of an audit, there is an unavoidable risk that we may not have detected some material misstatements in the financial statements, even though we have properly planned and performed our audit in accordance with auditing standards. For example, the further removed non-compliance with laws and regulations (irregularities) is from the events and transactions reflected in the financial statements, the less likely the inherently limited procedures required by auditing standards would identify it. In addition, as with any audit, there remained a higher risk of non- detection of irregularities, as these may involve collusion, forgery, intentional omissions, misrepresentations, or the override of internal controls. We are not responsible for preventing non-compliance and cannot be expected to detect non-compliance with all laws and regulations.

Use of our report

This report is made solely to the Charity's members, as a body, in accordance with Chapter 3 of Part 16 of the Companies Act 2006 and Section 128 of the Housing and Regeneration Act 2008. Our audit work has been undertaken so that we might state to the Charity's members those matters we are required to state to them in an Auditor's report and for no other purpose. To the fullest extent permitted by law, we do not accept or assume responsibility to anyone other than the Charity and the Charity's members, as a body, for our audit work, for this report, or for the opinions we have formed.

V Szulist
Senior statutory auditor

for and on behalf of
Crowe U.K. LLP

Statutory Auditor

3rd floor
The Lexicon
Mount Street
Manchester M2 5NT

Date: 29 July 2022

Group statement of comprehensive income

For the year ended 31 March 2022

	Note	2022 £000	2021 £000
Turnover	4	**143,660**	132,794
Other operating charges	4	**(141,230)**	(128,361)
Operating surplus		**2,430**	4,433
Interest receivable and similar income	12	**34**	18
Impact of changing assumptions and discount rate on pension deficit reduction plan	23	**(737)**	(648)
Surplus for the financial year		**1,727**	3,803
Actuarial gains/(losses) on defined benefit pension schemes	30	**1,316**	(658)
Other comprehensive income for the year		**1,316**	(658)
Total comprehensive surplus		**3,043**	3,145

All 2022 activities relate to continuing operations.

Charity statement of comprehensive income

For the year ended 31 March 2022

	Note	2022 £000	2021 £000
Turnover	5	**142,307**	131,527
Other operating charges	5	**(141,117)**	(128,346)
Operating surplus		**1,190**	3,181
Interest receivable and similar income	12	**34**	18
Impact of changing assumptions and discount rate on pension deficit reduction plan	23	**(737)**	(648)
Surplus for the financial year		**487**	2,551
Actuarial gains/(losses) on defined benefit pension schemes	30	**1,316**	(658)
Gift aid from subsidiary	32	**1,242**	1,927
Other comprehensive income for the year		**2,558**	1,269
Total comprehensive surplus		**3,045**	3,820

All 2022 activities relate to continuing operations.

Gift aid from the subsidiary of £1,242k relates to gift aid arising on profits generated in the previous accounting period.

Consolidated statement of financial position

As at 31 March 2022

	Note	2022 £000		2021 £000	
Fixed assets					
Housing properties	14		**4,228**		4,145
Other fixed assets	15		**292**		306
Investments	16		**1**		1
			4,521		4,452
Current assets					
Debtors	17	**24,283**		20,024	
Cash and cash equivalents	18	**4,772**		7,791	
		29,055		27,815	
Creditors: amounts falling due within one year	19	**(19,687)**		(19,315)	
Net current assets			**9,368**		8,500
Total assets less current liabilities			**13,889**		12,952
Creditors: amounts falling due after more than one year	21		**64**		70
			64		70
Provisions for liabilities					
Defined benefit pension liability	30		**-**		2,017
Pension provision	23		**14,443**		14,846
Reinstatement provision	23		**1,950**		1,675
Other provision	23		**45**		-
			16,438		18,538
Reserves					
Unrestricted reserves			**11,402**		9,180
Pension reserve			**(14,443)**		(14,846)
Restricted reserves			**428**		10
			13,889		12,952

The financial statements were approved and authorised for issue by the Board and were signed on its behalf on 26 July 2022.

Peter Hay (Chair)
Director

Charity statement of financial position

As at 31 March 2022

	Note		2022 £000		2021 £000
Fixed assets					
Housing properties	14		**4,228**		4,145
Other fixed assets	15		**292**		306
Investments	16		**1**		1
			4,521		4,452
Current assets					
Debtors	17	**14,475**		10,940	
Cash and cash equivalents	18	**4,694**		7,767	
		19,169		18,707	
Creditors: amounts falling due within one year	19	**(12,375)**		(12,783)	
Net current assets			**6,794**		5,924
Total assets less current liabilities			**11,315**		10,376
Creditors: amounts falling due after more than one year	21		**64**		70
			64		70
Provisions for liabilities					
Defined benefit pension liability	30		**-**		2,017
Pension provision	23		**14,443**		14,846
Reinstatement provision	23		**1,950**		1,675
Other provision	23		**45**		-
			16,438		18,538
Reserves					
Unrestricted reserves			**8,828**		6,604
Pension reserve			**(14,443)**		(14,846)
Restricted reserves			**428**		10
			11,315		10,376

The financial statements were approved and authorised for issue by the Board and were signed on its behalf on 26 July 2022.

Peter Hay (Chair)
Director

Consolidated statement of changes in reserves

For the year ended 31 March 2022

	Restricted reserves £000	Pension reserve £000	Unrestricted reserves £000	Total reserves £000
At 1 April 2021	10	(14,846)	9,180	(5,656)
Comprehensive income for the year				
Surplus for the year	418	-	1,309	1,727
Actuarial gains on pension schemes	-	-	1,316	1,316
Movement on pension deficit	-	403	-	403
Transfer to profit and loss account	-	-	(403)	(403)
At 31 March 2022	**428**	**(14,443)**	**11,402**	**(2,613)**

The notes on pages 84 to 109 form part of these financial statements.

Consolidated statement of changes in reserves

For the year ended 31 March 2021

	Restricted reserves £000	Pension reserve £000	Unrestricted reserves £000	Total reserves £000
At 1 April 2020	-	(15,301)	6,500	(8,801)
Comprehensive income for the year				
Deficit for the year	10	-	3,793	3,803
Actuarial losses on pension schemes	-	-	(658)	(658)
Movement on pension deficit	-	455	-	455
Transfer to profit and loss account	-	-	(455)	(455)
At 31 March 2021	**10**	**(14,846)**	**9,180**	**(5,656)**

The notes on pages 84 to 109 form part of these financial statements.

Consolidated statement of cash flows

For the year ended 31 March 2022

	2022 £000	2021 £000
Cash flows from operating activities		
Profit for the financial year	**1,727**	3,803
Adjustments for:		
Depreciation of tangible assets	**521**	589
Profit on disposal of tangible assets	**-**	24
Amortisation of capital grants	**(6)**	(7)
Interest received	**(34)**	(18)
(Increase) in debtors	**(4,259)**	(8,063)
Increase in creditors	**372**	4,058
(Decrease) in provisions	**(991)**	(601)
Defined benefit pension contributions	**(130)**	(327)
Pension interest and service costs	**337**	289
Net cash generated from operating activities	**(2,463)**	(253)
Cash flows from investing activities		
Improvement to housing properties	**(447)**	(276)
Purchase of tangible fixed assets	**(143)**	(304)
Interest received	**34**	18
Net cash from investing activities	**(556)**	(562)
Net increase in cash and cash equivalents	**(3,019)**	815
Cash and cash equivalents at the beginning of the year	**7,791**	8,606
Cash and cash equivalents at the end of the year	**4,772**	7,791
Cash and cash equivalents at the end of year comprise:		
Cash at bank and in hand	**4,772**	7,791
	4,772	7,791

The notes on pages 84 to 109 form part of these financial statements.

Analysis of net debt

For the year ended 31 March 2022

	At 1 April 2021 £000	Cash flows £000	At 31 March 2022 £000
Cash at bank and in hand	7,791	(3,019)	4,772
	7,791	(3,019)	4,772

The notes on pages 84 to 109 form part of these financial statements.

Notes to the financial statements

For the year ended 31 March 2022

Accounting policies

1. General information

Turning Point is a company limited by guarantee and is incorporated in England. The registered office is Standon House, 21 Mansell Street, London E1 8AA. The registered number is 793558.

2. Accounting policies

The principal accounting policies adopted, judgements and key sources of estimation in the preparation of the financial statements are as follows:

2.1 Accounting convention

Turning Point is registered under the Companies Act 2006 and is a registered housing provider.

The financial statements have been prepared in accordance with applicable Accounting Standards, including Financial Reporting Standard 102 (FRS 102), the Accounting Direction for Social Housing Providers from January 2019, and the Housing SORP 2018: Statement of Recommended Practice for Registered Social Housing Providers.

Turning Point meets the definition of a public benefit entity under FRS 102. Assets and liabilities are initially recognised at fair value or transaction value unless otherwise stated in the relevant accounting policy.

2.2 Going concern

On 31 March 2022, Turning Point had working capital of £9.4m (2021: £8.5m) and a cash balance of £4.8m (2021: £7.8m). Turnover for the year is £143.7m, which is an increase of 8% on 2020/21, resulting from success in driving profitable and sustainable growth. Forecast cash available shows significant headroom against future working capital requirements and we are in a good position to meet the challenges ahead.

Turning Point has been awarded additional funding from local authorities in the year through their Universal, Rough Sleepers and ADDER projects, and this income will continue throughout 2022/23. These new services demonstrate our ambition to continue with a sustainable growth of the business, which is evidenced by the year-on-year increase of both turnover and operating profit. The profit has been retained to fund future operations and this has seen our working capital steadily increase over the last few years.

The business has driven cost efficiencies during the year through embedding new ways of working and negotiating new supplier contracts. We are continuing to develop our products and find innovative ways of supporting people, through engagement with the people we support and commissioners, and this will drive future growth and secure retention of our current contracts.

These activities underpin the budgets and cash forecasts for 2022/23 and 2023/24, which have been reviewed and challenged by the Board. In addition, the Board has considered the organisation's ability to respond to the longer-term challenges facing health and social care providers and changes in the economic environment and have developed a new corporate strategy that will ensure the continuing financial viability of the business.

After due consideration, the Board has a reasonable expectation that the Group has adequate resources to continue its activities for the foreseeable future. Accordingly, the Trustees continue to adopt the going concern basis in preparing the financial statements as outlined in the Statement of Trustees Responsibilities.

2.3 Basis of consolidation

The financial statements consolidate the accounts of the Charity and its trading subsidiary, Turning Point (Services) Limited under the purchase method.

The Charity's jointly controlled entity, Northern Pathways Limited, incorporated under the Companies Act 2006, was accounted for under the equity method of accounting. Northern Pathways Limited was dissolved on 12 April 2022.

Investments in subsidiaries are accounted for at cost less impairment in the individual financial statements.

2.4 Turnover

Turnover represents contract and grant income from statutory sources (including rents net of voids), payments from residents and donations. Grant income is recognised when the related provisions for the grant have been met. Donations are recognised when the charity is legally entitled to the income and the amount can be quantified with reasonable certainty. All other income is accounted for on an accruals basis.

2.5 Value added tax (VAT)

Turning Point and Turning Point (Services) Limited are members of a VAT group and operate the standard method for partial exemption. Irrecoverable VAT is recognised as an expense when the tax point of the relevant expenditure is reached.

2.6 Taxation

A current corporation tax charge is recognised for the amount of corporation tax payable in respect of the taxable income for the current or past reporting periods using the tax rates and laws that have been enacted or substantively enacted by the reporting date.

Turning Point is a registered charity that is exempt from taxation on income and gains to the extent that they fall within the exemptions for charities in Part 11 Corporation Tax Act 2010 or s.256 of the Taxation of Chargeable Gains Act 1992.

The non-charitable subsidiary typically claims relief against its taxable profits by making gift aid payments to Turning Point.

2.7 Capital grants

Capital grants (including social housing grants) are provided for in creditors and written off in the Statement of Comprehensive Income over the expected period of the useful life of the assets acquired.

2.8 Accrued income

Accrued income is classified as "Debtors" and includes contract and grant income (especially outcome related income) that will probably be received in a reporting period after that to which it relates.

2.9 Deferred income

Contract income and revenue grants are recognised as income in the period in which the performance criteria are met.

Deferred income is classified as "Creditors: amounts falling due within one year" and includes contract and grant income received in advance. These contracts and grants represent funds that have been received for specific purposes and are potentially refundable if the conditions of the contract or grant are not satisfied.

Contract and grant income received in the year but which remains unspent at the year-end is, with the agreement of the funder, carried forward in creditors at the year-end to be spent in the following year.

2.10 Fixed assets and depreciation

Depreciation is provided by the Charity to write off the cost net of grant less the estimated residual value of tangible fixed assets in equal instalments over their estimated useful economic lives as follows:

- Freehold properties and improvements to freehold properties are depreciated over 50 years.
- Improvements to leasehold properties are depreciated over the shorter of the term of the lease and the expected useful life of the asset.
- Fixtures and fittings, office equipment and motor vehicles – over 3 years..
- Software – over 3 years.

In accordance with the Housing SORP 2018: Statement of Recommended Practice for Registered Social Housing Providers, the overall cost of any property, fixtures and fittings, and office equipment will be split between significant components to enable each component to be depreciated according to its economic useful life. The categories of components and the relevant depreciation rates are those listed above. A 'significant component' will have a:

- Cost greater than £10,000, AND
- Cost greater than 10% of the whole asset, AND
- Have a useful economic life of less than half that of the whole asset.

Where a component is replaced or restored, the carrying amount of the old component will be disposed of and the new component will be capitalised.

The Charity adopts a policy to write off, in the year of acquisition, items costing less than £3,000.

2.11 Improvement to properties

Expenditure on existing housing properties is capitalised to the extent that it improves the economic benefit of the asset either through an increase in rental income, a reduction in maintenance costs or through an extension of the life of the property.

Accounting policies (continued)

2.12 Operating leases

Rents payable, equipment and motor vehicles under operating leases are charged on a straight-line basis over the term of the lease.

Rental lease commitments are measured at the full cost of the lease payments to the date on which the Charity expects to leave each property.

2.13 Provision for liabilities

Provisions are recognised when the Group has a present obligation (legal or constructive) because of a past event, it is probable that the Group will be required to settle the obligation, and a reliable estimate can be made of the amount of the obligation. The amount recognised as a provision is the best estimate of the consideration required to settle the present obligation at the end of the reporting period, considering the risks and uncertainties surrounding the obligation.

2.14 Financial instruments

The Charity's financial instruments consist of debtors, cash and creditors and as such are all basic in nature as defined in FRS 102. They are measured at the cash consideration expected to be paid or received.

2.15 Pension costs

The Charity operated a defined benefit pension scheme, which is contracted out of the State Scheme and provides benefits based on final pensionable pay. The scheme is a multi-employer pension scheme and it is not possible to identify the assets and liabilities of the scheme which are attributable to the Charity. In accordance with FRS 102 the scheme is accounted for as a defined contribution scheme. The assets of the scheme are held separately from those of the Charity. The funds are valued every three years by a professionally qualified independent actuary, the rates of contribution payable then being determined by Pension Trustees on advice of the actuary. The latest completed triennial actuarial valuation took place on 31 March 2019. The Charity has provided for the committed contributions payable, discounted appropriately, to fund the deficit of the scheme.

The defined benefit scheme closed on 31 March 2012 and on 1 April 2012, Turning Point started a defined contribution scheme.

The Charity also has employees who are members of Local Government Pension Schemes which are defined benefit schemes. The defined benefit pension scheme current service costs are charged to the Statement of Comprehensive Income within staff costs. The expected return on the scheme assets less the scheme interest costs are credited within other interest. The scheme actuarial gains and losses are recognised immediately as other recognised gains and losses. The defined benefit scheme assets are measured at fair value at the year-end date. Scheme liabilities are measured on an actuarial basis at the year-end date using the projected unit method and discounted at a rate equivalent to the current rate of return on a high-quality corporate bond of equivalent term to the scheme liabilities. The resulting defined benefit asset or liability is presented separately after other net assets on the face of the Statement of Financial Position.

The Charity pays contributions to the NHS Pension Scheme in relation to employees who are members. This is a defined benefit public service scheme, and the costs are charged to the Statement of Comprehensive Income in the period to which they relate.

2.16 Designated reserves

The Charity has no designated reserves at 31 March 2022.

2.17 Investments

The only investments held by the Group are in its subsidiary and jointly controlled entity.

- Subsidiary undertaking - Investments in subsidiaries are valued at cost less provision for impairment.
- Jointly controlled entity - Investments in jointly controlled entities are stated at the charity's share of net assets/ liabilities. The charity's share of the profits or losses of the jointly controlled entity is included in the Statement of Comprehensive Income using the equity accounting basis.

3. Judgements in applying accounting policies and key sources of estimation uncertainty

The principal risks and uncertainties of the business are set out in the Strategic Report, together with the actions taken to mitigate these risks.

The Trustees have considered the residual risks and have received adequate assurance that they do not cast significant doubt on the business's ability to continue as a going concern.

In the application of the entity's accounting policies, which are described in note 2, the Trustees are required to make judgments, estimates and assumptions about the carrying value of assets and liabilities that are not readily apparent from other sources. The estimates and underlying assumptions are based on historical experience and other factors that are relevant. Actual results may differ from these estimates.

The estimates and underlying assumptions are reviewed on an on-going basis. Revisions to accounting estimates are recognised in the period in which the estimate is revised, if the revision affects only that period, or in the period of the revision and future periods, if the revision affects the current and future periods.

The key sources of estimation uncertainty that have a significant effect on the amounts recognised in the financial statements are summarised below:

- **Reinstatement provision –** Turning Point has provided for its potential reinstatement liability to cover expected building costs when leased properties are returned to the landlord. The potential liability has been calculated for properties where a reinstatement requirement exists in the contract, and based on a valuation of works or estimated cost per square metre.
- **Pension provision –** Turning Point has an obligation to pay deficit funding contributions into the defined benefit pension scheme. This provision is dependent on several factors including discount rate, life expectancy and asset valuations. The assumptions reflect historical experience and current trends.
- **Defined benefit pension schemes –** Turning Point has obligations to pay pension benefits to certain employees who are members of Local Government Pension Schemes. The cost of these benefits and the present value of the obligation depend on several factors including life expectancy, salary increases and the discount rate on corporate bonds. Management reviews the actuaries' estimates of these factors which determine the net pension obligations in the Statement of Financial Position. The assumptions reflect historical experience and current trends.

4. Turnover and operating surplus – 2022 Group

	Turnover £000	Operating costs £000	Operating surplus £000
Income and expenditure from lettings			
Supported housing accommodation:			
Residential services	62,546	(59,298)	3,248
Non-residential services	80,913	(69,311)	11,602
	143,459	(128,609)	14,850
Other income and expenditure	201	(12,621)	(12,420)
	143,660	(141,230)	2,430

Turnover and operating surplus – 2021 Group

	Turnover £000	Operating costs £000	Operating surplus £000
Income and expenditure from lettings			
Supported housing accommodation:			
Residential services	63,713	(58,169)	5,544
Non-residential services	68,910	(58,172)	10,738
	132,623	(116,341)	16,282
Other income and expenditure	171	(12,020)	(11,849)
	132,794	(128,361)	4,433

5. Turnover and operating surplus – 2022 Charity

	Turnover £000	Operating costs £000	Operating surplus £000
Income and expenditure from lettings			
Supported housing accommodation:			
Residential services	61,957	(59,172)	2,785
Non-residential services	80,151	(69,324)	10,827
	142,108	(128,496)	13,612
Other income and expenditure	199	(12,621)	(12,422)
	142,307	(141,117)	1,190

Turnover and operating surplus – 2021 Charity

	Turnover £000	Operating costs £000	Operating surplus £000
Income and expenditure from lettings			
Supported housing accommodation:			
Residential services	83,026	(58,194)	24,832
Non-residential services	48,328	(58,131)	(9,803)
	131,354	(116,325)	15,029
Other income and expenditure	173	(12,021)	(11,848)
	131,527	(128,346)	3,181

The further analysis of income and expenditure from lettings in notes 6 and 7 reflects the disclosure required by the Accounting Direction for Registered Providers of Social Housing from April 2019.

6. Income and expenditure from lettings – Group

	Residential services 2022 £000	Non-residential services 2022 £000	Total 2022 £000	Residential services 2021 £000	Non-residential services 2021 £000	Total 2021 £000
Income from lettings						
Rent receivable	**718**	**-**	**718**	1,030	-	1,030
Service charge receivable	**1,281**	**41**	**1,322**	1,505	(36)	1,469
Net rents receivable	**1,999**	**41**	**2,040**	2,535	(36)	2,499
Revenue grants from local authorities and other agencies	**60,547**	**80,872**	**141,419**	61,178	68,946	130,124
Total income from lettings	**62,546**	**80,913**	**143,459**	63,713	68,910	132,623
Expenditure on letting activities						
Services	**46,810**	**54,152**	**100,962**	45,495	45,168	90,663
Management	**10,336**	**11,958**	**22,294**	9,809	9,737	19,546
Routine maintenance	**369**	**508**	**877**	491	547	1,038
Planned maintenance	**109**	**109**	**218**	143	95	238
Rent losses from bad debts	**63**	**2**	**65**	116	17	133
Property lease charges	**1,469**	**2,378**	**3,847**	1,987	2,294	4,281
Depreciation of housing properties	**142**	**204**	**346**	128	314	442
Total expenditure on lettings	**(59,298)**	**(69,311)**	**(128,609)**	(58,169)	(58,172)	(116,341)
Operating surplus on letting activities	**3,248**	**11,602**	**14,850**	5,544	10,738	16,282
Void losses			**5,109**			2,097

7. Income and expenditure from lettings – Charity

	Residential services 2022 £000	Non-residential services 2022 £000	Total 2022 £000	Residential services 2021 £000	Non-residential services 2021 £000	Total 2021 £000
Income from lettings						
Rent receivable	**718**	**-**	**718**	1,030	-	1,030
Service charge receivable	**1,335**	**40**	**1,375**	1,575	(21)	1,554
Net rents receivable	**2,053**	**40**	**2,093**	2,605	(21)	2,584
Revenue grants from local authorities and other agencies	**59,904**	**80,111**	**140,015**	80,421	48,349	128,770
Total income from lettings	**61,957**	**80,151**	**142,108**	83,026	48,328	131,354
Expenditure on letting activities						
Services	**46,717**	**54,162**	**100,879**	45,516	45,134	90,650
Management	**10,316**	**11,960**	**22,276**	9,813	9,730	19,543
Routine maintenance	**369**	**508**	**877**	491	547	1,038
Planned maintenance	**109**	**109**	**218**	143	95	238
Rent losses from bad debts	**50**	**3**	**53**	116	17	133
Property lease charges	**1,469**	**2,378**	**3,847**	1,987	2,294	4,281
Depreciation of housing properties	**142**	**204**	**346**	128	314	442
Total expenditure on lettings	**(59,172)**	**(69,324)**	**(128,496)**	(58,194)	(58,131)	(116,325)
Operating surplus on letting activities	**2,785**	**10,827**	**13,612**	24,832	(9,803)	15,029
Void losses			**5,109**			2,097

8. Operating surplus

The operating surplus is stated after charging:

	Group 2022 £000	Group 2021 £000	**Charity 2022 £000**	Charity 2021 £000
Depreciation of housing properties	**364**	442	**364**	442
Depreciation of other tangible owned fixed assets	**157**	147	**157**	147
Amortisation of capital grant on housing properties	**(6)**	(15)	**(6)**	(15)
Audit fees payable	**58**	55	**29**	28
Hire of equipment – rentals payable under operating leases	**699**	519	**699**	519

9. Auditor's remuneration

	2022 £000	2021 £000
Fees payable to the Group's auditor	**81**	71
Fees payable to the Group's auditor and its associates in respect of:		
Audit of charity	**29**	28
Audit of subsidiaries	**29**	27
Tax compliance and advisory services	**8**	4
Accounts preparation fee	**15**	12
	81	71

10. Employees – Group and Charity

Staff costs were as follows:

	2022 £000	2021 £000
Salaries	**97,176**	86,750
National insurance	**7,742**	7,099
Pension contributions	**3,771**	3,314
	108,689	97,163

The average monthly number of employees, including the Chief Executive, during the year was as follows:

	2022 No.	2021 No.
Management and administration	**736**	687
Operational	**2,966**	2,898
	3,702	3,585

The key management personnel of the charity and the group comprise the executive directors, operating board members, and non-executive board members. The headcount of key management personnel during the year was 7 executive directors and operating board members, and 8 non-executive directors (2021: 7 ED and 8 NED).

The total employee benefits of the key management personnel of the charity and the group were £924k paid to executive directors and operating board members and £29k paid to non-executive board members (2021: £1,046k and £27k).

During the year, 4 employees were paid a total of £73k as compensation for the termination of their employment before the normal retirement date. A total of £27k was paid to 2 employees who accepted the offer of voluntary redundancy. The payments are fully recognised in the Statement of Comprehensive Income for 2021/22, being the period in which the plans were finalised.

The average number of full-time equivalent persons (including the chief executive) employed during the year:

	2022 No.	2021 No.
Management and administration	**555**	531
Operational	**2,514**	2,462
	3,069	2,993

The full-time equivalent number of staff whose remuneration payable in relation to the period of account fell within the following bands:

	2022 No.	2021 No.
Group and charity		
£60,001 – £70,000	**13**	13
£70,001 – £80,000	**12**	16
£80,001 – £90,000	**12**	8
£90,001 – £100,000	**-**	2
£100,001 – £110,000	**2**	3
£110,001 – £120,000	**3**	2
£120,001 – £130,000	**1**	1
£130,001 – £140,000	**5**	3
£140,001 – £150,000	**-**	-
£150,001 – £160,000	**1**	1
£160,001 – £170,000	**1**	-
£170,001 – £180,000	**-**	-
£180,001 – £190,000	**1**	1
£190,001 – £200,000	**-**	-
£200,001 – £210,000	**-**	-
£210,001 – £220,000	**-**	-
£220,001 – £230,000	**1**	1
	52	51

11. Directors' and trustees' emoluments

	2022 £000	2021 £000
Group and Charity		
Director emoluments (including pension contributions and benefits in kind)	**446**	443
Director pension contributions (included above)	**20**	20
The headcount of Directors during the year was 2 (2021: 2)		
Two Directors were paid pension contributions during the year (2021: 2)		
Non-executive trustee emoluments (including expenses)	**28**	27
£nil (2021: £nil) of travel expenditure was reimbursed to nil (2021: nil) trustees.		
The emoluments of Directors disclosed above (excluding pension contributions and benefits in kind) include amounts paid to:		
The highest paid Director	**227**	227
Pension contributions of the highest paid Director	**14**	14

The company paid emoluments of £4k to two Directors of Turning Point (Services) Limited during the year (2021: £4k to one director).

Details of the nature of the Chief Executive's pension arrangements:

The CEO is an 'ex defined benefit' member of the Group Personal Pension Plan with Standard Life, as are all other team members who were active members of the Turning Point Pension Scheme at 31 March 2012.

No enhanced or special terms apply.

The Group contributed 6% to the GPPP on behalf of the CEO, and did not contribute to any individual pension arrangements.

12. Interest receivable

	Group 2022 £000	Group 2021 £000	Charity 2022 £000	Charity 2021 £000
Other interest receivable	**34**	18	**34**	18
	34	18	**34**	18

13. Taxation

Turning Point is a registered charity. Under Part 11 Corporation Tax Act 2010 and s.256 of the Taxation of Chargeable Gains Act 1992, it is entitled to exemption from Corporation Tax on donations, certain investment income and gains, property income, and on profits from any trading activities exercised in the course of carrying out a primary purpose of the charity, so long as they are applied to Turning Point's charitable purposes.

Turning Point (Services) Limited intends to donate a sum equivalent to any taxable profits to Turning Point, to reduce the company's tax liability to nil.

Northern Pathways Limited did not trade during the year and was dissolved on 12 April 2022. The company did not make a profit for tax purposes and does not have a Corporation Tax liability.

There were no factors that may affect future tax charges.

14. Housing properties

Group

	Housing properties £000
Cost	
At 1 April 2021	8,037
Additions	447
At 31 March 2022	8,484
Depreciation	
At 1 April 2021	3,892
Charge for the year	364
At 31 March 2022	4,256
Net book value	
At 31 March 2022	4,228
At 31 March 2021	4,145

The aggregate amount of finance costs included in the cost of housing properties is £nil (2021: £nil). The aggregate market value of the properties is, in the opinion of the Trustees, in excess of net book value.

	2022 £000	2021 £000
Housing properties cost comprise:		
Freeholds	**2,758**	2,554
Short leaseholds (less than 50 years)	**4,861**	4,617
Long leaseholds (more than 50 years)	**848**	848
	8,467	8,019
Expenditure on works to existing properties:		
Capitalised in the year	**447**	276
Charged to income and expenditure	**356**	448
	803	724

Charity

	Housing properties £000
Cost	
At 1 April 2021	8,037
Additions	447
At 31 March 2022	8,484
Depreciation	
At 1 April 2021	3,892
Charge for the year	364
At 31 March 2022	4,256
Net book value	
At 31 March 2022	4,228
At 31 March 2021	4,145

15. Tangible fixed assets

Group

	Motor vehicles £000	Fixtures and fittings £000	Office equipment £000	Software £000	Total £000
Cost					
At 1 April 2021	22	749	735	959	2,465
Additions	-	4	82	57	143
At 31 March 2022	22	753	817	1,016	2,608
Depreciation					
At 1 April 2021	13	691	627	828	2,159
Charge for the year on owned assets	5	28	85	39	157
At 31 March 2022	18	719	712	867	2,316
Net book value					
At 31 March 2022	4	34	105	149	292
At 31 March 2021	9	58	108	131	306

In accordance with the Housing SORP 2018, the overall cost of any property, fixtures and fittings, and office equipment has been split between significant components to enable each component to be depreciated according to its economic useful life.

Charity

	Motor vehicles £000	Fixtures and fittings £000	Office equipment £000	Software £000	Total £000
Cost					
At 1 April 2021	22	749	735	959	2,465
Additions	-	4	82	57	143
At 31 March 2022	22	753	817	1,016	2,608
Depreciation					
At 1 April 2021	13	691	627	828	2,159
Charge for the year on owned assets	5	28	85	39	157
At 31 March 2022	18	719	712	867	2,316
Net book value					
At 31 March 2022	4	34	105	149	292
At 31 March 2021	9	58	108	131	306

16. Fixed asset investments

Group

	Investments in joint venture £000
Cost or valuation	
At 1 April 2021	1
At 31 March 2022	1
Net book value	
At 31 March 2022	1
At 31 March 2021	1

Turning Point, Charity and Group, own 50% of the 1,000 £1 ordinary shares in Northern Pathways Ltd amounting to £500 (2021: £500). Northern Pathways Ltd was a jointly controlled company incorporated in Great Britain and was dissolved on 12 April 2022. It had total assets less current liabilities at 31 March 2022 of negative £154k (2021: negative £149k). Its trading loss for the year was £5k (2021: loss £16k).

Charity

	Investments in subsidiary companies £000
Cost or valuation	
At 1 April 2021	1
At 31 March 2022	1
Net book value	
At 31 March 2022	1
At 31 March 2021	1

Turning Point the Charity owns 100% of the 100 £1 ordinary shares in Turning Point (Services) Ltd amounting to £100 (2021: £100). Turning Point (Services) Ltd is a company incorporated in Great Britain that provides support services to the Charity. It has total assets less current liabilities at 31 March 2022 of £2,574k (2021: £2,575k). Its trading loss for the year after Gift Aid was £1k (2021: loss of £674k).

17. Debtors

	Group 2022 £000	Group 2021 £000	Charity 2022 £000	Charity 2021 £000
Rental debtors	**90**	129	**90**	129
Less: provision for bad debts	-	-	**-**	-
Net rental debtors	**90**	129	**90**	129
Due from statutory sources	**17,373**	14,851	**5,143**	2,690
Less: provision for bad debts	**(271)**	(230)	**(131)**	(183)
Net statutory debtors	**17,102**	14,621	**5,012**	2,507
Prepayments and accrued income	**6,860**	5,051	**2,368**	3,454
Other debtors	**231**	223	**231**	223
Amounts owed by group companies and joint ventures	**-**	-	**6,774**	4,627
	24,283	20,024	**14,475**	10,940

18. Cash and cash equivalents

	Group 2022 £000	Group 2021 £000	Charity 2022 £000	Charity 2021 £000
Cash at bank and in hand	4,772	7,791	4,694	7,767
	4,772	7,791	4,694	7,767

In October 2019, the Charity entered into a debenture with Turning Point (Services) Limited and Barclays Bank, which includes a cross guarantee and indemnity. If either Turning Point or Turning Point (Services) Limited defaults under any agreement entered into with Barclays Bank, then Barclays Bank may seek to recover any debts due to it from the other party. This debenture replaces the CAS Cross-guarantee dated March 2008 and the debenture dated December 2008.

Turning Point and Turning Point (Services) Limited have entered into this agreement to best facilitate when Turning Point (Services) Limited bids for contracts and they are delivered by Turning Point.

Turning Point holds a small number of bank accounts on behalf of clients who lack the required documents to open an account in their own name. Turning Point does not have control over the bank accounts. As a result, no amounts are recognised in the financial statements. The total held in such bank accounts as at 31 March 2022 was £93k (2021: £88k).

19. Creditors: Amounts falling due within one year

	Group 2022 £000	Group 2021 £000	**Charity 2022 £000**	Charity 2021 £000
Trade creditors	**1,592**	2,156	**1,592**	2,156
Other taxation and social security costs	**6,060**	10,271	**200**	4,546
Other creditors	**1,087**	170	**1,087**	170
Accruals and deferred income	**10,948**	6,718	**9,496**	5,911
	19,687	19,315	**12,375**	12,783

Barclays have a legal charge over 6 Penywern Road as security for Turning Point's overdraft facility.

20. Deferred income

	At 1 April 2021 £000	Deferred £000	Released £000	At 31 March 2022 £000
Group	2,159	4,340	(2,159)	4,340
Charity	1,351	2,888	(1,351)	2,888

Contract income and revenue grants are recognised as income in the period in which the performance criteria are met. Where funds are received for specific purposes and are potentially refundable if the conditions of the contract or grant are not satisfied, they will be deferred, with agreement of the funder, until the performance criteria are met.

21. Creditors: Amounts falling due after more than one year

	Group 2022 £000	Group 2021 £000	**Charity 2022 £000**	Charity 2021 £000
Social housing and other grants	**64**	70	**64**	70
	64	70	**64**	70

22. Financial Instruments

	Group 2022 £000	Group 2021 £000
Financial assets		
Financial assets that are debt instruments measured at amortised cost	**24,213**	24,782
	24,213	24,782
Financial liabilities		
Financial liabilities measured at fair value through profit or loss	**16,438**	16,521
Financial liabilities measured at amortised cost	**9,287**	6,885
	25,725	23,406

Financial assets that are debt instruments measured at amortised cost comprise trade debtors, other debtors and accrued income.

Financial liabilities measured at fair value through profit and loss comprise the pension provision, reinstatement provision and other provision.

Financial liabilities measured at amortised cost comprise bank loans, trade creditors, other creditors and accruals.

23. Provisions

	Pension provision £000	Reinstatement provision £000	Other provision £000	Total £000
Group and Charity				
At 1 April 2021	14,846	1,675	-	16,521
Additions	737	275	45	1,057
Releases	(1,140)	-	-	(1,140)
At 31 March 2022	14,443	1,950	45	16,438

The pension provision represents the discounted value of the agreed future contributions to be paid to the Turning Point defined benefit pension scheme by Turning Point. Turning Point agreed to pay contributions of £1,140k for the year from 1 April 2021 to 31 March 2022, with contributions then increasing in line with RPI each year until 31 March 2033.

The reinstatement provision of £1,950k (2021: £1,675k) represents the amount set aside, based on individual property contracts, to cover expected building costs when Turning Point returns its leased properties to the landlord.

24. Restricted reserves

	2022 £000	2021 £000
At 1 April 2021	**10**	-
Restricted Income	**418**	10
At 31 March 2022	**428**	10

Restricted reserves relate to income received to support the ADDER project. The £10k balance as at 1 April 2021 was fully spent in the year and related to support for adult social care providers to reduce the transmission of COVID-19 within and between care settings.

25. Legislative provisions

The Charity and its subsidiary are incorporated under the Companies Act 2006.

26. Contingent assets

Group

The Group has £nil in contingent assets at 31 March 2022. This represents income considered possible at that date.

The Group had £9k in contingent assets at 31 March 2021. This represented income considered possible at that date, £9k was received in the year ended 31 March 2022.

Charity

The Charity has £nil in contingent assets at 31 March 2022. This represents income considered possible at that date.

The Charity had £9k in contingent assets at 31 March 2021. This represented income considered possible at that date. £9k was received in the year ended 31 March 2022.

27. Capital grants

	2022 £000	2021 £000
At 1 April 2021	**70**	85
Amortised in year	**(6)**	(15)
At 31 March 2022	**64**	70

28. Bedspaces

	Care Homes No.	Supported Living No.	Total No.
At 1 April 2021	384	588	972
Additions	12	1	13
Disposals	-	(35)	(35)
At 31 March 2022	396	554	950

29. Capital commitments

At 31 March 2022 the group had capital commitments of £nil (2021: £nil).

30. Pension commitments

Turning Point Pension Scheme

The total net pension cost for the group for the year was £2,622k for the defined contribution pension scheme (2021: £2,365k) and £1,140k for the defined benefit pension scheme (2021: £1,103k). Turning Point participated in the Turning Point Pension Scheme ("The Scheme") which is a defined benefit pension scheme. This is a multi-employer scheme covering Turning Point and Turning Point Scotland employees (and former employees). Turning Point Scotland left the Group and became a separate entity in 1999.

The Turning Point Pension Scheme is a defined benefit plan but is being accounted for as a defined contribution plan because the Scheme is a multi-employer non-segregated arrangement. This means that the assets and liabilities of the Scheme are not separately identified for the two participating employers.

The latest completed triennial actuarial valuation took place on 31 March 2019. The results showed assets of £100m, liabilities of £135m, and a deficit of £35m on a technical provisions basis. In order to remove the deficit, Turning Point agreed to pay contributions of £1,140k for the year from 1 April 2021 to 31 March 2022, with contributions then increasing in line with RPI each year until 31 March 2033.

Turning Point Scotland agreed to pay contributions of £343k for the year from 1 April 2021 to 31 March 2022, with contributions then increasing in line with RPI each year until 31 March 2033.

Contribution levels are subject to review at subsequent actuarial valuations.

The Scheme assets comprise 20% equities, 22% government and corporate bonds, 23% diversified growth funds, 33% Liability Driven Investment (LDI) and 2% property as at 31 March 2022.

We understand that the Scheme is set up on a "last man standing basis" whereby if one employer becomes insolvent, the other employer will be responsible for all the scheme's liabilities.

The pension liability shown on the balance sheet is measured as the discounted present value of the contributions payable by Turning Point to eliminate its share of the Scheme's deficit. The deficit contributions are agreed with the Scheme's Trustees as part of the three-yearly actuarial valuation of the Scheme. The rate used to discount the future contributions is made by reference to market yields at the reporting date on high quality corporate bonds whose term is consistent with the estimated period of the future contributions. The unwinding of the discount rate is recognised as a finance cost in profit or loss in the period in which it arises.

Local Government Pension Schemes

Turning Point employs members of 3 Local Government Pension Schemes (LGPS) due to the takeover of services. These LGPS are funded defined benefit schemes, with assets held in separate trustee-administered funds.

The total defined benefit pension cost recognised in the Statement of Comprehensive Income is £337k and the projected cost for the year to 31 March 2023 is £336k.

Turning Point has bonds totalling £381k provided to commissioners in respect of some of the LGPS.

The reconciliation of the net pension scheme liability below relates to the Local Government Pension Schemes.

NHS Pension Scheme

Turning Point has employees who are covered by the provisions of the NHS Pension Scheme. Details of the benefits payable and rules of the scheme can be found on the NHS Pensions website at www.nhsbsa.nhs.uk/pensions. The scheme is an unfunded defined benefit scheme that covers NHS employers, GP practices and other bodies, allowed under the direction of the Secretary of State for England and Wales. They are not designed to be run in a way that would enable NHS bodies to identify their share of the underlying scheme assets and liabilities.

Therefore, each scheme is accounted for as if it were a defined contribution scheme. The cost to Turning Point of participating in each scheme is taken as equal to the contributions payable to that scheme for the accounting period. The contributions payable to the scheme by Turning Point for the year to 31 March 2022 were £670k.

In order that the defined benefit obligations recognised in the financial statements do not differ materially from those that would be determined at the reporting date by a formal actuarial valuation, the Government Financial Reporting Manual (FReM) requires that "the period between formal valuations shall be four years, with approximate assessments in intervening years". An outline of these follows:

a) A valuation of scheme liability is carried out annually by the scheme actuary (currently the Government Actuary's Department) as at the end of the reporting period. This utilises an actuarial assessment for the previous accounting period in conjunction with updated membership and financial data for the current reporting period, and accepted as providing suitably robust figures for financial reporting purposes.

   The valuation of scheme liability as at 31 March 2022, is based on valuation data as 31 March 2019, updated to 31 March 2022 with summary global member and accounting data. In undertaking this actuarial assessment, the methodology prescribed in IAS 19, relevant FReM interpretations and the discount rate prescribed by HM Treasury have also been used.

   The latest assessment of the liabilities of the scheme is contained in the scheme actuary report, which forms part of the annual NHS Scheme (England and Wales) Pension Accounts. These accounts can be viewed on the NHS Pensions website and are published annually.

b) The last published actuarial valuation undertaken for the NHS Pension Scheme was completed for the year 31 March 2019. The Scheme Regulations allow for the level of contribution rates to be changed by the Secretary of State for Health, with the consent of HM Treasury, and consideration of the advice of the Scheme Actuary and appropriate employee and employer representatives as deemed appropriate.

Reconciliation of present value of LGPS plan liabilities and assets

	2022 £000	2021 £000
Reconciliation of present value of plan liabilities:		
At 1 April 2021	**9,330**	7,059
Current service cost	**292**	258
Interest cost	**202**	165
Actuarial losses	**172**	1,844
Contributions from participants (including benefits paid)	**(7)**	4
At 31 March 2022	**9,989**	9,330

	2022 £000	2021 £000
Reconciliation of present value of plan assets:		
At 1 April 2021	**7,313**	5,662
Interest income	**157**	134
Actuarial gains	**2,396**	1,186
Contributions from participants (including benefits paid)	**(7)**	4
Employer contributions	**130**	327
At 31 March 2022	**9,989**	7,313

	2022 £000	2021 £000
Fair value of plan assets	**9,989**	7,313
Present value of plan liabilities	**(9,989)**	(9,330)
Net pension scheme liability	**-**	(2,017)

The amounts recognised in the statement of comprehensive income are as follows:

	2022 £000	2021 £000
Current service cost	**292**	258
Interest cost	**45**	31
Total	**337**	289

Principal actuarial assumptions at the statement of financial position date (expressed as weighted averages):

	2022 %	2021 %
Discount rate	**2.70 – 2.75**	2.10 – 2.15
Future salary increases	**3.65 – 4.25**	2.00 – 3.95
Future pension increases (CPI)	**3.00 – 3.15**	2.60 – 2.70

	2022 %	2021 %
Mortality rates		
For a male aged 65 now	**21.5 – 21.8**	21.7 – 21.9
At 65 for a male aged 45 now	**22.4 – 22.5**	22.6
For a female aged 65 now	**24.0 – 24.6**	24.2 – 24.7
At 65 for a female aged 45 now	**25.7**	25.8 – 25.9

	2022 %	2021 %
Major categories of plan assets as a percentage of total plan assets		
Equities	**60**	62
Property	**8**	8
Bonds	**29**	25
Cash	**3**	5

31. Leasing commitments

Future minimum lease payments under non-cancellable operating leases are as follows:

	2022 £000	2021 £000
Group and Charity		
Land and buildings		
Within one year	**1,404**	1,599
Within two to five years	**992**	1,057
After five years	**148**	39
	2,544	2,695
Other		
Within one year	**765**	857
Within two to five years	**878**	1,076
After five years	**-**	5
	1,643	1,938

32. Related party transactions

Group and Charity

Turning Point, Turning Point (Services) Ltd and Northern Pathways Ltd are all entities incorporated in the United Kingdom. Turning Point is the only entity registered with the Housing Regulator and is the parent company of Turning Point (Services) Ltd, a wholly owned subsidiary. Turning Point is required to prepare consolidated financial statements that consolidate the accounts of the Charity and Turning Point (Services) Limited. Northern Pathways Ltd is a jointly controlled entity, controlled equally by Turning Point and The Retreat York. It is accounted for in the Charity and consolidated accounts under the equity method of accounting. Turning Point Building Futures Ltd was a wholly owned subsidiary of Turning Point until it was dissolved on 1 December 2020.

During the year, Turning Point (Services) Ltd made an operating profit of £1,241k (2021: £1,253k). £1,232k (2021: £1,242k) will be gift aided to Turning Point. As at 31 March 2022, Turning Point (Services) Ltd owed Turning Point £6,774k (2021: £4,628k).

Turning Point incurs all of the costs associated with providing healthcare and social care services to commissioners, including the employment of staff and contracting with suppliers. Turning Point charges Turning Point (Services) Ltd a percentage of the total income due to Turning Point (Services) Ltd each month, which reflects the risk that costs might exceed income in the future. The total recharged in the year was £105,670k (2021: £100,204k).

Northern Pathways Ltd was a jointly controlled entity between Turning Point 50% and The Retreat York 50% and was dissolved on 12 April 2022. During the year, Northern Pathways Ltd made an operating loss of £5k (2021:£16k).

As at 31 March 2022, Northern Pathways Ltd owed Turning Point £80k (2021: £105k) in relation to the management fee for providing the central function support and supplier invoices paid on their behalf. The charges for central function support and recharges of supplier invoices totalled £nil (2021: £nil).

NHS contracts are not deemed to be a related party transaction for 2021/22.

33. Subsidiary undertakings

The following were subsidiary undertakings of the Charity:

Name	**Class of shares**	**Holding**	**Principal activity**
Turning Point (Services) Limited	Ordinary	100%	The provision of health and social care services primarily to people with drug or alcohol issues, mental health issues or a learning disability.

Registered office
Standon House, 21 Mansell Street, London E1 8AA

The aggregate of the share capital and reserves as at 31 March 2022 and of the profit or loss for the year ended on that date for the subsidiary undertakings were as follows:

	Aggregate of share capital and reserves £000	Profit/(loss) £000
Turning Point (Services) Limited	2,574	1,241
	2,574	1,241

Company information

Turning Point is a private company limited by guarantee without share capital, incorporated in England on 27 February 1964.

Non-executive directors

- Peter Hay (Chair)
- Paul Picknett (Vice Chair)
- Dr. Alison Hill (tenure ceased 3 July 2021)
- Nicola Gilham
- Christian Van Stolk (appointed 11 December 2020)
- Dr Victoria Tzortziou Brown (appointed 11 May 2021)

Executive directors

- Julie Bass
- Amarjit Dhillon

All of the above are key management personnel of Turning Point Group and the Charity

Registered Office

Standon House
21 Mansell Street
London
E1 8AA

Registered company number

00793558

Registered charity number

234887

Registered provider code

H2509

Auditors

Crowe U.K. LLP
3rd floor
The Lexicon
Mount Street
Manchester
M2 5NT

Bankers

Barclays Bank PLC
Level 11
20 Chapel Street
Liverpool
L3 9AG

Solicitors

Eversheds Sutherland (International) LLP
Eversheds House
70 Great Bridgewater Street
Manchester
M1 5ES

We are inspired by possibility. The possibility that every single one of us can change and grow, make choices, and live healthier and happier lives. With our expertise in working in the areas of substance misuse, mental health, sexual health, healthy lifestyles and learning disability, including with people with complex needs, we aim to continue to adapt to an ever changing external environment in order to extend our reach and support more people to improve their health and wellbeing.

Contact us

Head Office
Standon House
21 Mansell Street
London
E1 8AA

T: 020 7481 7600
E: info@turning-point.co.uk

www.turning-point.co.uk

TURNING POINT
inspired by possibility

TURNING POINT

England & Wales - Charity number 234887

Accounts

TURNING POINT
inspired by possibility

Annual Report

2020/21

Who we are

Turning Point is a leading social enterprise providing health and social care services across England supporting people to improve their health and wellbeing whether that is at home, within the workplace or through specialist services.

In doing so we build upon well over five decades of experience in the fields of substance misuse, mental health, learning disability, autism, acquired brain injury, sexual health, healthy lifestyles and employment services.

What we do

Our core business is delivering health and social care services for the public sector.

Our mental health, sexual health, substance misuse, learning disability, healthy lifestyles and employment services are commissioned largely by local authority adult social care and public health teams. Our services are also commissioned by NHS trusts and clinical commissioning groups, NHS England, Public Health England and the Department for Work and Pensions.

Through our commercial ventures, we deliver health and wellbeing services in the workplace and to individuals directly. As a social enterprise any surplus is invested back into the business, ensuring that the value created is sustained over the longer term for the benefit of the people we support.

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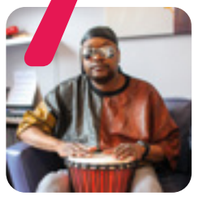

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Our year in numbers

Turnover in 2020/21 — **£132m**

132,783 — People supported in 2020/21

People supported by our mental health services — **67,819***

59,009 — People supported by our drug and alcohol services

Number of team members — **4,501**

2,382 — People supported by our healthy lifestyle's services

People supported by our employment services — **1,490**

1,186 — People supported by our learning disability services

People supported by our sexual health services — **897**

318 — Number of locations services delivered from

Number of peer mentors — **168**

91% — Regulated services rated Good or Outstanding by CQC

Number of volunteers — **90**

59% — Percentage of team members with lived experience of the issues facing people we support

Number of student placements — **35**

*includes support provided by livelife and Rightsteps

Our vision and values

Turning Point's vision is to constantly find ways to support more people to discover new possibilities in their lives. The people we work with inspire us and in turn we look for new ways to inspire changes. We owe it to the people we work with to grow and shape the future, because we believe in what we do.

We treat each other and those we support as individuals however difficult and challenging.

We are here to embrace change even when it is complex and uncomfortable.

We believe that everyone has the potential to grow, learn and make choices.

We all communicate in an authentic and confident way that blends support and challenge.

We commit to building a strong and financially viable Turning Point together.

We deliver better outcomes by encouraging ideas and new thinking.

Chair and Chief Executive statement's

2020/21 was a year like no other. Turning Point has continued to provide services throughout the pandemic, adapting to government guidance to the health and care sector that has constantly changed.

I would like to take this opportunity to thank our Chief Executive Julie Bass for steering the organisation through a period of national crisis, prioritising the safety of team members and the people we support, while continuing to promote innovation and look to the future.

Julie is supported in her role by a strong and tenacious senior leadership team and team members that go above and beyond to keep the people we support safe and well. With that in mind, I extend a warm welcome to Christian Van Stolk who joins us as a Non-Executive Board Member as well as wishing farewell to Helen Spice who left us in June and Chris Parker who retired in December after many years of service with us. I wish them well in the future.

It is with great sadness that our Non-Executive Board Member Dr Alison Hill passed away in July 2021. Alison joined our Board in September 2017, generously sharing her extensive experience as a GP, as well as her health policy knowledge. She will be greatly missed. We dedicate this annual report to her as a token of our immense gratitude to her significant contribution

This report is a wonderful showcase of the organisation's agility and responsiveness during the pandemic. Financially, we are in a strong position going into 2021/22 and I feel confident that we will be able to respond and adapt to what is likely to be a period of significant flux in the health and social care sector over the coming years.

Peter Hay
Chair of the
Turning Point Board

This report is a wonderful showcase of the organisation's agility and responsiveness during the pandemic.

My first year as Chief Executive at Turning Point has been a year of immense challenge but also of much learning and growth both for me personally and for the organisation.

Health and social care workers have been at the frontline of the crisis facing our country. I personally want to thank every single team member at Turning Point for their commitment and dedication as they continued to work tirelessly in extremely challenging conditions throughout the year.

I am extremely proud of the organisation's response to the pandemic. We have placed the people we support and our team members at the centre of all decision making ensuring their safety through strong infection control measures; quickly developing new ways of working in response to the pandemic; working with our commissioners to mobilise new services to relieve pressure on the acute sector; developing innovative new services to support the most vulnerable, e.g. street homeless; and campaigning against discrimination resulting from the pandemic.

I am extremely proud of the organisation's response to the pandemic. We have placed the people we support and our team members at the centre of all decision making.

Supporting the health and wellbeing of our team members has been a key priority and we were delighted to see the positive impact of this through the results of our employee engagement survey. We have continued to look for opportunities to maximise the social value of our work, for example with our Rightsteps team making a range of materials available to the general public to help people manage their own mental wellbeing over the course of the year.

As well as responding to the challenges at hand as the pandemic evolved, we have also been very focused on the future, engaging with a range of internal and external stakeholders as we develop our strategy for the 2022/27 period. We have secured new contracts, with our Hackney and City Substance Misuse service opening mid pandemic in October 2020 and other important services opening to support people's mental health in areas such as Nottingham.

The years ahead are likely to present a period of significant change in the external environment. The impact of the pandemic on demand for mental health and addiction services in the coming years is likely to be considerable. There will also be significant reform to drug and alcohol treatment services following Dame Carol Black's review of the sector, the long-promised social care reform and the impact of the NHS White Paper which will have a great impact on the commissioning environment for mental health services.

This report is an opportunity to reflect on our achievements over the past year, which demonstrate that as an agile and responsive organisation, Turning Point is well-placed to adapt in an ever-changing external environment as we pursue our strategic path and extend our reach.

Julie Bass
Chief Executive
of Turning Point

Navigating the health and social care landscape

The health and social care landscape has been dominated by the presence of COVID-19; the threats of the pandemic have necessitated major shifts in how we provide services and respond to changing needs. Alongside this, the pressures and demands that have challenged the health and social care system for the last decade have not disappeared and continue to put major stresses on providers.

Demands on services have risen markedly throughout the pandemic. Already stretched mental health services are predicted to deal with approximately 8.5 million adults and 1.5 million children in England who will need support for depression, anxiety, post-traumatic stress disorders and other mental health difficulties in the coming months and years. That is the equivalent of 20% of all adults and 15% of all children.[1]

Anecdotal evidence regarding an increase in acuity of people suffering from a mental illness have surfaced, even before the pandemic. A "surge" in mental health need arising from the stresses of COVID-19, including grief and PTSD, social and financial anxiety and the emerging issue of "Long COVID" which describes a cluster of symptoms including psychiatric distress has been discussed. There are estimates of an 11% increase in mental health demand year on year for the next three years (NHS Strategy Unit).

The belief that the pandemic would lead to an increase in suicide is claimed by researchers to be unfounded, especially in the first wave. (National Confidential Inquiry into Suicide and Safety in Mental Health. Suicide in England since the COVID-19 pandemic: early figures from real time surveillance). It is important to point out however that because of the amount of time it takes to register a suicide, the actual effects are not yet known. Ambulance units are reporting an approximately 20% increase in calls to suicide attempts, and similar increases of calls to helplines.

Investment in community mental health services and improved collaboration across primary and secondary services was a priority in the NHS long-term plan published in 2019 and this has been bolstered by further investment announced in response to the pandemic.[2] Over the past 12 months, the Government committed to reforming the Mental Health Act by producing a White Paper on the issue.[3] It seeks to empower individuals to have more control over their treatment.

1 www.centreformentalhealth.org.uk/news/10-million-people-england-may-need-support-their-mental-health-result-pandemic-says-centre-mental-health

2 www.gov.uk/government/news/mental-health-recovery-plan-backed-by-500-million

3 www.gov.uk/government/consultations/reforming-the-mental-health-act/reforming-the-mental-health-act

It also has a welcome focus on achieving parity between mental and physical health, and aims to reduce the number of detentions, particularly among black men. The reforms will only be successful if accompanied by significant investment in community services which Turning Point is well-placed to deliver.

The creation of the National Institute of Health Protection[4] and resultant abolition of Public Health England was a response to the pressures brought about by COVID-19 and the need for a more robust public health system. The changes merged the existing health protection responsibilities with the Joint Biosecurity Centre and NHS Test and Trace. However, notably absent from these announcements was where wider public health functions would sit, which has created uncertainty. In addition public health funding remains problematic. Public Health grant allocations fell in real terms from £4.2 billion in 2015–16 to £3.3 billion in 2021–22. On a per head basis that equates to a 24% cut since 2015–16.[5] The publication of Dame Carol Black's independent review into drug treatment may well herald a shift in drug policy and greater investment in the treatment sector and wrap-around services such as supported housing.

In February 2021, the Government released the White Paper, 'Integration and innovation: working together to improve health and social care for all'.[6] This marked the biggest shift within the NHS since the 2012 Health and Social Care Act. This White Paper removes the bedrock of the NHS since 2012 in the form of Clinical Commissioning Groups (CCGs) and replaces them with larger bodies known as Integrated Care Systems (ICSs). These changes seek to promote a new model of collaboration, partnership and integration. This includes integration within the NHS to enable NHS organisations to work together across a system; and integration between the NHS, local authorities and other partners to deliver improved outcomes for the health and wellbeing of their populations. These changes will have an impact on the provision of mental health services which are currently commissioned by CCGs but will now be commissioned by ICSs. Moreover, the changes outlined loosen competition and procurement rules which increases the likelihood of these services being provided in-house by the NHS rather than independent providers.

On 19 March 2020, the Supreme Court published its decision on the sleep-in case.[7] In interpreting the National Minimum Wage (NMW) legislation, the court's ruling took into account the recommendation of the Low Pay Commission that workers who sleep-in, are entitled only to the NMW for hours when they are actually working. This case had the potential to severely damage the social care sector which would have owed £400 million in back pay for care staff who worked sleep-in shifts. Despite the positive financial impact on the sector, the ruling is rightly likely to call for better pay for social care workers as part of the debate on wider social care reform.

The number of people with a learning disability in long stay hospitals remains an important issue. As of April 2020, there were still 2,040 learning disabilities and/or autism inpatients at the end of the month with 1,195 (59%) of these having had a total length of stay over two years. The pandemic will have had its impact but this is still totally unacceptable and a renewed focus for the future is vital.

Public health grant allocations fell in real terms from £4.2 billion in 2015–16 to £3.3 billion in 2021–22. On a per head basis that equates to a 24% cut since 2015–16.[5]

4 www.gov.uk/government/publications/the-future-of-public-health-the-nihp-and-other-public-health-functions/the-future-of-public-health-the-national-institute-for-health-protection-and-other-public-health-functions

5 qna.files.parliament.uk/ws-attachments/1302833/original/DHSC%20allocations%20circular%202021-22%20(002).pdf

6 www.gov.uk/government/publications/working-together-to-improve-health-and-social-care-for-all/integration-and-innovation-working-together-to-improve-health-and-social-care-for-all-html-version

7 www.supremecourt.uk/cases/docs/uksc-2018-0160-judgment.pdf

Our strategic intent

Our current strategic period runs from April 2017 through to March 2022 and stakeholder engagement in our new strategy commencing April 2022 is already beginning.

The current strategy will see Turning Point forging a new era of health and social care delivery, drawing upon 56 years of experience and building on the significant changes seen in the pandemic as we seek opportunities to further integrate health and social care while extending our reach and effectiveness through the opportunities presented by technology.

Our goals

People

To recruit, retain and develop high performing individuals and teams who are driven by our values, passionate about delivering innovative, high quality services and who inspire possibility in each other and in the people we support.

Quality

To ensure that we deliver on our promises to our clients, customers and the people we support, meeting or exceeding their expectations in terms of both quality and cost.

Innovation

To innovate in the way we operate, finding new ways of supporting people and embracing digital technology.

Diversification and Integration

To extend our reach into services which improve health and wellbeing in the population.

Working closely together as one Turning Point, sharing our knowledge and expertise, we will provide integrated services to the people who need them to simplify and improve their support.

Growth

To realise our vision through responsible growth and by retaining and increasing our market share for our existing products.

Financially Secure

To ensure that we are financially secure for the future and that we can continue to reinvest in our services, in innovation and improvement and in our people.

Our stakeholders

Section 172(1) statement

The Board has a duty to act in the best interests of the organisation and also in the best interests of the people we serve, as recognised beneficiaries under company and charity law. The Board fulfils this duty considering the long-term factors affecting the company and its wider relationship with stakeholders.

The stakeholders of the organisation include the people we support, local communities, our team members, the purchasers of our services (public sector commissioners, businesses and private pay clients), our regulators and our suppliers. The strategic intent and core business model drive our activity and ensure that stakeholder engagement informs principal decisions by the Board and the Operating Board.

We engage with our stakeholders in a range of ways

The people we support

Our service user involvement toolkit supports services to gather feedback and involve service users in decisions about how local services are managed. All services have service user forums and our regional people's parliaments bring together the people with a learning disability that we support, to provide feedback, raise concerns or make suggestions about the support we provide. Services routinely analyse compliments, suggestions, concerns and complaints, learning from these in order to identify areas for improvement. At a national level, we undertake a national service user survey each year and there is a national service user involvement network which brings together leads from each service to share feedback and learning. Paid and volunteer peer support roles within our substance misuse and mental health services bring lived experience into the staff team which ensures services are responsive to local need. Within our substance misuse services, part of the role of peer mentors is to undertake expert-by-experience quality audits and a number of people with a learning disability that we support have received training to work as quality reviewers to support our internal quality assurance processes. Our Directors visit services each year as a key means of engaging directly with the people supported by Turning Point and the team members delivering that support.

Communities and local partners

Each of our services has an Equality, Diversity and Human Rights (EDHR) action plan which reviews feedback from local stakeholder engagement e.g. with local charities, community and faith organisations as well as the local health and social care system and sets out how the service is going to respond to any issues raised. Local EDHR Action Plans cover how services work positively and collaboratively with partners in local systems and communities in order to meet the needs of their local population, improve access for under-represented groups and involve service users in improving services.

Team members

We undertake regular employee engagement surveys and have an established national employee voice forum. The forum, comprising a strong mix of representatives from across our organisation, was created to help grow our employee voice, encouraging a two-way dialogue that deepens understanding, respect and innovation, ultimately to strengthen operational performance across our many services and central locations.

Purchasers

We engage with our public sector commissioners at all stages of the commissioning cycle e.g. through market engagement exercises, competitive dialogue, contract monitoring and the re-tender process. We work closely with commissioners to transform services, so they better meet people's needs and provide better value for money.

Care Quality Commission

As a provider of regulated services, our relationship with the Care Quality Commission (CQC) is materially important to the people we support and their families as well as to us as a values-based social enterprise. An Operating Board member and the Head of Risk and Assurance meet with the CQC corporate provider relationship manager around three times per year and we have developed a strong and productive relationship over the years. We also have nominated people across the organisation – one for each type of regulated activity we provide – to liaise with the CQC on specific details regarding that type of regulated activity.

Suppliers

Our business model has a material reliance upon key suppliers for the delivery of agency staff, technology, facilities management and infection control/harm reduction products and services. Appropriate risk-based relationships are maintained with these suppliers to ensure the business model and value-chain is secure to meet the needs of our beneficiaries. This year we have introduced social value into our contract award decision-making processes in order to further extend our social impact.

Ensuring good governance

The Board is committed to the principles of good governance and subscribes to the Wates Principles as its governance code. The Board conducts annual effectiveness reviews with an externally facilitated review every third year. The company has robust policies on risk management, anti-fraud, bribery and corruption, procurement, information governance and clinical governance.

Acting fairly between members of the company

Turning Point has a trading subsidiary Turning Point (Services) Limited with which it has entered into an inter-company agreement to deliver health and social care services as a sub-contractor. The company is committed to ensuring it fully meets all contractual obligations for the delivery of health and social care services whether delivered directly or indirectly.

Our people

Supporting our workforce throughout the pandemic

Supporting a geographically dispersed workforce of over 4,000 team members, peer mentors and volunteers required new and agile ways of communicating and engaging with our people. Our aim was to ensure people felt safe, supported and connected to each other and understood the wider organisational response throughout the pandemic. New communication channels were introduced to enable this through a central COVID-19 monitoring team using a dedicated microsite as a one-stop location for all communications, support and government guidance. This work was supported through daily cascades, text messages, video updates and webinars to keep everyone informed of the rapidly changing situation, while being responsive to all queries from managers and team members.

To keep people fit and well, our health and wellbeing offer was expanded to include access to our Rightsteps wellbeing self-guided content, Rightsteps counselling single session emotional support, mindfulness sessions and signposting to external resources. We also introduced a range of financial wellbeing support through the Rightsteps partnership with Secondsight, in addition to changes to sick pay for COVID-19 absences and access to advanced payments for additional hours worked. This work was showcased in the health and wellbeing section on the COVID-19 microsite, and the subsequent development of another microsite to collate and to further build on this content, both for and beyond the pandemic.

Increased use of Personal Protective Equipment (PPE) was central to our approach to keeping people safe and healthy, from sourcing, distribution and monitoring from hubs and a dedicated PPE app, right through to training, guidance and peer support on its everyday use. This coupled with robust infection control procedures meant new ways of working were well within government guidelines.

As well as advances in infection control, testing, PPE and the treatment of COVID-19 in hospital settings, vaccines played a central role in protecting the people we support and the people we employ. As an organisation, we strongly encouraged everyone who was able to receive a vaccine to have one. We mobilised around creating access to vaccines through different routes, as well as creating spaces for people to discuss their experiences and considerations in having one. Communications in this area included webinars, FAQs, myth-busting and progress updates – all supported by a strong leadership voice from our clinical experts and guidance for line managers on having sensitive conversations around vaccines.

We aim to have a strong employee voice with regular opportunities to provide feedback on the employee experience the organisation provides and how we can improve. We surveyed team members following the first wave of the pandemic to gather their views on how the organisation had responded and where we needed to focus next. The survey results showed the following percentage of people agreed with the following statements:

82% My organisation is managing the changes resulting from COVID-19 effectively.

74% I believe that my organisation cares about its team members.

83% My manager is supporting me during this time of change.

79% I am able to perform my role effectively under the new arrangements resulting from COVID-19.

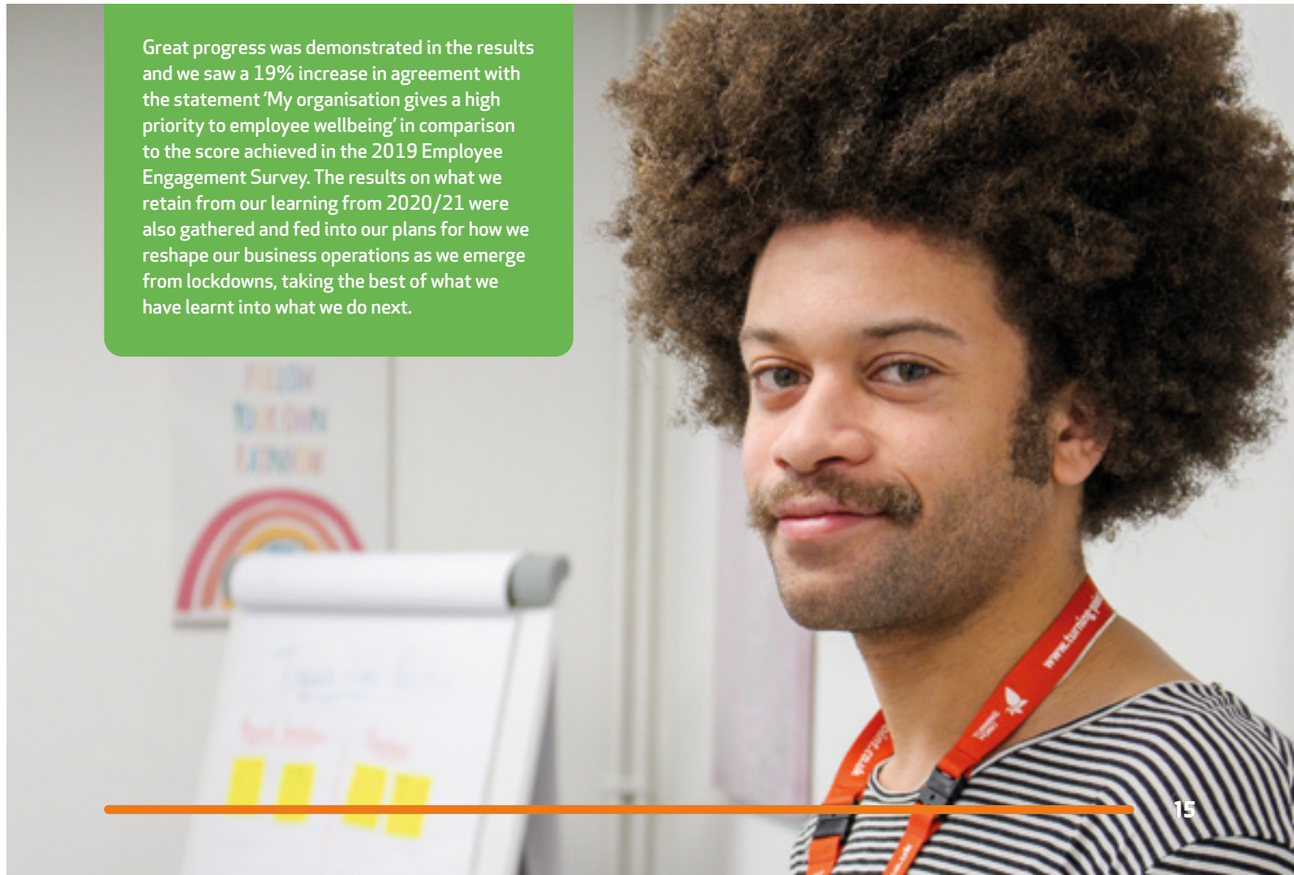
80% I have access to all the equipment I need to perform my role effectively and safely.

89% I have been kept well-informed about my organisation's response to COVID-19.

85% I have access to the support and advice I need from my organisation at this time.

71% My organisation is giving me the help I need to manage my mental wellbeing effectively.

Great progress was demonstrated in the results and we saw a 19% increase in agreement with the statement 'My organisation gives a high priority to employee wellbeing' in comparison to the score achieved in the 2019 Employee Engagement Survey. The results on what we retain from our learning from 2020/21 were also gathered and fed into our plans for how we reshape our business operations as we emerge from lockdowns, taking the best of what we have learnt into what we do next.



Turning Point and Rightsteps Story

Supporting the wellbeing of our workforce

Within days of the COVID-19 situation escalating in March, our employee health and wellbeing arm – Rightsteps – brought together a multidisciplinary team of wellbeing experts and organisational representatives to swiftly analyse and respond to team members' wellbeing needs. The requirement for COVID-19 specific support solutions that reflected the emerging needs was immediately recognised, as was the need to deliver support in ways that were accessible and could reach team members from across the country working in new and extremely challenging situations.

Rightsteps' clinical psychologists developed weekly online support packages that were distributed via text message to all team members, as well as via Turning Point's internal communications network. A microsite of wellbeing resources for managers and team members was created within a matter of days and then developed over the following weeks and months to provide a 'one-stop-shop' for all wellbeing support. Team and individual debrief sessions were delivered remotely in response to difficulties arising from the challenging situation team members faced and access to emotional-related support sessions over the telephone was provisioned for all team members. To support team members further, weekly open access webinars were developed, delivered and facilitated by subject matter experts on key themes such as resilience, anxiety and loneliness. All activities were coordinated by the single multidisciplinary team, communicated via our employee engagement specialists and led by the Chief Executive.

Within six months and through a highly demanding situation, Turning Point's wellbeing approach saw the online support packages accessed over 3,400 times by team members, over 500 team members attended the Wellbeing Webinars with representation from across the organisation, and a team member survey showed a huge increase in how team members felt their wellbeing was valued and supported.

Continuing to build an inclusive culture

At Turning Point we are focused on increasing diversity and inclusion because we value and embrace difference, be that opinion, ways of working or unique backgrounds or characteristics. By doing this we are creating a great organisation to work for and one that is high-performing, profitable and innovative. We developed a new Diversity and Inclusion Strategy to take forward this work, setting the scene for the organisation's ambitions.

With the disproportionate impact of COVID-19 on Black, Asian and minority ethnic communities and the Black Lives Matter movements here in the UK and abroad, this year we created a safe space for team members from diverse communities to discuss these areas and explore what it meant for them, as well as providing a forum for peer support. Learning from this work has seen plans formed to create more formal employee networks for Black, Asian and minority ethnic team members, those who identify as LGBTQ+ and team members living with a disability. We have also continued to develop our Employee Voice National Forum, which has helped guide our work during the pandemic and offered a valuable route for employee feedback, keeping the organisation connected to experiences on the ground.

Celebrations of diversity were created through regular webinars covering prominent moments throughout the year where team members shared their dimensions of difference, reflecting the lived experience of team members delivering our services as well as the experiences of diverse groups of people we support. We have supported this further through the development of a Diversity and Inclusion microsite with links to training and resources to help create greater levels of knowledge, understanding and inclusion.

We have strengthened our capability in this area further with the following accreditations which shape the experience we provide our team members and ultimately those we support:

- **Stonewall Diversity Champion:** We are now a Stonewall Diversity Champion, the leading employers' programme for ensuring all LGBT team members are accepted without exception in the workplace. With Stonewall we share a core belief in the power of a workplace that is truly equal, and we are working to the standards Stonewall set for all employers.
- **Mindful Employer:** As an employer and provider of mental health services, we recognise that in the UK people experiencing mental ill health continue to report stigma and discrimination at work. Having signed up to Mindful Employer's Charter for Employers Positive about Mental Health, we are committed to creating a supportive and open culture, where team members feel able to talk about mental health confidently and we aspire to appropriately support the mental wellbeing of all team members.

Supporting team members experiencing the menopause

Through our Rightsteps employee health and wellbeing specialists, we were able to offer online cognitive behavioural therapy (CBT) to women experiencing the menopause. The web-based CBT sessions cover managing troublesome symptoms – such as hot flushes and night sweats.

Menopause is a natural and inevitable part of life for women, including those aged over 50 who are the fastest growing portion of the UK workforce. Rightsteps says the CBT support will provide strategies to overcome stigma, which often prevents female team members and other people from seeking help, including from their employer, occupational health team or GP.

The sessions have been devised with the guidance of Professor Myra Hunter whose research has found that this brief therapy can assist in managing problematic signs of menopause. Professor Hunter, from King's College London said:

"Women's experience of the menopause varies widely – there's no one-size-fits-all approach. What employers can do is help those who need it get the right support. CBT is one approach that has been shown to reduce the impact of symptoms and improve quality of life."

Celebrations of diversity were created through regular webinars covering prominent moments throughout the year where team members shared their dimensions of difference.

Recognising and celebrating outstanding achievements

Over the last year, our team members have worked even harder than usual to maintain our services, showing our values in action as we look after each other as well as the people we support, with all these efforts worthy of wider recognition and celebration.

To recognise our team's efforts, we made enduring improvements to our approach to sick pay and also gave an additional day of annual leave to all team members to recognise their collective hard work during the extremely difficult times of the pandemic. Senior leaders and line managers have also reached out to individuals personally to recognise the extraordinary efforts being made day-to-day in our services.

Our Inspired by Possibility Awards are designed to acknowledge inspirational team members who are clearly demonstrating our values. As a result of COVID-19 restrictions, this year the event took place online and celebrated 28 team members and five teams for their outstanding achievements. Our peer mentors and volunteers are critical members of our wider workforce and a similar recognition scheme was held to celebrate their contributions, and for some of those recognised, this marked a continuation in their recovery as they shared their lived experience in the mentoring of others.

The pandemic challenged us, both in terms of how we remained connected as teams and to the work we were doing in supporting people across our services or working from home. With traditional festive seasons celebrations put on hold, we focused efforts to conclude the year with December as a month of connection, celebration and fun. This included an exploration of the festive period from a multi-faith perspective, wellbeing webinars, competitions, quizzes, artistic efforts and even the sharing of pets on a live video call – all of these activities focusing on recognition and celebrating the end of an incredibly challenging year.

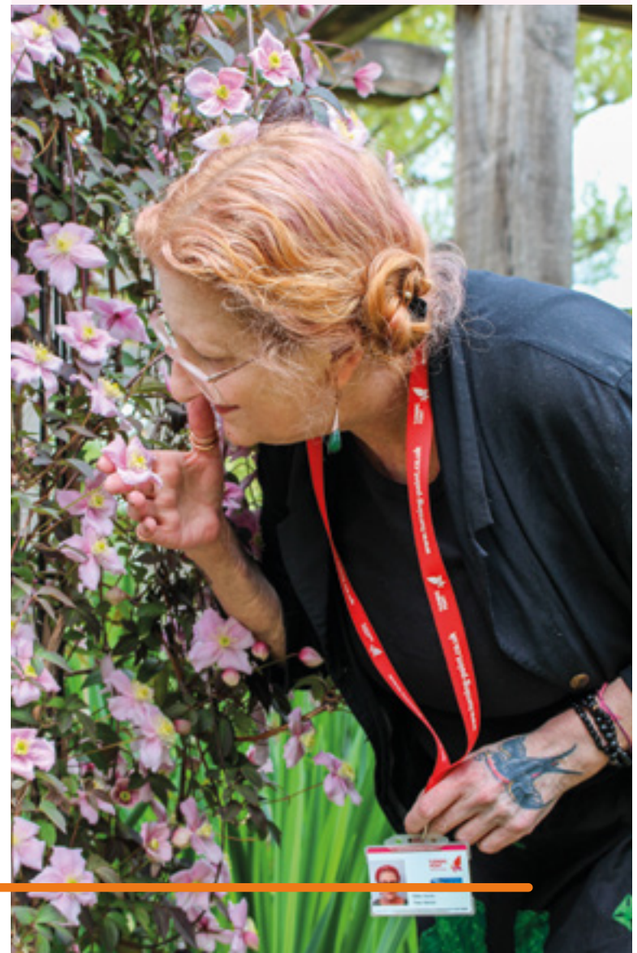
Where other sectors have seen significant job losses, we have welcomed the opportunity to create new skills and develop our own capabilities.

Fresh career opportunities

We have continued to welcome people from inside and outside of the sector to become part of the Turning Point team over the last year, including those at the beginning of their career.

We have created 30 new roles across the organisation through the Government-funded Kickstart scheme which will provide a six-month placement to young people on universal credit who are at risk of long-term unemployment, enabling them to gather the knowledge and skills to support them into sustainable employment. This includes roles focusing on community development, talking therapies and health and wellbeing, as well as roles supporting our enabling functions such as finance, human resources and research.

Our internal resourcing experts have also promoted offering multiple flexible options for early and short-term careers and those needing support in employment during the pandemic. Where other sectors have seen significant job losses, we have welcomed the opportunity to create new skills and develop our own capabilities.



Developing leadership and management skills and resources

This year saw the launch of our new Leadership Academy enabling our senior leaders to access leadership development content, as and when they need it, to continue with on-going self-led development. With an average of over 75% of our senior leaders accessing the resources, our aim is to broaden our reach across to our management population during 2021/22.

During 2020 we launched our Values Led Leadership Framework with our senior leaders. It's a framework that defines leadership behaviours and attributes we value and will ultimately support us to successfully deliver our organisational goals. It provides clarity on leadership expectations and standards as we move forward.

Our Manager's Foundation Programme also continued in the last year, linking Skills for Care Managers Induction Standards with our vision and values. This programme takes a blended learning approach, mixing e-learning, workshops and competencies, enabling new and current managers to understand what's required of them and ensuring they have the knowledge, skills and competencies to be a great manager.

Next year we will continue our Inspiring Management Possibility programme for managers. This programme is designed to provide a holistic, pragmatic and comprehensive view of managing and leading in the Turning Point context. It builds upon the fundamentals in the Skills for Care and NHS Frameworks and is designed to develop the knowledge, skills, competence, and confidence in leading and managing self, team and the organisation.

Shaping our strategy through engagement

One of our greatest strengths is the depth and breadth of experience we hold within our teams. This year has seen an increased focus on the future as Turning Point's next strategic period begins in 2022. We want our future to be informed by the skills and experience of our wider workforce of specialists and sector leads from across the wide range of work we do.

In addition to our ongoing stakeholder engagement, we undertook a strategy engagement exercise commissioned by our Operating Board to gather perspectives and views on what the future looks like for health and social care providers like Turning Point in terms of future challenges, as well as the workforce trends, data and research that needs to be studied.

Following an exploration of cross-cutting issues and priority areas, a range of mechanisms were put in place to gather feedback from team members, including online surveys, one-to-one calls, individual submission requests and group discussions. These have come together to help shape our thinking on the next five years of Turning Point with the aim to continue these conversations throughout 2021/22 in launching the new strategy with stakeholders and preparation work to be ready for April 2022.

Adapting to COVID-19, increasing support and safeguarding the people we support

Our own COVID-19 timeline

March 2020

11th WHO declares COVID-19 pandemic

12th Turning Point COVID-19 response team set up

17th NHS services move to remote consultations[8]

18th Turning Point COVID-19 microsite for team members set up

26th **1st national lock down begins** everyone told to stay at home

26th We move to telephone appointments

27th Turning Point PPE hubs established

7th We partner with London Homeless Drug and Alcohol service

April 2020

4th Fears people with learning disability denied treatment for COVID[9]

4th We open new hospital step down facility in South London

6th Concerns about PPE shortages in social care sector[10]

8th We publish online alcohol guide

10th 58% rise in supermarket sales of alcohol[11]

15th 1st wave peak team members absence

15th COVID-19 adult social care action plan published[12]

15th IAPT referrals down 70% and substance misuse referrals down 36%

24th HSJ reports on 'unprecedented number of unlawful DNACPRs'[13]

30th We developed an app to manage PPE stock

30th Julie Bass meets with Care Minister about DNACPRs

May 2020

21st Turning Point Nottinghamshire Mental Health Helpline opens

22nd Turning Point School of Art launches

8 www.england.nhs.uk/coronavirus/wp-content/uploads/sites/52/2020/03/urgent-next-steps-on-nhs-response-to-covid-19-letter-simon-stevens.pdf

9 www.hsj.co.uk/coronavirus/learning-disabilities-patients-told-they-may-be-too-frail-for-mechanical-ventilation-if-they-get-covid-19/7027318.article

10 www.theguardian.com/society/2020/apr/06/residential-homes-desperate-for-ppe-as-two-care-workers-die

11 Financial Times. Global drinks makers race to keep party spirit going. Food & beverage. 2020. www.ft.com/content/8b17eb62-efd9-432e-9538-a5471536a239

12 Plan included routine testing of all symptomatic residents in care homes and all residents prior to care home admission (starting with those being discharged from hospital); testing of all care workers with symptoms; a new app for the social care workforce with guidance and practical support; new PPE training videos; plan to attract 20,000 people into social care through new recruitment campaign; extending the NHS support package to those working in social care & additional funding to Carers UK helpline. https://www.gov.uk/government/publications/coronavirus-covid-19-adult-social-care-action-plan

13 www.hsj.co.uk/coronavirus/unprecedented-number-of-dnr-orders-for-learning-disabilities-patients/7027480.article

1st
Spring 2020 lock-down ends

5th
Overall drinking down but heavy drinkers drinking more[14]

11th
Turning Point and LDE launch DNACPR resource pack

26th
Rightsteps publish COVID-19: Keeping Well

25th
Turning Point publish online wellbeing guide for carers

7th
Launch of Turning Point's City and Hackney Drug and Alcohol service

5th
Launch of Turning Point Connect

3rd
Predictions that 10 million more people will need mental health services[15]

June 2020

August 2020

Oct 2020

Nov 2020

5th
2nd national lockdown comes into force

15th
2nd wave peak team members absence

16th
Turning Point launches Leicestershire Central Access Point

1st
Turning Point launches livelife – new online counselling service

Dec 2020

Jan 2021

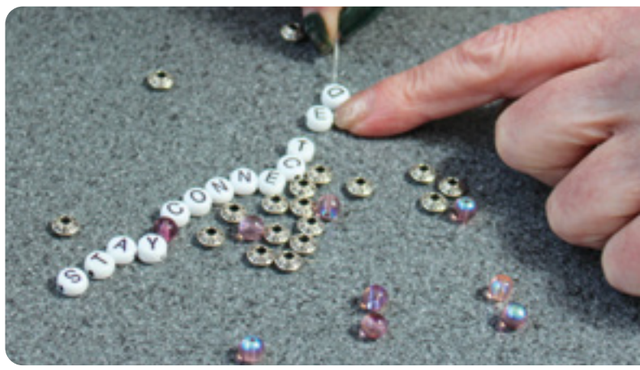
6th
UK enters 3rd national lock down

18th
3rd wave peak team members absence

March 2021

31st
Referrals to drug and alcohol services up 36% on pre-pandemic levels[16]

1st
Launch of Turning Point crisis sanctuaries in Nottinghamshire



14 www.portmangroup.org.uk/new-surveys-show-brits-drinking-moderately-under-lockdown-2

15 www.centreformentalhealth.org.uk/sites/default/files/publication/download/CentreforMentalHealth_COVID_MH_Forecasting3_Oct20_0.pdf

16 This is a like for comparison comparing referrals during March 2020 with referrals in March 2021 (excluding new services opened in 2020/21)

ADAPTING TO COVID-19

The scale and impact of COVID-19 is unprecedented in modern times. A fast-moving and ever-changing threat – particularly to those in society who are vulnerable – it required a joined-up, urgent and considered response focused on those we support and our team members and rooted in an understanding of new emerging risks that had to be mitigated and well managed.

Ensuring the quality and safety of our services for the people we support was a clear priority and teams across the organisation mobilised around this, adapting to new ways of communicating, working and managing teams as well as to a constantly changing picture – as can be seen from the timeline. Quality and safety processes, including governance processes, had to be redrafted and rolled out in order to maintain a high level of assurance.

The Care Quality Commission (CQC) launched its Emergency Support Framework as part of its pandemic approach which meant a significant change to the inspection regime. This new approach was to 'monitor risk, identify where providers may need extra support to respond to emerging issues, and ensure they are delivering safe care that protects people's human rights'. The new approach has increased understanding of the pandemic and its impact on team members and people using services and where necessary CQC have initiated inspections.

During the year, the CQC conducted 25 inspections, mainly IPC (Infection Prevention and Control) inspections as part of their Emergency Services Framework (ESF) – and the overall feedback was positive. Two of the services inspected were rated and overall, 91% of our services were rated as 'good' or 'outstanding' at the end of the financial year.

In order to continuously improve our delivery and optimise our impact, we extended our online/virtual service Directory through ebooks, guides and counselling services. We also launched several in-person initiatives across the country, including the School of Art, City and Hackney Recovery service and crisis centres. This was to ensure adequate support was available to service users and others for their wellbeing, mental health, addiction issues and job-seeking needs throughout the pandemic. COVID-19 and repeat lockdowns impacted these areas for all populations, but our team members and the people we support have a higher likelihood of being affected.

Crucially, Turning Point was also at the forefront of addressing the increase in unlawful DNACPRs. We were appalled when we received both blanket and individual DNACPRs simply because individuals had learning disabilities. We highlighted the issue publicly and subsequently met with the Care Minister as well as launched a resource pack for families and care workers to provide them with the guidance and support they might need when challenging them.

Tackling stigma and making support accessible to more people

Support and Advice on Sexual Health (SASH) is a partnership, led by Turning Point, alongside NAZ HIV care and support service, London Friend, METRO Charity, and MSI International UK. Each organisation brings their own specialisms and expertise, ensuring that anyone who uses the service gets care that is tailored to their needs by providing free, non-judgemental support to improve their sexual health, relationships, and mental health.

SASH operates across three London boroughs Hammersmith and Fulham, the Royal Borough of Kensington and Chelsea and the City of Westminster to improve resident's sexual health. The service has achieved fantastic outcomes:

- **77%** of individuals supported report improvement on their wellbeing.
- **100%** of individuals have successfully met their goals and report sustained wellbeing outcomes three months post the intervention.

Following the onset of the pandemic, a rapid change in approach was required to ensure individuals could continue to benefit from the service, and gain access to the support they needed. Like other services, we moved to virtual interventions as quickly as possible and while we embraced the new technology, this approach highlighted barriers our services users faced such as 'Digital Poverty' – the lack of equipment, skills, and confidence to join in online.

While reaching out to service users proved challenging compared to previous years, the service continued to innovate by developing and adapting services such as:

- SASH's HIV Matters which is an educational platform on all things HIV. The project was moved online which included a series of blogs written by HIV experts in the service with the aim to educate on HIV prevention methods and provide information that supports people living with HIV.
- Positive Rainbows which is a new project developed this year with funding from The City of Westminster. The innovative project was developed specifically for families and serves two cohorts, families with members that identify as LGBT+, and those that have members of the family living with HIV.
- This year saw increases in working with people with learning disabilities. The service which has built a strong relationship with Happily Dating a family-run charity that matches people with learning disabilities for friendship and companionship.

100% of individuals

have successfully met their goals and report sustained wellbeing outcomes three months post the intervention.

We launched several in-person initiatives across the country, including the School of Art, City and Hackney Recovery service and crisis centres.

Tameside – Employing technology to better support people living with learning disabilities

Being 'Inspired by Possibility', Turning Point is committed to exploring the potential application of existing and emerging assistive technology. In support of this commitment we set aside funding in 2020 to pilot the implementation of our Learning Disability Supported Living service in Tameside, Greater Manchester. The technology is designed in a completely personalised way and is re-programmed as each person's assessed needs or stated goals change.

An estimated 26 people will have direct input into how we can assist them with elements of daily life such as personal safety, healthcare monitoring, medication, personal care, diet, cooking skills, appointment keeping, communication, social inclusion and stimulation.

Using the technology, the person can request support, self-assess, access 'how-to' instructions, personalise memory prompts and receive rule-based alerts.

The objective of the pilot is to evidence the potential of empowering personalised technology to transform service delivery models and expand the scope of independence outcomes. People using the technology, as well as their support team and natural support networks, will be fully involved in the evaluation of the technology and further evolution of our service offer. The pilot commences in 2021 and is expected to run for two years.

Windermere Road comes out stronger after COVID-19 outbreak

In January 2021 an outbreak of COVID-19 took hold at Windermere Road. Here are some reflections of this time written by team members.

Throughout our localised COVID-19 outbreak, we witnessed some amazing feats of kindness and bravery. When infection rates in both team members and people we support increased, teams really came through in supporting the service, each other and our service users. To say we could not have got through it without their help, is an understatement.

Sadly, we lost one of the people we support which impacted the service greatly; they had been supported by the Windermere Road team members for many years and they were well-known. The care and support team members provided during this heart-breaking time was always sincere and person-centred, but everyone felt the loss of this person and they will be missed tremendously.

During this time, I also contracted COVID-19. I was quite poorly, but did my best to stay fit and healthy, because I still needed and wanted to support the service from home. I felt morally challenged being in the comfort of my own home while asking team members to come in to support the service, knowing that this would put them at risk of contracting the virus too. I wanted to be there to support them in the thick of it, but I was unable to do so. Despite this, the entire staff team was amazing. That is the only word to describe their efforts; they really dug deep and pulled through.

On a personal level, I am extremely thankful that I have Louise (Team Leader) and Iona (Senior Support Worker) by my side to help me manage the service. Their assistance is invaluable, and they were my rocks during this difficult period. We have built a strong working relationship where I feel that we complement each other's skills. As a team, we have been able to steer Windermere Road through our crisis and get back to some version of normality.

This has been the hardest thing I've ever managed in my career, but I could not be more proud of my team for the way they carried themselves and kept the service running during the pandemic. The character of the team members really shone through and that is testament to them.

Wesley
Supported Living Manager

At Windermere we have 11 service users and 28 team members. When the risk of COVID-19 increased in March 2020, we went to great lengths to keep everyone safe. In November 2020, one of the people we support became ill, requiring medical treatment and was admitted to hospital. A week later he contracted COVID-19 and was moved to intensive care after his condition worsened. Due to lockdown and visitation restrictions, team members found it extremely difficult that they were unable to visit him. We did however, speak to his mother every day and supported her as much as we could as we had built strong relationships with his family members.

On the 30 December 2020, our first team member also contracted COVID-19 and a couple of days after we received news that he was in intensive care and had been placed on a ventilator which was extremely upsetting for everyone. We then faced a localised COVID-19 outbreak affecting both the people we support and team members. As a result, team members numbers were low and five of the people we support were also admitted to hospital. Our team members worked really hard to maintain a happy, positive atmosphere for the service users at home, even though they were all very poorly and team members were understandably scared themselves.

Wesley and I worked opposite each other from home and knowing how extremely scared the team members were they really did go above and beyond to make sure the tenants were safe and as happy as they could be. Some had even offered to live-in at Windermere if staffing levels got any lower, so the tenants could stay in their own home, but we were lucky this wasn't needed.

Knowing how poorly everybody was and hearing the fear in their voices when we spoke to people over the phone, was really hard to hear as managers. We still tried to maintain a level of professionalism and did our best to comfort them as well as reassure them of what a great job they were doing to support our service users and each other through this horrific time.

We unfortunately lost a wonderful lady whom we'd cared for, for a number of years. She is very much missed by other tenants and team members that have worked with her for a long time. I have been at Windermere for five years now, and from my personal perspective, I could not be more proud of the team working during the pandemic and how everyone pulled together to support one another through these unprecedented times.

Louise
Team Leader

Kerrie's Story

The journey through lockdown as a new peer mentor

Kerrie completed her peer mentor training the day the national lockdown was announced. As a previous person we supported at Turning Point, Kerrie became a peer mentor to help others. She says, "When I first came to Turning Point, my confidence was rock bottom. I'm a single mother and I've worked really hard at my recovery, so it was amazing to be given the chance to do this. Training was a challenge because it's been years since I've been in any kind of classroom situation, but I kept going because I really wanted to be involved."

Qualifying as a peer mentor was exciting for Kerrie and felt like a real achievement, but when lockdown was announced, she wondered how she would manage to progress in her new role. As part of the team in Leicester however, Kerrie felt fully involved in keeping the service going even with restrictions in place. "We couldn't go in at the start, but we met online and worked together to stay motivated. The support staff were great – they kept us in the loop, and we worked out the best way for each of us to carry on with our role during the pandemic. As people who've used the services, we were able to reflect what would work and what wouldn't. I've learned so much – as well as supporting the people who use the service, I've been co-facilitating a dependent drinker's group and continuing to learn. My confidence has really grown, and I've even gone back to college too."

Kerrie feels a real part of her team – but also a part of the wider Turning Point community "I felt valued. It wasn't us and them. We work together. It changed how I felt – that they believed in us and that we could give back. I've never felt looked down on I don't feel like I'm the bottom of the heap anymore. I'm part of the Turning Point community and I have a voice."

Involvement is part of a healthy organisational culture. As a person-centred learning organisation, involvement is in Turning Point's DNA. We also recognise, however, that involvement – like recovery – is a journey, not a destination and it doesn't end with setting up a committee or having a conference. We are constantly looking at ways to take our commitment to working in partnership with the people we support, forward. Over the next year we will work on new models of leadership across the organisation, developing a new approach to measuring the impact of our involvement work, aligned to our commitments to social value and continual improvement.

"I've learned so much – as well as supporting the people who use the service... My confidence has really grown, and I've even gone back to college too."

Agility and responsiveness in the face of the pandemic

The increasing impact and awareness of the pandemic in the early months of 2020 gathered significant pace leading to the first national lockdown in March. The Government's strategy to protect the population and its key policies have evolved over time. The landscape has been complex, with ever-changing guidance issued from authorities such as Public Health England (PHE).

Turning Point was quick to respond to the pandemic and our priority was to ensure the safety of the people we support and our workforce. Ahead of the Government direction, the leadership team requested all team members who could work from home to do so, thereby reducing unnecessary travel and the health risk to them and the wider public.

Our business continuity planning approach kicked in and we set up a COVID-19 response team. The Operating Board set up daily calls and regular updates were given to our main Board.

The investment we have made in our digital capability and technology over many years meant that we were able to transfer to web-based meetings with minimal disruption in light of almost 1,000 people working from home. Logistics were important to roll-out equipment across a diverse workforce that in some cases was not normally home-based.

During the early stages of the pandemic, the impact was most acutely felt within our residential and accommodation-based services where we had to help protect some of the most vulnerable people while also keeping our workforce safe.

Over the last year, almost 10% of Turning Point team members were absent due to COVID-19-related issues. Despite this, Turning Point teams were nimble and pushed through to keep things not only running, but efficient and effective. Through the centralisation and daily monitoring of staff absence, we always redeployed team members to ensure safe staffing levels.

Coulgate St initiative frees up acute hospital beds

At the onset of the pandemic, significant work was undertaken on a national scale to enable people to be discharged from hospital to free up acute beds in response to COVID-19. Turning Point was at the heart of this initiative and we have done all we can to help this national effort.

In aid of this endeavour, the South London and Maudsley NHS Foundation Trust (SLaM) and Turning Point worked together to utilise Douglas House in Lewisham as step-down accommodation for six months for people with mental health conditions, providing a therapeutic enabling service that sustains recovery to achieve positive mental health and wellbeing outcomes as well as exploration of move-on housing options.

This service existed to give our guests an opportunity to manage their own mental health challenges, with recovery-focused support from our team and input from clinical partners at SLaM. It came into being within just 15 days. The team worked dynamically with SLaM to repurpose the building and support their efforts to free up capacity.

The investment we have made in our digital capability and technology over many years meant that we were able to transfer to web-based meetings with minimal disruption in light of almost 1,000 people working from home.

Nottinghamshire Helpline launches

In May 2020 as part of Mental Health Awareness Week, we launched a new helpline for people with mental health issues living in Nottinghamshire.

The helpline is available for anyone who needs emotional support or information about what help is available for people struggling with their mental health in the local area. Trained mental health workers are on hand to answer calls between 9am and 5pm, Monday to Friday. This service was not expected to commence until late 2020, but the challenges of loneliness and isolation during the COVID-19 pandemic required the timetable to change and the work to be brought forward. Thus, in partnership with the commissioners at Nottinghamshire Healthcare NHS Foundation Trust, we sought to expedite the project to help those most in need.

City and Hackney Recovery service shaped to local needs

Despite the pressures of COVID-19 October 2020 saw Turning Point launch an integrated substance misuse service in City and Hackney, London to provide an accessible, local and inclusive neighbourhood-based service shaped by the needs and voices of the community.

Focusing on recovery, social inclusion and improving the quality of life of all our service users in the City of London and Hackney boroughs, the service (in partnership with Mind CHWF and Antidote) provides specialist support around mental health and LGBTQ issues.

The new integrated service will deliver a community focused service, using the skills and experience of several organisations to provide the best support for the residents of City and Hackney.

"Alfred Minto is a great place, I am treated with respect and I have learned a lot while living here. I love music sessions and relaxation, there is a lot of opportunities for me here. I am now preparing to move into supported living with Turning Point."

Alfred Minto Resident

Clinical support and oversight

Our senior clinical team played a key role in enabling the organisation to respond quickly to the pandemic, transforming services and introducing robust infection control measures. Our Medical Director, Head of Nursing, Head of Psychology, Chief Pharmacist and other clinical team members, led policy approaches through our COVID-19 response team. They played a vital role in managing the risks associated with moving to remote delivery models and to minimise the transmission of COVID-19 within face-to-face services.

PPE App delivered enhanced management and stocks

Within a matter of weeks, our multi-skilled IMT team developed and launched a PPE App to help local services and central teams manage the ordering and distribution of PPE. A network of stock controllers worked with service managers to provide regular updates on stock levels to ensure we were adequately covered for future predicted demand.

Our senior managers were briefed on the role they needed to play to support deployment of the app across mental health, learning disability, public health and substance misuse teams. Data visualisations were created for managers to understand stock levels. Hubs were set up to allow us to ensure that PPE was in the right place and we created a PPE group to centrally manage PPE, ensuring that supplies were directed to where they were needed.

This enabled us to be at the forefront of securing appropriate levels of PPE enabling us to maintain high levels of infection control within our services as well as providing information on safe usage and disposal of PPE.

Further support included regular training to team members on how to wear and use the right PPE in accordance with the current guidance, supported through the employee microsite, cascades and demonstration videos.

Our ability to respond to infection control measures and to have the confidence to deliver our support was underpinned by our well-established clinical governance team.

Our ability to respond to infection control measures and to have the confidence to deliver our support was underpinned by our well-established clinical governance team.

Putting people first

Early on, we recognised that major changes were necessary to ensure people within our learning disability services received the best care during the pandemic. Unprecedented and confusing times for many, we ensured that easily accessible and digestible information and advice was available for the people we support on COVID-19, PPE, and health and wellbeing.

As the situation progressed nationally and globally, our response had to adapt in line with the changing advice. As such, we worked hard to innovate and ensure that we maintained contact with the families of the people we support, giving them updates on how they were doing and being the link between them, facilitating digital conversations where right to do so.

We saw first-hand the increase in demand for mental health support, notably for certain groups, which was challenging as the capacity of many of our services had to be reduced due to COVID-19 restrictions.

In doing so we offered support and advice regarding digital literacy and poverty to support individuals to maximise digital contact with wider support networks including mutual aid groups that moved online via Zoom. We also ensured that we provided up to date information to the people we support, in line with government advice, that promoted outdoor activities and wider health and wellbeing; where possible and safe to do so, we supported involvement in outdoor activities led by peers, for example Parkfit and walking groups.

In March 2020 we suspended all non-essential face-to-face mental health services including group work, social activities, drop-ins and outreach, moving to remote counselling and coaching either via phone or video calls. However in April and May, we saw a 39% increase in incidents in our crisis mental health services compared to the same period last year. We saw first-hand the increase in demand for mental health support, notably for certain groups, which was challenging as the capacity of many of our services had to be reduced due to COVID-19 restrictions. We responded with an online digital offer for groups which supported access to individuals and in many cases increased attendance; feedback from attendees stated that they felt more comfortable within their own homes to engage in support.

We saw a 39% increase in incidents in our crisis mental health compared to previous year.

The online offer also enabled wider, more efficient ways of delivering our services to take shape which helped us to manage the increase in demand. The ability to offer more flexible appointments and broader time slots allowed for better engagement and a reduced Did Not Attend (DNA) rate, further supporting our workforce to work in an efficient way.

We saw a dramatic reduction in referrals to IAPT services during the lockdown. In April, referral rates were 10–15% of what we would normally see; in May referral rates were 40–50% lower. There was however a subsequent increase and we anticipate that the impact of COVID-19 will drive the number of referrals up again in the future.

We continue to publicise our services and actively encourage referrals, this includes refreshing and revitalising our links with partner agencies as they move out of pandemic delivery.

The offer of telephone assessments instead of or alongside face to face options for service users allows for an improved capacity and a quicker way into support with us to meet this demand. It also provides greater choice and flexibility for the recipient of the service. We aim to take learning from the pandemic and retain a blended treatment model.

Guided by Public Health England, Turning Point's community drug and alcohol services moved to a blended model of service delivery during lockdown. Over 90% of our interventions have been delivered remotely, subject to risk assessments, with a preference for telephone over video calls for many clients. This has proven to be very successful and resulted in a national increase in individuals accessing services. It also resulted in a higher percentage of engagement among patients. We have seen our overall rate for non-attendance reduce and more importantly the number of people leaving our services unsuccessfully due to the time not being right for us to work with them has reduced significantly – our service users tell us they find it easier to engage with us in this way and this is even more pertinent in some of our very rural services.

We continued to provide a number of face-to-face clinical services to complex, high-risk clients, as well as undertaking consultations via video link and moving to telephone one-to-one sessions wherever possible. As a result of this flexibility, the duration and frequency of contact we had with clients increased significantly. Many services reported good engagement levels due to the ease of making telephone calls rather than needing a fixed time in-person appointment. Teams also managed to have group telephone calls to deliver group interventions by phone.

The face-to-face interventions tended to be focused on our more complex and high-risk clients along with those facing social isolation during lockdown and those who simply found it easier to engage face to face. All of our services remained open during the pandemic, accepting referrals and still delivering all interventions albeit some in a different way and this is something we are really proud of. As the pandemic progressed, we developed our online video group offer; this took our evidenced based group work programme and ensured delivery online with services delivering over 350 groups per month across the country. We worked hard with the people we support to understand their digital poverty and literacy needs including the provision of hardware, data and upskilling in several our services.

Despite a change in service delivery and limited face-to-face services, we are in fact, seeing more people coming for treatment since the pandemic began and more people leaving our services successfully and free from dependency.

During the lockdowns, some community pharmacies closed and were therefore no longer able to provide supervised consumption of opiate substitute medication. In addition, PHE released guidance to support individuals to reduce their risks of COVID-19 by visiting their pharmacy on a less frequent basis if safe to do so. In response, Turning Point undertook an individualised prescribing assessment for each of our patients and where we were confident and they were able to manage their own medication and store it safely at home, we moved some patients onto a less frequent collection. Where community pharmacies remained open, training for these pharmacists was delivered online to support expansion of service delivery.

Despite a change in service delivery and limited face-to-face services, we are in fact, seeing more people coming for treatment since the pandemic began and more people leaving our services successfully and free from dependency. We are committed to understanding the learning from the pandemic and what worked well whilst recognising that some impacts will take time to emerge and others to be fully understood. The ways of working we initiated quickly, in response to the pandemic, enabled us to explore new ways of delivering services and the feedback from the people we support has been positive. Our aim is to be able to offer the people we support a blended model of treatment moving forward with clarity around the interventions that need to be delivered face to face and those that can continue to be accessed by phone or online.

We developed our online video group offer; this took our evidenced based group work programme and ensured delivery online with services delivering over 350 groups per month across the country.

COVID-19 Survey of the people we support in our Drug and Alcohol services

We were aware that the COVID-19-related changes and new ways of working impacted the people we support both positively and negatively and so we invited their input to understand what they wanted and needed from us as we moved forward.

The COVID-19 online survey took place during July 2020: 725 individuals responded of which 669 were people we support and 56 were family members/carers. A specific Young People's service survey was also undertaken.

The survey focused on the changes in service delivery as a result of lockdown to inform the ongoing development of the new ways of working we have adopted and covered the following themes:

- Digital Inclusion
- Telephone and Online Support
- My Turning Point
- Mutual Aid
- Harm Reduction

Remaining aware of the needs of the people we support, preferences and circumstances is of great importance in the ongoing design and development of our new ways of working to ensure that their needs are met and risks are minimised.

Out of the 725 people asked whether they had access to a device and the internet, we found:

- **93%** had access to a mobile phone, **48%** a computer and **27%** a tablet
- **22%** do not have access to the internet
- **20%** do not know how to use computers/internet

A report was developed and a poster with the survey outcomes was provided for services to display. Feedback was broken down and also shared at a service level to inform local delivery, whilst national data was fed into strategic development and the development of a national council for people we support and improved feedback mechanisms.

There was both positive and constructive feedback received and the hard work put in was appreciated and made a difference to people's lives at a difficult time.

"You've all done a great job and I'm very grateful for everything you've done for me and everyone else."
COVID-19 Survey, July 2020

DAWS uses the 'Five Ways to Wellbeing'

Team members that would normally provide psycho-social interventions, group work and support around employment, training and education developed innovative ways of working to overcome the challenges faced by COVID-19 and the requisite restrictions.

By way of example, the Get Connected team at the Drug and Alcohol Wellbeing Service (DAWS) in central London took a very different approach to support service users during the pandemic. The focus of their work was on the 'Five Ways to Wellbeing' (Be Active, Take Notice, Give, Keep Learning, Connect) – a set of evidence-based actions to maintain and improve the physical and mental wellbeing of the people they support.

Using the 'Five Ways to Wellbeing' as a framework they set up Stay Connected – a specific programme running during the pandemic, which included up-to-date advice published on the website on how the people we support can stay safe. This included publication of a guide to Reducing Drinking Safely: A one-off information guide about how to reduce your drinking safely if having to wait longer than anticipated for a planned alcohol detoxification due to COVID-19.

Involvement – our most important partnership

Turning Point understands that involvement happens across our community in a number of different ways.

When providing individual care – at home or in our services – we ensure that people are actively engaged and empowered to make decisions about how they live, how they spend their time, and setting their own aspirations for the future.

Putting people back in control

Beacon Lodge in Nottingham is a Turning Point service providing short stay residential care for up to 12 people for anything from a couple of days to eight weeks.

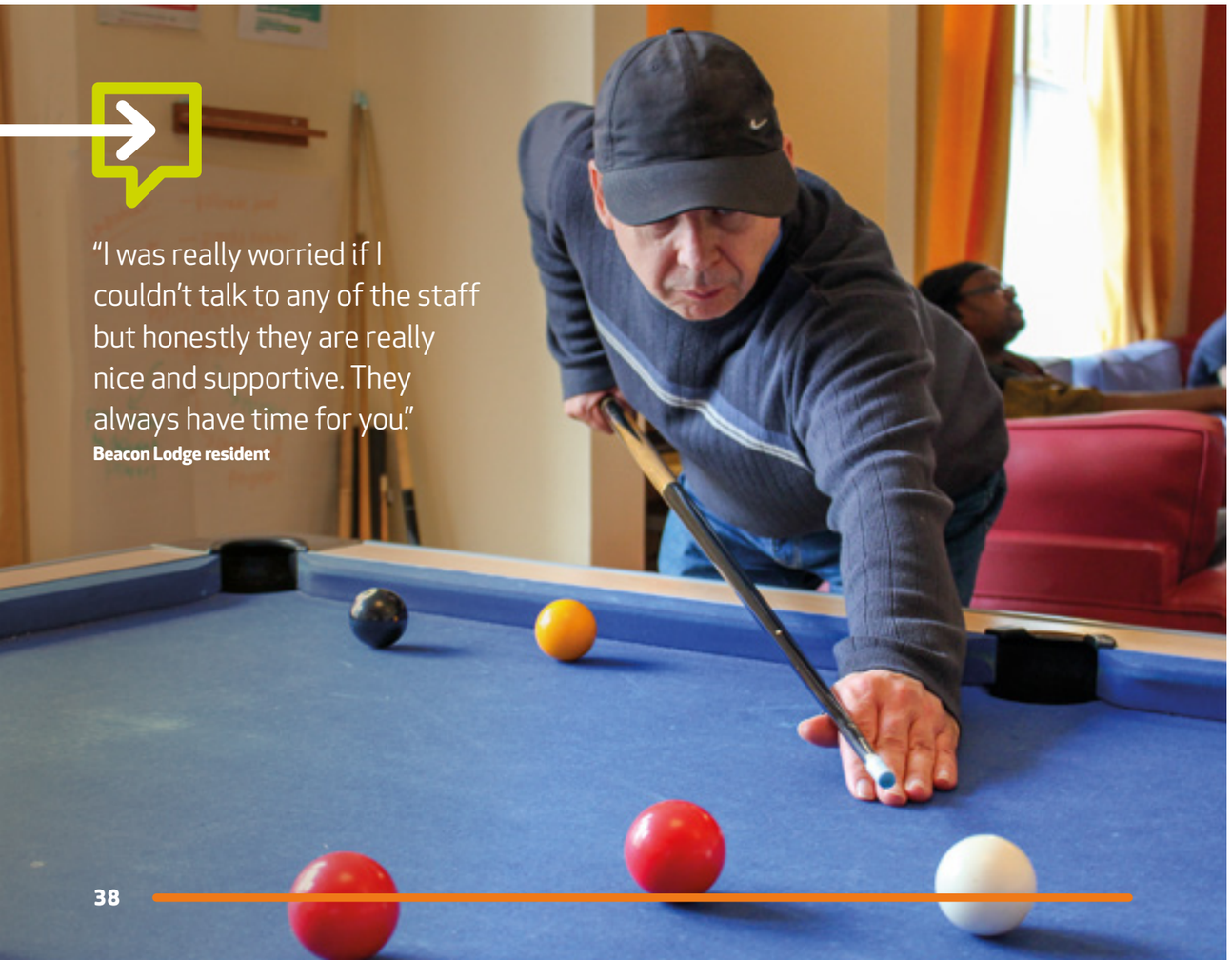
Beacon guests are people ready to be discharged from hospital but who need a period of support, tailored to their individual needs, to enable them to return home. We work to put them back in control of their lives and their choices. Care plans are not an end point – they evolve and change as we support guests to identify and understand their holistic support needs. Guests at Beacon Lodge are fully involved in their own recovery – and they support each other too – even though the transition from acute mental health care is often a difficult and distressing time for them.

One of our Beacon Lodge residents worked with other guests to write a letter to future guests telling them what to expect when they came to the service. They talked about how people were guests at Beacon Lodge, rather than patients.

"I was really worried if I couldn't talk to any of the staff but honestly they are really nice and supportive. They always have time for you. It's none of this you will have to wait malarkey. We do three sessions a day – and they are always open to new ideas of what we can do. I was dreading coming here but I can honestly say it was the best move I made."

Our services provide opportunities for people we support to get involved in peer mentoring and volunteering, as well as formal co-production.

Our services provide opportunities for people we support to get involved in peer mentoring and volunteering, as well as formal co-production. They work alongside our team members and volunteers to develop and improve the services they use by getting involved in evaluations and developing new ways of working. Our approach to co-production is continually developing; we understand that at the heart of service improvement is a dynamic relationship with – and a transfer of power to – the people we support. It is our most important partnership.



"I was really worried if I couldn't talk to any of the staff but honestly they are really nice and supportive. They always have time for you."

Beacon Lodge resident

Keeping on keeping on

A big challenge during lockdown was to continue to train and place new peer mentors in a way that mitigated any risk involved in remote working. With the previous face-to-face training program we were able to assess suitability over the course of eight weeks. How would we do this while working virtually across our services?

The answer lay in working with our National Peer Mentor Forum to develop a new training model. We launched this in spring 2020 and since then have trained 67 learners using this model, despite the difficulties presented by COVID-19.

Alongside this we launched our very first online peer support group, the 'Five Ways to Wellbeing'. The group is peer-led and supported by a paid team member as a 'sleeping participant' who can support as required. This is necessary to maintain a robust approach to safeguarding and risk.

Feedback has been gathered online with many service users commenting on how much they get out of attending the sessions and what an important part of their recovery process the group has become.

We are also, for the first time, formally training specific family and carer peer mentors at Turning Point, who will go on to complete the Five Step Capello Training. These individuals are going on to support family and carer programs across Turning Point.

During the pandemic we also launched our recovery news YouTube channel and were touched by the amazing content contributed by peer mentors from across the organisation. The channel will have a life above and beyond lockdown.

Much like anyone else, the people we support are part of different communities; ones that reflect their environment, interests, choices and concerns. That's why Turning Point is committed to an understanding of involvement that is bigger than 'us'. Day after day, in all our services, we help people maximise their engagement within their own community, in local campaigns and activities. Helping people become more involved in Turning Point's work is a priority for us, but that is matched by our commitment to help people to engage with the community 'out there' – challenging stigma, making their voices heard and living the life they choose.

Through forums and councils run by our service user leads, we are able to ensure the voice of the people we support is listened to – even through the challenging times of the pandemic. The pandemic created significant challenges for continuing some of these forums, but working together we were able to continue supporting our service user groups to meet virtually.

Continually assessing satisfaction

Pendlebury House is a small independent hospital in Manchester. It supports people aged 18 to 65 who have an initial medical diagnosis of psychosis, to be able to comfortably use facilities within the community, leading to a more independent lifestyle.

As well as undertaking a twice yearly satisfaction questionnaire with residents, we undertake a quarterly evaluation of residents' satisfaction with our groupwork programme and a twice yearly catering quality survey. There is a weekly community meeting where residents and team members can share thoughts and feelings about day-to-day life – which is regularly chaired by the service user representative.

From our last satisfaction survey – in April 2021 – we can see that there is broad satisfaction with the service:

- All of the people who completed the survey (nine) said they were involved in developing their care plan.
- Seven out of nine people who completed the survey said they feel involved in the service and how it is run.
- All of the people who completed the survey said they were satisfied or very satisfied with the service they received.

Talking Therapies (IAPT) services

Our Improving Access to Psychological Therapies (IAPT) services deliver talking therapies in Wakefield and Luton. They are designed to provide quick and easy access to a range of psychological therapies – so people can get the help they need, when they need it. If someone is feeling down, worried, depressed or anxious, we offer help, whether that be face-to-face, over the phone or with online support through MyTurningPoint digital therapy tool.

We regularly ask for feedback from the people who use our IAPT service – and collect this information to establish satisfaction scores for our services.

Our Luton service is called Total Wellbeing. Over the period April 2020 – April 2021 we achieved the following average satisfaction scores:

Did team members listen to you and treat your concerns seriously?
96% satisfaction

Do you feel that the service has helped you to better understand and address your difficulties?
91% satisfaction

Did you feel involved in making choices about your treatment and care?
95% satisfaction

On reflection, did you get the help that mattered to you?
91% satisfaction

Did you have confidence in your therapist and his/her skills and techniques?
96% satisfaction

Overall satisfaction rate: 94%

Our Wakefield Talking Therapies service, over the period April 2020 – April 2021, achieved the following average satisfaction scores:

Did team members listen to you and treat your concerns seriously?
97% satisfaction

Do you feel that the service has helped you to better understand and address your difficulties?
91% satisfaction

Did you feel involved in making choices about your treatment and care?
95% satisfaction

On reflection, did you get the help that mattered to you?
92% satisfaction

Did you have confidence in your therapist and his/her skills and techniques?
97% satisfaction

Overall satisfaction rate: 94%

Our People's Parliament

Though lockdown prevented us from holding an annual event in person for our People's Parliaments, they continued to work virtually where possible. In January 2021 in the depths of the third lockdown, a national coming together of People's Parliaments from across Turning Point took place, which was very moving. Together with parliament members from across the country, the Turning Point community took time to remember those we had lost – but also celebrated how team members worked together with the people we support to build collective resilience during these trying times.

The pandemic necessarily restricted opportunities to go out and get involved in our communities, but it didn't dim our commitment to maximising autonomy and control for the people we support.

All our Learning Disability services work to support individual's involvement in local communities, but of course during lockdown this was much harder. At all times the priority was keeping people safe – but the restrictions we all faced meant that it was difficult for people to stay connected and involved. We feel that the teams dealt with lockdown in a remarkable way. They have embraced the ongoing changes and challenges that COVID-19 made to their lives and the lives of the people we support.

Staffordshire

In Staffordshire we worked together to ensure people could carry on meeting and still get involved in activities together. Family contact was important to all residents and making sure that was sustained through Zoom and Teams calls meant the world. We had art projects across our services which helped everyone feel more connected with each other and positivity boards to help everyone stay upbeat.

"Our Peoples Parliament set up group projects across all the Staffordshire services. We held a virtual coffee morning to raise money for charity and at Christmas we had a virtual Christmas lights switch-on."

Wiltshire

At our Wiltshire day service – REFOCUS – service users were at risk of missing out on vital community contact when we had to close the service. But we worked hard to reopen it as soon as viable, with some additional changes including increased outreach support for people too vulnerable to come in. Although not all of the group activities could be restarted, we worked together to build a programme of trips and visits out once safe to do so, we made music together and met virtually whenever it wasn't possible to meet one-to-one.

"When COVID-19 started we all had to stay at home, but then work began behind the scenes on new measures to ensure REFOCUS was safe to reopen. Posters and signs were put up, a new staffroom was created to keep them safe and the garden had a good tidy up for us. We were so happy to be back, and so were our parents and carers, doing what we love to do."

Warwickshire

Likewise in Warwickshire, many of our activities couldn't go ahead as planned, but we still had celebrations and connected with our community. While we couldn't take part in the local carnival as usual, we put artwork and pictures outside and created a Teddy Bear Tableau that could be viewed from outside the building; it was received positively by local children and residents.

"For VE Day, the Flats decided to have a Scarecrow Competition as well as making cakes and party treats, then we had ourselves a party!"

We feel that the teams dealt with lockdown in a remarkable way.

An innovative and inspiring Virtual Recovery Week

In previous years Leicester, Leicestershire and Rutland have done a full week's activities as part of September's Recovery Month; it's an important time of awareness and outreach so we tried not to let COVID-19 stop that. As such, our activities were a collaboration between Turning Point and Dear Albert (Leicestershire community recovery group). Through working with Dear Albert, we produced daily a video podcast on Dear Albert TV on YouTube.

Each day we featured 'on the couch with Jon Roberts'. Jon is the founder of Dear Albert. During the week we had interviews with two commissioners: Mark Aspey for Leicester and Debra Cunningham for Leicestershire who talked about the importance of recovery. This was supplemented by an interview with Adam Sutcliffe, the Manager at Framework – our detox provider – and gave an insight into the support available to enable service users to understand the options available to help with recovery journeys. Our Senior Operations Manager, Sarah Hancock-Smith also featured on the couch with Jon discussing recovery and the support Turning Point can give.

Additionally, service users, peer mentors, families/carers and team members all supported the week with videos ranging from poems, spoken words and testimonials. Two of our peer mentors, Jamie and Helen, performed songs as part of the line-up. Service users and their families also shared their journeys which were insightful, encouraging and real. It showed that it is possible to move forwards and get on the 'road to recovery'. We are thankful to them for being so open and helping others by doing so.

Part of the team

In our Radcliffe House service in Wakefield one of our Peer Mentors worked alongside our team members practically every day through the lockdowns. He came to the hub at Grosvenor House to help out on reception and support team members at the needle exchange. His dedication helped the team continue to deliver substance misuse services.

He checked service users in for their appointments – reassuring them and supporting them to understand the necessary restrictions – and escorted them to the correct department in the building. He answered phone calls and dealt with queries, enabling team members to concentrate on specialist support for the most vulnerable. He also helped with pre-packing the needle exchange packs – which meant we could get them to the people we support in a COVID-19 safe way – and helped engage with people in the needle exchange, providing critical harm reduction advice to help people manage the risks of substance use during lockdown.

Peer Mentors deliver support

During the last 12 months peer mentors have been essential in some of the new ways we delivered support to service users. We have eight peer mentors who offered welfare calls to people we support which involved peers talking about their journey, support with isolation, discussing treatment options and helping service users with referrals for other services.

Two of our peer mentors helped co-facilitate our non-dependent alcohol and dependent alcohol groups online with recovery workers. Another three are about to start supporting recovery workers delivering mindfulness and another alcohol non-dependent group online for our county team.

Yahya's Story

Yahya brings experience to raising awareness

Before joining Turning Point, Yahya had been involved in mental health and substance misuse community-based work (rehabilitation and education) for many years. A family friend mentioned Turning Point so Yahya decided to take a look; he then made contact and enquired about volunteer work to help further his skills.

Yahya had always been exposed to mental health issues throughout his work, both on a local and a global scale, including war-torn places. Yahya's own background meant seeing poverty, crime, violence, racism and a lack of opportunity; he had experience of mental health issues with his family and friends too.

Yahya is passionate and believes that this sort of work (and awareness-raising) is critical, especially in minority communities; his approach developed through his volunteering role at our Wakefield Talking Therapy service.

As a community coordinator with Turning Point, he would work at schools and hospitals raising awareness of Turning Point and its work. This has led to him seeking to become a psychological wellbeing practitioner and he is now employed by Turning Point as a trainee.

Part of the work that Wakefield offers are therapy sessions for people for whom English is not a first language using an interpreter service. They can do this either over the phone, video or now face to face with clients depending on need and several other factors.

Wakefield also utilises a large amount of translated treatment materials in the languages they most often see presentation of clients with. They have accessed additional funding through Health Education England which they propose to spend on expanding this library – expanding promotional and information leaflets.

Yahya would say to others considering this kind of work: if you want to help and effect change, then you should do it: "We may not be able to change the world all at once, but if we can change it on a local level for individuals, we're a step closer."

"We may not be able to change the world all at once, but if we can change it on a local level for individuals, we're a step closer."

Carlina's story

Understanding the stigma of being diagnosed with a personality disorder

Carlina is a Peer Support Worker at Turning Point.

There are many labels in mental health and being 'emotionally unstable' is one of the most stigmatising. The term is frequently used to describe people diagnosed with a personality disorder and is associated with a sense of blame – that the problem is ingrained into their whole being like a deep flaw.

A lack of education is partly the reason for the misunderstanding around personality disorders which are estimated to affect around one in 100 people. Often the most extreme traits – those associated with danger such as psychopathy – are seized upon despite being found only in a minority of people with personality disorders. The consequence is individuals neither want to speak out nor seek help which can cause their mental health to worsen.

Trauma resulting from abuse and abandonment are often the triggers for developing a personality disorder. I know this from personal experience. My diagnosis stemmed from abuse at a young age and a lack of emotion from my mother who herself suffered childhood trauma. Although practical, mum would never offer a hug if you fell over and cut your knee.

As the eldest child, I was forced into a parental role towards my younger brothers and sisters. I knew way too much too young. My experiences growing up made me detach emotionally until my teens when I met people who had healthy relationships. That's when I started using substances, first to 'feel' something then to block these feelings.

Relationships were a struggle because I didn't feel deserving of love so would act badly to push partners away. By rejecting them, I wouldn't have to deal with being rejected. Eventually I sought help which involved accepting the abuse I suffered and my mother's role in that.

Recognising that personality disorders develop from deeply distressing or disturbing past experiences is central to recovery. This approach is at the heart of a new programme being piloted by Turning Point which I'm involved in delivering in my role as a peer support worker alongside psychologists.

This new service called Turning Point Connect, which runs in Nottinghamshire, focuses on working with individuals and getting to know them, not treating them as a diagnostic label. It's peer-based and helps people connect with social networks and organisations available within a wider network.

Recognising that personality disorders develop from deeply distressing or disturbing past experiences is central to recovery. This approach is at the heart of a new programme being piloted by Turning Point.

This is in response to a push from mental health services – and those using them – for a more consistent and person-centred approach, rather than seeing individuals as problematic within a community. A key skill gained by participants is radical acceptance – we can't control or get rid of emotions, but we can accept and acknowledge them.

As a child, I'd always excused everything my mum did then, in adulthood, I went through a period of feeling anger. Realising that this hostility was toxic helped me move on and empathise with her, along with accepting the abuse to which I was subjected. Accepting people for who they are allowed me to function properly. Although she couldn't give me the nurture I needed as a child, she'll now cook and clean if I'm depressed. It's about accepting strengths as well as changing your behaviour and mindset.

A lack of education is partly the reason for the misunderstanding around personality disorders which are estimated to affect around one in 100 people.

The Connect programme has a dual focus. Firstly, the aim is to enable participants to centre themselves in a crisis through mindfulness techniques, and secondly to survive a crisis by identifying their triggers and impulse actions then exploring how to respond instead of reacting.

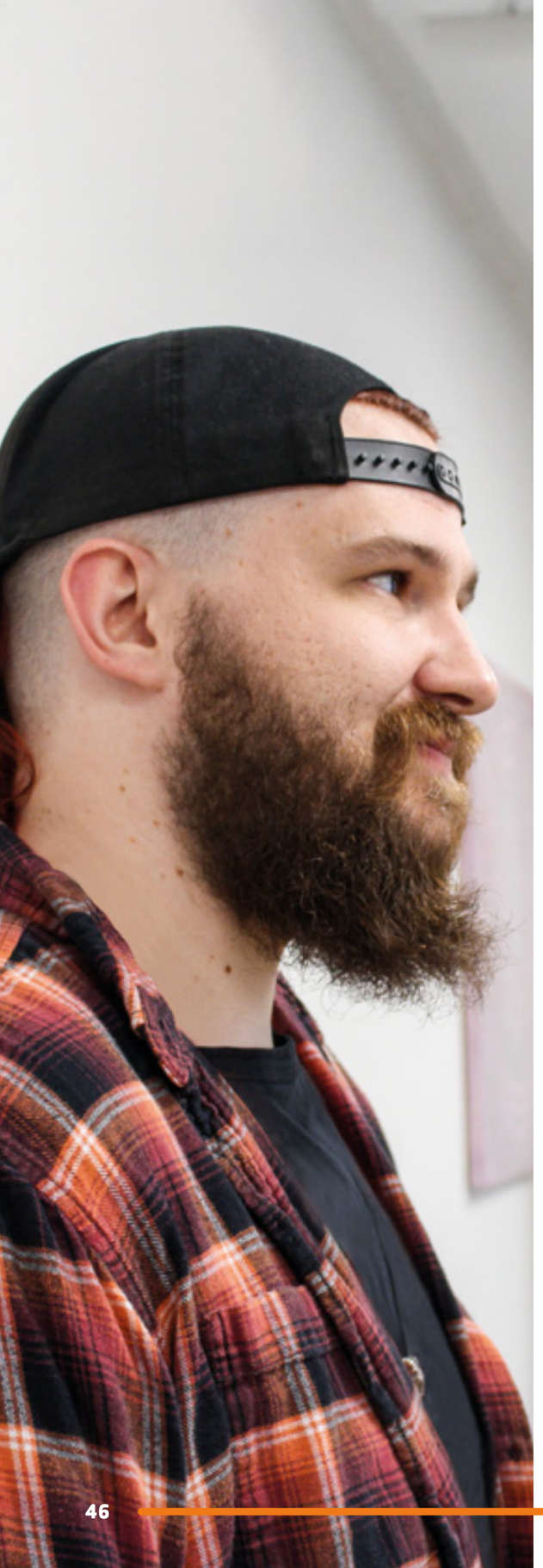
Featured in the course are elements of dialectical behavioural therapy (DBT), a talking therapy adapted for people who feel emotions very intensely and designed specifically for people diagnosed with a borderline personality disorder. If someone has experienced a crisis where they've had the urge to self-harm, DBT can give them the skills to manage these difficult feelings. With referrals from crisis or local mental health teams, the Connect programme involves two group sessions a week, with each session lasting two hours. In addition, participants are required to attend weekly one-to-one sessions designed both to support them and identify external factors affecting their mental health.

This is in contrast with the lengthy hospital stays people with personality disorders have traditionally endured after long waiting times of up to two years. Some do not engage well as a result – or their condition worsens, so treatment can feel very intense by the time it's offered. A targeted service which people can use for a shorter period, access from home and connects them with a wider support network equips them with skills they can use in their daily lives.

The feedback from the Connect pilot, which has been many years in the planning, has been positive. Those who signed up ranged from people in their 50s who had been in services for a long time to young people who had only just entered adult services. Some were still substance users and others had never used but did self-harm. Half those who attended were apprehensive the programme would not work because they had been in services for a long time. A lot had lost hope of getting to a better place or going back to work. The rest were excited about sharing their experiences.

What everyone had in common was the experience of trauma and a response to this based on impulsive behaviour. A few dropped out for reasons such as it was not the right time for them to engage or we identified that they needed another type of specialist support.

So often people with mental health issues feel written off, and that change is not possible. I know from my own experience that's not true – with the right support, I recognised my triggers and regained control over my life. With more people requiring services and wait times increasing, innovative solutions are needed so many others can get the help they need too.



Working with the people who need us most

The COVID-19 crisis has shown that for rough sleepers, a quality offer of accommodation with integrated substance misuse treatment and health care, can be effective in reaching most. Offers like Housing First work, but the principles of Housing First can inform other offers – especially useful in cities like London with little housing. This is the first occasion where funding has been provided to carry out this sort of work and the sector has responded. This wasn't possible before as the Government would not provide appropriate funding.

Having said that, the Government's response has been far from comprehensive, there has been no additional support provided to this cohort from Primary Care, Mental Health services, Dental services etc. There has only been a focus on getting people housed and tackling their substance misuse. What's needed is a more joined-up approach to help these people re-engage with society. Without this, in the long-term after the pandemic, people will be back on the streets.

Dynamism in the system with attendant consequences is an effective approach. Rough sleepers should be offered shorter term accommodation with the promise of longer term support. This offer should be extended repeatedly to those who do not take up support initially. What does not work is offering rough sleepers' large hostels where little support is provided and there is no proper engagement made with the person being supported.

Rough sleepers should be offered shorter term accommodation with the promise of longer term support.

Working in partnership to deliver crisis services

We saw first-hand the increase in demand for mental health support, notably for certain groups. This was despite the fact we had fewer people staying with us due to social distancing measures.

During the pandemic, homeless persons were offered temporary accommodation in local hotels. Turning Point worked with other agencies to support these people and meet their medical needs. We utilised our own team members as well as staff from other sources, e.g. the doctor from a local premiership football team. This was successful in ensuring that persons living on the street had access to services that were otherwise being delivered remotely.

Jason's Story

Jason had been street homeless for four years on this occasion. He was dependent on heroin and this had become very hard to get during the pandemic. His income from selling Big Issue magazine was non-existent as the streets were empty and begging was equally as pointless. Jason agreed to stay in a local hotel after this was offered to him at his local night shelter. When at the hotel, he met an outreach worker who arranged for him to talk to a Turning Point doctor. The doctor discussed his options. Jason did a saliva test and agreed he would start on opiate replacement therapy. He had to go onto unsupervised medication within days due to the pandemic. Although Jason did not stay in the hotel for as long as planned, and returned to sleeping on the streets, he did maintain a prescription and the protection that this offers.

Tackling health inequalities

Our commitment

Good health and wellbeing and the experience of health inequalities are two sides of the same coin. Depending on the circumstances within which we were born, grow and live, the factors that can protect us can equally flip to become factors that increase risk to our quality of life.

Whilst supporting people with the individual factors that can make a difference, like everyday choices and lifestyles, at Turning Point we also align our approach firmly with the wider factors and determinants which can have the biggest impact on improving health and wellbeing in both the short and longer-term, such as safe housing, good work and education.

We already support people who are more likely to have poorer health outcomes than others. The very nature of existing discriminatory cultural and social attitudes towards people with a learning disability restricts life chances and associated health outcomes and mental illness account for 21.3% of the total morbidity burden in England.

It was therefore, no surprise to us that COVID-19 negatively affected some people more than others, however no-one could have anticipated the impact the virus would have on the living, working and social environments of the most vulnerable in our society, and the associated costs to their health, wellbeing and lives. Although the raised awareness and greater commitment in supporting people who experience disproportionately poorer health outcomes has been bittersweet given the detrimental impact of COVID-19, the light that has been shone on health inequalities only served to focus attention on the role we play in reducing these unfair, unjust and systematic differences for people across our services, teams and communities.

It was no surprise to us that COVID-19 negatively affected some people more than others, however no-one could have anticipated the impact the virus would have on the living, working and social environments of the most vulnerable in our society, and the associated costs to their health, wellbeing and lives.

What we've done

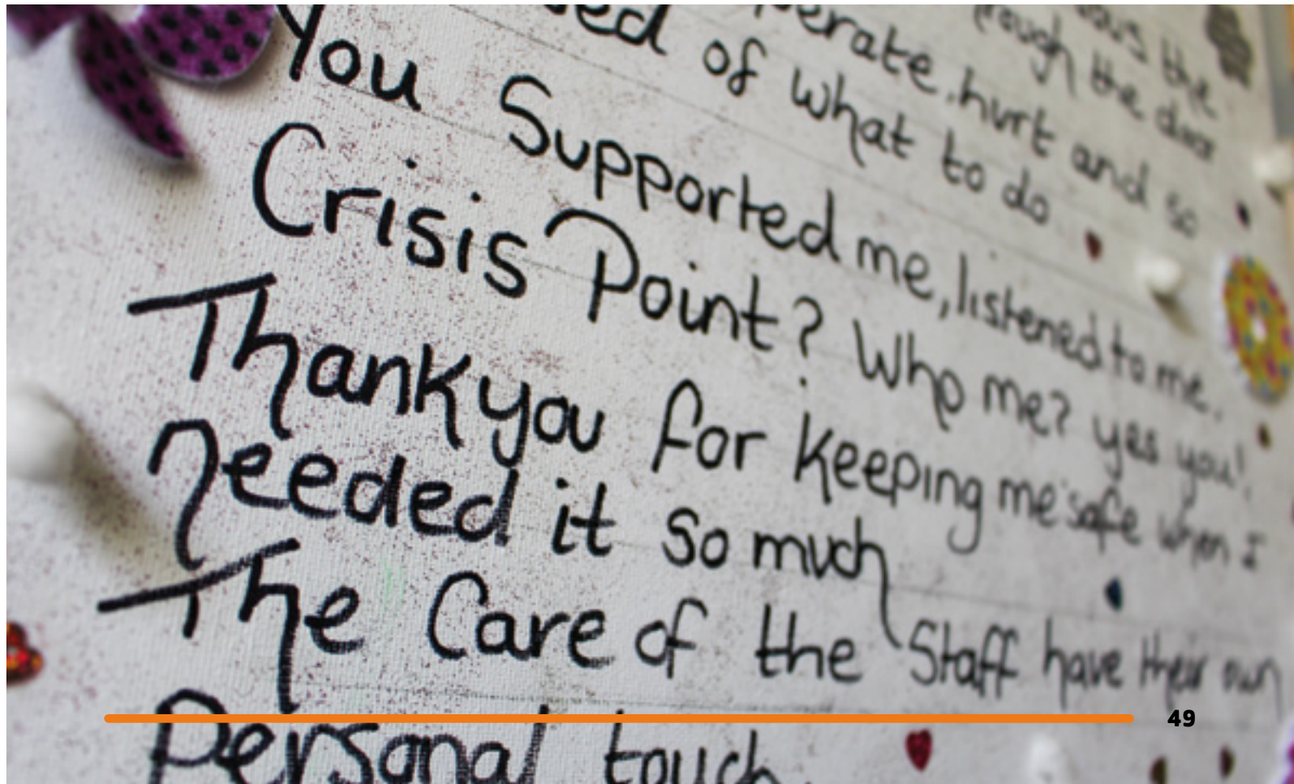
In addition to exploring how Turning Point already supports reducing health inequalities, examples of which are demonstrated throughout this report, we have also spent significant time this year considering how we strengthen our role in the future and taking actions to ensure that.

- We have set up a Health and Wellbeing Board to provide strategic leadership and input.
- We have explored existing levers that can be used to increase understanding and initiate further action against health inequalities which are already part of our everyday practice, such as our social value strategy and our approach to diversity and inclusion.
- We are exploring the use of specific tools that can help us understand the impact we have on health equity across new projects or policies which is also serving to broaden the understanding of the determinants of health for our service delivery staff, our central department staff and the people we support.
- We initiated a programme of lunch and learn webinars for all team members across Turning Point which explored topics relating to health inequalities and diversity and inclusion, allowing engagement, learning and sharing across our many services and staff groups.
- We are accelerating our mapping of where our health inequality data sits to create a baseline for further developments.

Looking ahead

Given that socio-economic factors have the biggest impact on our health outcomes – and these are often driven by society wide influences such as policy and welfare decisions – we know we can't influence all determinants of health for all people who access our services or employment. We are however, committed to doing what is possible with the opportunities we do have.

Our ambition is to continue to develop the ways in which we use these many opportunities across our services, teams and communities to influence the factors that can protect people's health and wellbeing whilst reducing the risk factors which can increase health inequalities now and in the future.



Supporting people with a learning disability

People with a learning disability have poorer physical and mental health than people without a learning disability and they die significantly earlier than the general population, from preventable causes of death.

This has been a challenging year for both the people we support with a learning disability across our services and the team members who have shown immense dedication in supporting them, particularly where we provide residential support and assist people in their own homes. Our focus has not just been on reducing the risk of COVID-19 and the fear associated with it, but also on helping people to maintain a good quality of life, connections with loved ones and manage the change to their daily lives.

To do this we have:

- Set up online Wellbeing Workshops for people with a learning disability to access remotely. Each session is on a different theme and encourages people who join to both consider their wellbeing and connect with others.
- Supported the Wellbeing Workshops with easy read materials that support people to look after their own wellbeing and understand some of the changes that COVID-19 brought to their lives.
- Pulled together a multi-disciplinary team bringing expertise from across Turning Point which enabled team members to join forces and develop a Health and Wellbeing toolkit as a guide for team members in understanding the kinds of things that can impact specifically on the health and wellbeing of people with a learning disability.
- Carried out a health survey to gather a snapshot of information from people we support to help understand how they are, how well they have been able to continue to access services during COVID-19 and what the biggest things are that support people's health and wellbeing currently. The findings will inform future focus areas and action.

Standing up for the people we support

We received an unprecedented number of DNACPRs during the COVID-19 pandemic. During April 2020 we received more than we would usually expect to see in a whole year.

We immediately challenge any that do not meet the requirements of the Mental Capacity Act (MCA) or the Equalities Act (e.g. where the Best Interest process hasn't been followed or where the reason given is 'learning disabilities'). Even during the testing times, we have recently faced, these freedoms are sacrosanct and protected by the Human Rights Act (1998), Equality Act (2010) and United Nations Convention on the Rights of Persons with Disabilities (2006). The unprecedented increase in DNACPRs prompted us to audit the records for all the people we support, to check any DNACPRs on file and to construct a challenge as appropriate.

We worked with Learning Disability England to develop resources to support families and support team members to challenge DNACPRs that do not meet the requirements of the MCA or the Equalities Act. It includes a: DNACPR Checklist, DNACPR Legal Guidance Document and template letters. Alongside the British Institute of Human Rights, Learning Disability England we took the issue up with the CQC and Ministers.

Medical Student placements adapt to virtual learning

Turning Point remained committed to all training, including medical student training, during the COVID-19 Pandemic. Our usual placements of medical students in our services was replaced by virtual visits and lectures delivered to students in the homes. Some of these students were outside of the UK, having been unable to return to their universities.

Feedback from one student from University College London Medical School, who completed a remote placement at Turning Point reads:

"They were kind and thoughtful enough to send us harm minimisation kits which I thought was very nice of them because that made thinking about the point of view of a drug user much easier to understand. Dr Bremner was also very willing to teach us about his experiences with drug users and also very willing to explain how drug users think and what their priorities are. He motivated me to even consider working with drug users in the future!! It was the highlight of medical school for me and the most memorable part of this SSC [Student Selected Component]! I am so grateful for this placement and would love to work with such charities if I get the opportunity after lockdown ends."

We remain committed to training multiple disciplines across all our services and we are the only third sector organisation to train addiction accredited psychiatrists in partnership with the NHS and Health Education England.

We are committed to playing our part in eliminating Hepatitis C (Hep C) by 2030 and have a dedicated Hepatitis C team headed by Dr Rebecca John, with Tom Bills and Emilie Hogg. We are striving for areas of micro-elimination in individual services and in some services, e.g. Somerset addiction services, we are on track to achieve this already. During the pandemic, a shift away from face-to-face working necessitated a change to a new way to test and treat Hep C. Testing can now be done at home and treatment can also be started in the home environment. The use of portable Fibroscan Machines by our team members has also enabled us to check for complications of Hepatitis C without the person needing to attend a service. There is a solid partnership working with the Hep C trust, PHE and Pharmaceutical industries.

Jack hadn't injected drugs for nearly three decades. When he received a Hepatitis C test in the post he didn't think it was meant for him. The information that came with it was interesting but he was certain it didn't pertain to him. A while later he was visited by someone from the Hepatitis C trust who was working with Turning Point. He was persuaded to get tested and was alarmed to find he was positive for Hep C. A fibroscan showed he was quite far into the Hep C disease process and his liver was struggling. He started treatment immediately for eight weeks and he has a greatly improved quality of life ahead of him.

We remain committed to training multiple disciplines across all our services and we are the only third sector organisation to train addiction accredited psychiatrists in partnership with the NHS and Health Education England.

Evidence of how we were clinically safe during COVID-19

At the onset of lockdown, the senior clinical team was quick to align with PHE. We offered our expertise to the various panels and groups that were set up to determine the direction of travel for various services, e.g. Addiction services. We had to ensure that all persons who were prescribed medication, continued to receive that medication despite pharmacy closures, lock down restrictions and at times, the need for the prescribed person to isolate.

Using multiple methods, we were able to ensure that all patients received their medication despite the pandemic. We also assisted PHE to write the standards that we comply with for the prescribing patterns during the pandemic.

Although we did not close a single addiction service, we did move to remote working as the norm. Patients were telephoned and attended online groups which were rapidly set up. The work done on remote treatment from previous years stood the organisation in good stead for the remote working of the pandemic.

Alcohol treatment pathways were also flexed to ensure that people still received alcohol detoxes. These had to remain safe and clinically robust without any face-to-face element and this was done by enlisting the assistance of family more than ever before.

Debbie was dependent on alcohol and needed to detox from it. Due to the pandemic, she was unable to attend the service and a nurse from the service was unable to come to her home as frequently as a detox programme required. Debbie was very keen to be detoxed and her husband, Paul, who had previously agreed to support Debbie during her detox stepped in to carry out some of the tasks that the nurse would have otherwise done. When Debbie's detox started, Paul would help her measure her blood pressure on the automated machine that we had provided. He would then help her with a disposable breathalyser that she needed to use before she started her medication and was on hand to assist Debbie in answering her phone and speaking to the team who were managing her detox. Paul had been fully prepped before the detox and he felt much more included in the process. As Debbie's blood pressure returned to normal and her withdrawal symptoms subsided, the progress she was making physically was very clear to both of them. Debbie was then able to go on to using the group work online after she had detoxed.

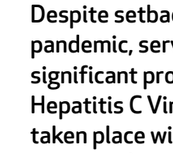
Implementing our Hepatitis C Virus strategy

Despite setbacks caused by the COVID-19 pandemic, services have managed to make significant progress in implementing Turning Point's Hepatitis C Virus strategy. Collaboration has taken place with ODNs (Organisational Delivery Networks) and the Hepatitis C Trust across all services to significantly improve testing and treatment levels. It has also allowed our services to establish community clinics and to reach out to the most marginalised and at-risk populations e.g. people who are homeless.

To overcome the challenges presented by COVID-19 and to increase testing figures, we piloted self-testing in two services (Wakefield and Leicester, Leicestershire and Rutland). This was very successful; overall 58.3% of self-testing kits were returned to the lab and in Wakefield 80% of self-testing kits were returned. Also, none of the returned kits were rejected by the lab. To support the clients in completing the postal tests, we developed a demo video with the Hepatitis C Trust and sent out clear, simple instructions containing a QR code to the video.

Due to the pilot's success, we decided to roll out postal testing across all services, following training in January 2021. So far 38 self-testing kits have been returned to the lab. None of the tests were PCR[8] positive.

Continued education and promotion of Blood Borne Virus (BBV) testing and treatment to team members, volunteers and clients will change attitudes and allow our services to return to the levels of testing seen before the COVID-19 pandemic and will go on to achieve even higher testing rates.



Overall 58.3% of self-testing kits were returned to the lab and in Wakefield 80% of self-testing kits were returned.

8 polymerase chain reaction.

Digital and technological response

Remote working

The initial challenge arose on the day we initiated home working for many team members. A central way to ensure a smooth transition was to enable our workers to access their documents remotely. Before the pandemic, we had built resilience and capacity into our infrastructure, by ensuring that our Virtual Private Networks – which allow our team members to access their folders remotely – was only operating at approximately 20% capacity. This provided us with the headroom we needed to respond to changing needs when we moved to homeworking. Our central services suffered no detrimental impact as the change took place and were able to work effectively despite the changing conditions.

A wholescale shift to telephone and video therapy has resulted in improved engagement and recovery rates.

Video therapy

We saw a dramatic reduction in referrals to our IAPT services during the lockdown. In April 2020 referral rates were 10–15% of what we would normally see, in May 2020 they were 40–50% of normal activity and they are still only at around two thirds of what we would expect. Reduced demand has resulted in a significant reduction in waiting lists and so waiting times for treatment have reduced considerably.

A wholescale shift to telephone and video therapy has resulted in improved engagement and recovery rates. For example, Did Not Attend (DNA) and cancellation rates have reduced by half. However, this is based on a small sample size. Feedback from therapists has generally been positive and people have been surprised by how well clients have been able to engage with remote services. Therapists however, report finding it more tiring than face-to-face or even telephone therapy appointments and that has now been factored into scheduling.

Several changes have been made to our processes to help those on the frontline and ensure their safety. As mentioned earlier in this report, we launched a new PPE stock app to help local services and central teams manage the ordering and distribution of PPE.

Carers wellbeing support pack provides expert advice

We utilised our digital capacity by creating the Carers Wellbeing Resource Pack.

Families and unpaid carers looking after vulnerable loved ones can access wellbeing support through a guide published by Turning Point. The guide has been drawn up in response to concerns that many carers feel burned out, isolated and overlooked. This is as a result of the closure of services such as day centres and limited social contact with family and friends as a result of social distancing restrictions.

The guide provides expert advice on issues such as practising self-care, letting go of negative emotions, including sadness or resentment, and taking breaks to have a chance to rest.

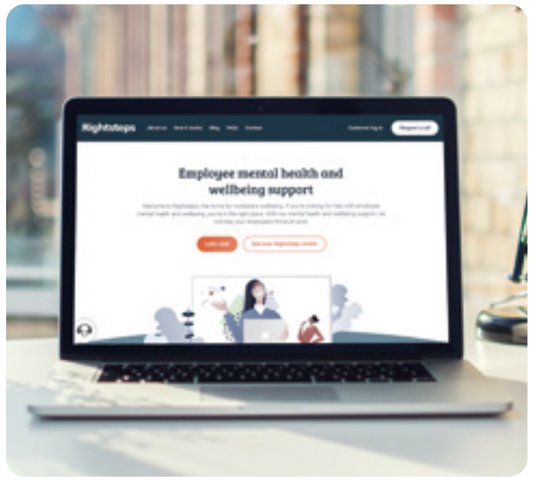
A section of the guide is also dedicated to planning for the future such as emergency planning and dealing with support workers as well as signposting carers to other sources of useful information such as Turning Point's digital guide on grieving.

Providing support to the wider public and health systems

Rightsteps' COVID-19 support and eBook

A digital wellbeing guide was created by our Rightsteps team of psychologists to support mental health at the time of moving out of the first lockdown. The e-book compiles Rightsteps' COVID-19: Keeping Well blog series into one digital resource addressing so-called 'lockdown fatigue', worries and fears during the pandemic, maintaining relationships, and coping with bereavement, grief and loss experienced by many during COVID-19.

Through providing free online support for anyone that needs it, nearly 1,000 people had accessed the blogs by May 2020.



As part of our contribution to the pandemic response, we made the Rightsteps resources accessible to many businesses, business organisations and representative trade bodies. We also offered Rightsteps 'Helping Hand' to some Local Authorities and NHS Trusts – providing access to our 'Find Out More on Coping with COVID-19; bereavement; redundancy, and financial wellbeing' resources.

Recovery month Facebook live wellbeing workshops

The Turning Point Facebook channel held a live weekly workshop using an open forum format to discuss a different area of recovery using the 'Five Ways to Wellbeing', giving the public the opportunity to anonymously ask questions of a panel of experts and people with lived experience of addiction.

Service integration through technology

Turning Point and the Leicester Partnership Trust worked in close collaboration during the pandemic. The mental health pathway has become integrated, so that Turning Point can now refer into the crisis team.

The multi-agency Suicide Audit and Prevention Group (SAPG) have been working over the past two years to address higher than average numbers of suicides across Leicester and Leicestershire. The group introduced a Referral and Tracking System to track engagement with services, e.g. mental health and substance misuse services, for all suspected deaths by suicide identified by the police.

There has been a significant increase in deaths from suicide since the lockdown. There were 39 deaths during April to June 2020, compared to 80 in the whole of 2019. As a result, SAPG has moved from monthly to weekly meetings during the pandemic. The group includes representatives from the CCGs, Leicestershire Partnership Trust (LTP), GPs, the police and third sector providers such as Turning Point.

The SAPG is driving a redesign of the mental health pathway. Proposals for a Central Access Point (CAP) similar to 111 have been brought forward and the service opened at the beginning of June 2020. For the first time, people can now self-refer to the LPT crisis team (previously you had to be referred by a clinician – typically your GP, the Turning Point Crisis House team could not refer to the LPT crisis team they could only signpost) which means that the Turning Point Crisis House is much more integrated into the mental health pathway. To date approximately 50% of calls have not required clinical intervention but rather, people have needed emotional and psycho-social support.

It is worth noting that the Central Access Point service was shortlisted for a HSJ award.

livelife

Responding to public need and innovating for the future

Livelife is our new direct-to-consumer therapy service. It uses the same resources, applications and systems as Rightsteps and Turning Point, and like Rightsteps (our business-to-business product – see page 56), all of the profits for livelife return back to Turning Point for future investment in services.

Prior to COVID-19 between £2.5bn and £3bn was spent each year in the UK on private therapy.

We all know the impact of the pandemic on the nation's mental health. We see it amongst our friends and family members as well as hearing the reports on the news. It is no surprise that in June 2020, 11% of adults reported thoughts of suicide in the past 30 days and by January 2021, 41% of adults reported symptoms of anxiety and/or depressive disorder. There are many other statistics telling a similar worrying story. We know that there are likely to be significant changes and restrictions on how we move around, socialise and work for many years to come.

Whilst livelife is just starting out we have responded to this need. We have great ambition and hopes for the service to reach more people.

Many people choose to pay for therapy themselves. They have either accessed commissioned Talking Therapy support already or, for personal reasons, choose not to access support this way. Prior to COVID-19 between £2.5bn and £3bn was spent each year in the UK on private therapy. The majority of this was through individual therapists rather than companies. We believe that livelife could provide greater quality assurance (building on Turning Point's great clinical and technical infrastructure), greater choice (more therapists, CBT & Counselling, integrating our online wellbeing platform etc.) and offer all of this at an affordable price. This approach responded to the societal need, stayed true to Turning Point's values, created a new signposting or referral tool to our services and provided a new revenue stream for Turning Point to invest back in to providing services for the people we support.

Rightsteps

Supporting employers with their wellbeing offer and providing access to psychology and therapy

Providing timely access to expert wellbeing support and responding to customer and employee needs sits at the heart of what we do at Rightsteps. The arrival of the pandemic saw the Rightsteps team respond swiftly, developing new, COVID-19 specific support options that enabled significant numbers to support their wellbeing and the wellbeing of those around them through the challenging times we all faced.

The importance of employee wellbeing has come into sharp focus in the last year with ever more employers seeking to support their teams' wellbeing. Rightsteps is ideally placed, offering evidence-based solutions that employers can trust. We've seen a 210% increase in the employers we support from across a range of sectors, including those working on the frontline in the battle against COVID-19 for example;

- **Royal Medical Benevolent Fund:** supporting frontline doctors
- **The Ambulance Staff Charity:** providing access to counselling and CBT for ambulance workers across the UK

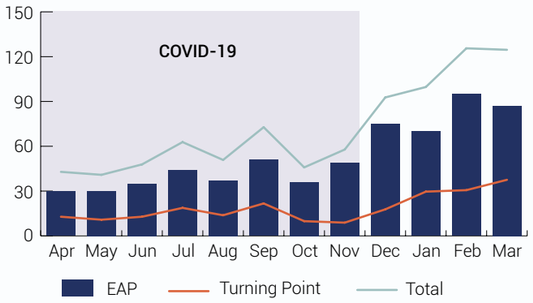
Whilst access to online support increased during the height of the pandemic, demand for our remote therapy service reduced as people coped with the here and now challenges they faced.

Bereavement to resilience, burnout to relationships our online COVID-19 specific support was accessed over 7,500 times in 20/21.

As we've come out of 2020, these unmet needs have come to the fore, with a 37% year-on-year increase in demand for our remote therapy service in early 2021.

Last year also saw a 51% increase in demand for our confidential Rightsteps therapy service for Turning Point team members, supporting almost 230 people.

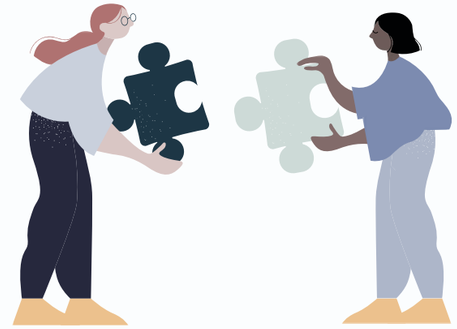
Referrals by month FY 20/21



Over the last year, we've continued to innovate. Working with Professor Myra Hunter, we've developed the first online evidence-based CBT programme for menopausal symptoms and have developed a partnership with Secondsight, a leading financial wellbeing provider, to extend our offer to meet more and more team members' needs.

Throughout all the challenges of the past year, our commitment to quality has never wavered. Our customers trust us because we match support to need and this is seen in our outcomes, with 68% of people accessing Rightsteps therapy achieving 'recovery' against a national average of 50%. Indeed, over 80% of team members stated they felt better informed about their wellbeing and over 95% knew where to turn should they need more support.

Everything we do at Rightsteps is about supporting people. Our solutions support employers and their team members and every penny we make goes back into Turning Point, to support the most vulnerable people in society.



Service user feedback...

"I would just like to thank you for all your help over the last few months. Your help has been instrumental in me getting back on track. You're a star, thank you so much."

"Just to say thank you for being patient and amiable. It's made life easier. You have taught me lots. In the last 35 years I've not learnt what I have with you and your resources. Hope I don't have to speak with you again!!!! But if I needed to I hope it will be... thanks again."

"Thank you for all the help and support over the last few weeks I would've struggled without it, you're a credit to your profession."

"Thank you very much for your help and support. I'm feeling so much better and sleep great now. I have reflected on things and am making lots of positive steps to move forward in my life."

"For the past two months I have had terrible anxiety which has made my life in some ways very hard. Over six sessions with you I have been able to get my marriage back on track and my work and sleep back on track. I have learnt with your techniques I can control and rationalise my anxiety. I can't thank you enough for your help and being patient when I needed to explain and speak to you. I would fully recommend this service to anyone who needed the help like I did."

Social value

As a person-centred organisation, our support is tailored and responsive to the needs of the individuals we work with. We believe that everyone, given the right support, can reach their potential. When individuals benefit, so does society, with positive impacts delivered for the economy and environment, as well as improvements to general health and wellbeing and community cohesion.

Maximising the social value we deliver as an organisation is a key priority for us and as part of achieving this we are committed to:

- Continually looking for new opportunities to support the development of local social enterprises which create new employment opportunities for people who have been excluded from the workforce in the past.
- Employing people with lived experience in all services.
- Tackling worklessness through the creation of volunteering opportunities, apprenticeships, bursaries and supporting the people we work with to access education, training and employment opportunities.
- Up-skilling the health and social care workforce.
- Investing in the local economy where we provide health and social care services, for example by working in partnership with local community and voluntary sector organisations and supporting local suppliers.
- Promoting the wellbeing of the people we support and our team members.
- Promoting social inclusion and community participation for everyone we support.
- Supporting family and carers.
- Supporting people to participate in community life whatever challenges they might face in order to create more cohesive communities.
- Minimising our negative impact on the environment;

In 2020, we embarked on creating a social value strategy for 2020–2022. This document sets out our commitment to social value, our vision and our strategic objectives over the next two years as well as setting out our goals over the longer-term (i.e. during the next strategic period) in the areas of: economy, wellbeing, community and environment.

To maximise our social value, and to help measure it, we undertook a baseline assessment of our current social value reporting against the National TOMs (Themes, Outcomes, Measures) framework. Then we agreed new measures where activity is not covered by the TOMs framework and now embed routine reporting of social value metrics.

Wellbeing

Health and wellbeing for all

We want every single person we support to stay as well as possible and live healthier lives. We want all our team members to feel that they have the support they need from us to improve their health and wellbeing. We want to reduce the stigma associated with drug and alcohol problems, mental health issues and learning disabilities. We want to reduce the health inequalities faced by the people we support. To support this, we have a number of objectives:

Objective: Include a wellbeing offer in all bids as appropriate

- We were recently awarded the contract to deliver substance misuse services across City of Westminster and the Royal Borough of Kensington and Chelsea. As part of this contract we have made a commitment to achieve London Healthy Workplace accreditation.
- In our new Hackney and City substance misuse service we have dentists working out of the service offering free dental checks on a weekly basis and the service has been offering COVID-19 vaccinations to the people we support.

Objective: Expand the reach of Turning Point School of Art

- Turning Point School of Art ran a summer school that was facilitated by Professor Sarah Perks and featured a number of different artists.
- School of Art worked in collaboration with Nottingham Off-Centre (A Nottingham based photography/social engagement project). This showed how photography can support people through issues including the pandemic.

Objective: Explore and scope a model for social prescribing for people with complex needs

- During 20/21 we developed a pilot model with a GP network in Birmingham which launched in June 2021.

Objective: Improve team members wellbeing and mental health group

- Turning Point has signed up to Mindful Employer, the 'Charter for Employers Positive about Mental Health'.
- As an employer, we are committed to creating a supportive and open culture, where team members feel able to talk about mental health confidently. This gives additional resources for managers and allows us to use the charter at attraction stage.
- We saw a 19% increase in agreement with the statement 'My organisation gives a high priority to employee wellbeing' in the 2021 Employee Engagement Survey compared with 2019.

Objective: Develop a series of identity based colleague forums to drive diversity of thought and wider inclusion in the colleague and client experience we provide

- Black, Asian and Minority Ethnic, LGBTQ+ and People with a Disability Employee Networks were launched in April 2021.

Community

Supporting our communities to thrive

We want local social enterprises, community and voluntary sector organisations to thrive. We want everyone to feel part of their local community with a strong network of friends and neighbours around them and to be part of community life. We want everyone to feel their voice is heard and that they can have a say in how services are run and act on issues of concern in their neighbourhood. To enable us to do this we have the following objectives:

Objective: Establish a national innovation fund

- In 2020 we launched a new employee-led service innovation scheme. The scheme aims to involve many more of our people in our drive for continuous improvement and solutions that make a real difference to those we support. This scheme enables us to hear ideas and thoughts and to support our teams to implement great new initiatives that have a significant and positive impact. This year's projects include:
  - Fresh Foundations which aims to empower the people we support in Manchester with greater confidence to develop their own individual skills and improve health and wellbeing.
  - Community Sports Inclusion for people living with a learning disability In Kent to build a positive relationship with physical exercise and nutrition as well as build connections to reduce isolation.
  - Turning Point School of Art which aims to give people we support across England and our team members opportunities to explore, appreciate and make art to support their wellbeing.
  - Crafternoons giving people from our LGBTQ+ communities in London a safe and welcoming online space to make connections, learn new skills and create arts and crafts together.
  - Magic Sensory Garden to be installed in one of our Warwickshire locations which supports residents with a learning disability to increase their wellbeing through sensory experiences and gardening.
  - Safer Stronger Communities initiative in Rochdale and Oldham which aims to set up a recovery community to work with the local community, volunteers, police (police cadets), Princes Trust, carers groups and concerned others to get fully involved in harm reduction.
- Croydon through the Gate Service which aims to support those leaving prison with a set of resources which aim to engage them in treatment for their substance misuse, as well as creating links to wider community support.

Objective: Offer capacity building (marketing, fundraising/policy writing support, IT resources, training, shadowing and volunteering and shared-mentoring opportunities) for local community organisations in bids as appropriate

- Managers at the new substance misuse service covering the City of Westminster and the Royal Borough of Kensington and Chelsea will provide six days support each year to local community organisations and the service will provide four asset-based community development sessions per year.

Objective: Extend the Quality Checkers programme and explore closer integration with the internal quality assurance process

- The Specialist Community Outreach Team (SCOT) previously led on the Quality Checkers initiative and pre-COVID had recruited, trained and finalised employing two people we support as 'experts by experience' in the North along with two team members as Quality Partners.

Objective: Include Innovation Fund and Big Ideas Fund in all bids as appropriate

- We currently have innovation funds within our central London substance misuse and sexual health services, our Rochdale and Oldham and also our Leicester, Leicestershire and Rutland services. Our Westminster and Royal Borough of Kensington and Chelsea service innovation fund has recently been expanded to include an additional £20,000 for an 'engagement fund' for organisations/groups/individuals to support engagement of harder-to-reach groups with emphasis on the Black Asian and Minority Ethnic community.

Objective: Roll out the digital 5-step programme designed to support adult family members who are affected by a relative experiencing alcohol and drug problems, if the pilot is successful

- The digital 5-step programme is now available in a number of services with interventions delivered by trained team members either on a 1:1 or online group basis.

Objective: Develop a Rightsteps package for family and other unpaid carers of people with disabilities

- A guide was drawn up in response to concerns that many carers feel burned out, isolated and overlooked. This is as a result of the closure of services such as day centres and limited social contact with family and friends in response to social distancing restrictions.

Economy

Providing opportunities for all

We want every single person we support to have access to some sort of education, training and employment/volunteering opportunities and for people who are facing challenges with mental health issues to have the right support to be able to stay in work wherever possible. To achieve this, we set ourselves a number of targets to meet by March 2022:

Objective: Increase the number of people we employ who were previously economically inactive targeting local people

- We are targeting local communities in recruitment drives across the country.

Objective: Expand the employment and volunteering opportunities for people we support in services and central support teams

- Last year we had 168 volunteers, 80 volunteers and 35 student placements working in various parts of the organisation.
- We can report based on those who have been in those roles and have moved to Employment with Turning Point.

Objective: Expand the number of opportunities for people who have been out of work for a long time targeting disadvantaged groups

- As part of the Kickstart Scheme we have created 30 entry level roles across Turning Point specifically for people aged between 18–25 years old.

Objective: Improve training opportunities for team members and increase support for apprenticeships

- We have approximately 65 team members undertaking qualifications utilising the apprenticeship levy from Level 2 to Level 7.

Environment

Playing our part in tackling the climate emergency

We want to provide leadership within the health and social care sector, driving down emissions in order to play our part in tackling the climate emergency. Work on this includes:

Objective: Reduce our carbon emissions compared to 19/20 baseline

- We have moved to a green energy tariff which commences 1 April 2022.

Objective: Reduce waste and increase recycling

- The procurement team is continuing to work with our waste provider – Wynsdale and it is their intention to move all general waste provision to one central contract from 1 April 2022 which will drive increased recycling.

Risk management

Principal risks and uncertainties

Turning Point operates in a business with significant risks. The people we support can have mental health issues and learning disabilities requiring intensive support, or substance dependency including clinical prescribing of medicines.

Principal risk or uncertainty	Mitigation and controls
Financial risk: Contract pricing reductions places pressure on margins.	Investment in cost control measures and robust financial monitoring.
Operational risk: By the very nature of the contracts undertaken, the people supported through those service contracts are often adults at risk of self-harm, injury, abuse and even death.	Investment in robust clinical governance frameworks, policies and procedures (including health and safety) that meet or exceed regulatory requirements. Comprehensive risk management and incident reporting and monitoring systems.
Information Management and Technology: Increasing reliance on data, information and systems gives rise to cyber risk leading to potential data security breaches and business continuity issues.	Investment in robust policies, procedures and training in data security requirements. Investment in a new data centre, technology infrastructure and skills.
Strategic: Changes in government policy, continuing public sector funding cuts in a tough economic trading environment.	Commitment to the principles of emergent strategy, being agile and responsive to market risks and opportunities.
People: Our people are our most important asset and the primary means through which we are able to add value to the lives of the people we support. Within a low margin business this presents risks around recruitment, retention and development.	Investment in a people strategy to enable a 'can-do' culture of consistent performance with appropriate recognition and development opportunities.

Internal Controls Assurance

The Board recognises that no system of internal control can provide absolute assurance or eliminate all risk. The system of internal controls is designed to manage risk and to provide reasonable assurance that key business objectives and expected outcomes will be achieved.

The Board confirms that the process for identifying, evaluating and managing the significant risks faced by the company is on-going, has been in place for the whole of the financial year and up to the date of approval of the annual financial statements, is regularly reviewed by the Board.

The Board has reviewed the effectiveness of the system of internal controls in existence for the year ended March 2021 and until the date of approval of these accounts. No significant weaknesses were found in the internal controls that resulted in material losses, contingencies or uncertainties that required disclosure in the financial statement or in the auditor's report on the financial statements.

Trustees' report

Chair's introduction

On behalf of the Board I am pleased to present the combined Directors' / Trustees' Report for the year ending March 2021. In a year which has been dominated by the challenges presented by COVID-19 it has never been more important to ensure good governance delivers value and assurance.

Purpose and leadership

The Directors' report covers a review of objectives. With a strong vision and values the organisation is well-placed to manage risk and capitalise on opportunities in the markets in which we operate.

Board composition

There have been several changes to the Board during the year. Helen Spice stood down from the Board in July 2020 leaving Turning Point to pursue other interests having served as Chief Financial Officer for just over two years. I would like to thank Helen for her service and to acknowledge the contribution of Chris Parker, an outgoing Non-Executive Director, who stood down in January 2021 having served nine years on the Turning Point Board and other boards within the group. We welcome Amarjit Dhillon who joined the Board in April 2020 and Christian Van Stolk who joined in December 2020.

Board effectiveness

Our triennial independent board effectiveness review took place during 2020. This was the first independent review following adoption of the Wates Principles in 2019 and affirmed the strong composition and effectiveness of the Board.

We continue to embed and mature these principles into the corporate governance fabric of the organisation. As a Board we are committed to individual and collective development in pursuit of the strategic goals of the organisation.

Remuneration

The Board has taken the decision to create a permanent Remuneration Committee and further details are set out in the Directors' Report.

Engagement

There has been an increase in stakeholder engagement during the year as we gear up to transition into a new strategic period formally commencing in April 2022. Engagement with our customers, beneficiaries, and team members amongst others is helping to shape our thinking and resolve for the future.

It is with great sadness that our Non-Executive Board Member Dr Alison Hill passed away in July 2021. Alison joined our Board in September 2017, generously sharing her extensive experience as a GP, as well as her health policy knowledge. She will be greatly missed.

Peter Hay
Chair of the
Turning Point Board

Our Board of Trustees

Executive Board Members

Julie Bass, Chief Executive

Julie has been an executive board Director at Turning Point for the past 12 years, holding the position of Chief Executive since April 2020. Prior to this Julie worked in financial services in the UK and overseas in a wide variety of roles before moving into management consultancy where she focused on organisational effectiveness and system leadership. She is passionate about the role that Turning Point can play in tackling health inequalities and creating the conditions which enable individuals, whatever their circumstances, to exercise choice and control over their lives. Julie cares deeply about supporting individuals to discover new possibilities in their lives and the role that high quality, holistic, responsive and flexible services can play. Julie is a Chartered Insurer and a fellow of the Chartered Institute of Personnel and Development.

Amarjit Dhillon, Chief Information Officer

Amarjit joined Turning Point in March 2014 as Chief Information Officer with accountability for Commercial Ventures since September 2018 and was appointed as an Executive Board Member in April 2020. Amarjit trained as a technologist in the NHS and then moved into the corporate sector where he specialised in directing transformation and change in global organisations. He has technology and information management experience as well as time spent in production and operations management, sales and customer facing roles. Amarjit is a Non-Executive Director for a housing association. He is a Chartered Engineer, a Chartered IT Professional and a Fellow of the British Computer Society and a Member of the Institution of Engineering and Technology.

Non-Executive Board Members

Peter Hay, CBE, Chair of the Board

Peter became Chair of Turning Point Board in September 2018. After a long career as a Director of social care services, and a past president of the Association of Directors of Adult Social Services, Peter is now pursuing a range of interests in different roles across social care, housing and wellbeing. Peter is curious about ways of developing people's control over their own health and wellbeing, passionate about building good lives and fascinated by the leadership styles that support these aims. Peter was awarded a CBE in 2012 for services to health and care.

Nicola Gilham

Nicola joined the Turning Point Board in May 2018. She also sits on the Audit, Risk & Quality Committee. As a qualified chartered accountant, she enjoyed her first career with Arthur Andersen where, for many years, she led consulting assignments, both in the UK and overseas. Whilst living in Australia, she moved into recruitment and worked in the sector for over 20 years. Nicola now pursues a portfolio Non-Executive career working for businesses across health and social care. She also has a long-standing interest in her local community. As such, currently, she is a Non-Executive Director for the Vale of Aylesbury Housing Trust, a provider of social housing for 21,000 residents, Brighter Futures for Children in Reading which runs Children's Services for the Borough, and also the Buckinghamshire Healthcare NHS Trust. She is Vice Chair of Child Bereavement UK, and separately she spent several years, in a voluntary capacity, as a telephone counsellor for emotional support services.

Paul Picknett, Chair of the Audit, Risk & Quality Committee

Paul joined the Turning Point Board in March 2014 after working in financial services for more than 30 years both in the UK and overseas. His career included 14 years as a main Board Director of Groupama Insurance Company Limited, where he was Corporate Services Director. He has been actively involved in a number of strategic acquisitions, including the acquisition of an award-winning healthcare operation. He is Trustee Chair of a pension scheme with assets over £310 million. He has a degree in management studies and is a Fellow of the Chartered Insurance Institute. In 2014 he joined the Turning Point Audit, Risk & Quality Committee taking on the role of Chair with effect from October 2017.

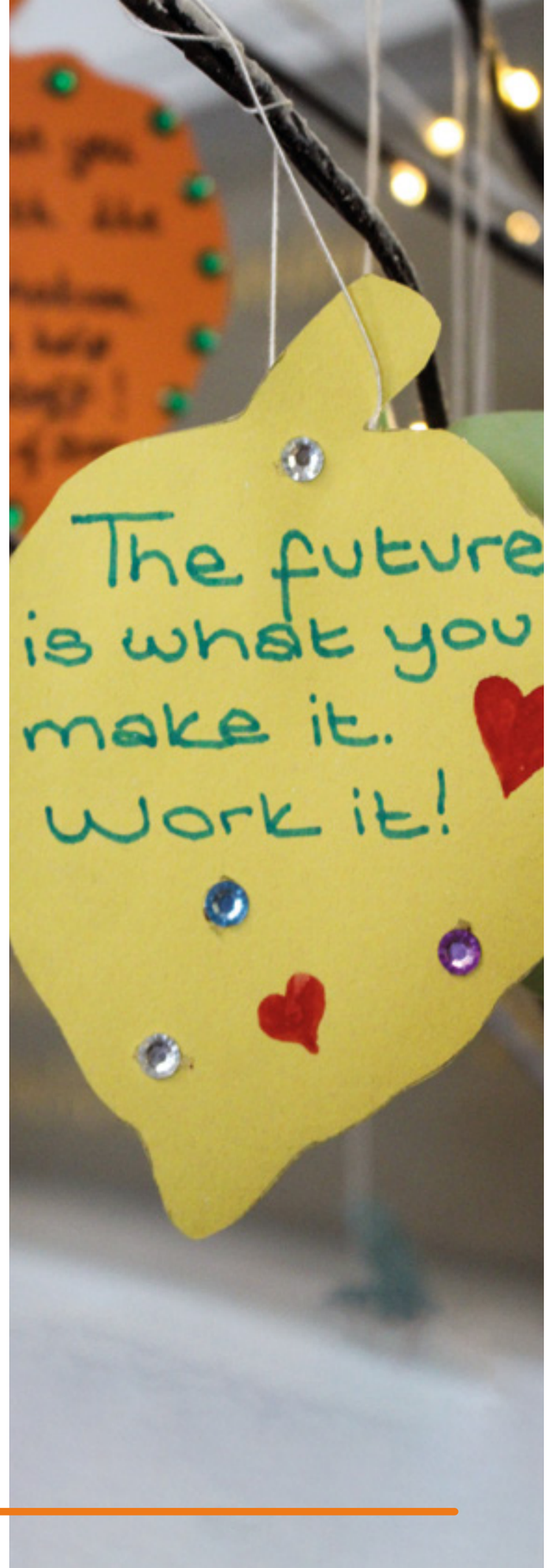
Dr. Alison Hill

Turning Point is sorry to share the sad news that Alison passed away in July 2021. Alison joined our Board in September 2017, generously sharing her extensive experience as a GP, for over 30 years, as well as her health policy knowledge as a senior NHS manager, commissioner, academic, and civil servant. Alison also supported us as a member of our Audit, Risk and Quality Committee. We pass on our condolences to her husband family and friends; she will be greatly missed.

Dr. Christian Van Stolk

Christian joined the Board in December 2020. He has worked extensively on health and wellbeing in the workplace including research on improving the health and wellbeing of staff in the National Health Service in the UK, maintaining and gaining employment for those with common mental health conditions, building an evidence base for health interventions in workplace settings, and looking at the relationship between productivity and health and wellbeing outcomes.

Christian sits on several expert panels for the UK government including those on occupational health, mental health, and employee health and wellbeing in the NHS. He holds a Ph.D. from the London School of Economics and Political Science and fellowships at the Royal Society of Medicine and Royal Society of the Arts.



Structure, governance and management

Subsidiary companies

Turning Point has one wholly owned subsidiary, Turning Point (Services) Limited which is the trading arm of the parent charity. The subsidiary board meets twice a year and has a board composition of five Directors from the Turning Point Board and two independent Directors.

Turning Point also has a 50% shareholding in Northern Pathways Limited with The Retreat York. Northern Pathways Limited ceased trading on 31 March 2019.

Turning Point Board meetings

The Turning Point Board met formally 10 times between April 2020 and March 2021.

Board attendance in 2020–21	Turning Point
Number of meetings in 2020–21	10
Numbers attended:	
Peter Hay (Chair)	10
Paul Picknett (Vice Chair)	9
Christopher Parker	9 out of 9
Alison Hill	9
Nicola Gilham	10
Julie Bass	10
Amarjit Dhillon	10
Helen Spice	5 out of 5
Christian Van Stolk	2 out of 2

Recruitment and appointment of Directors

The Directors of Turning Point form a unitary board of Non-Executive and Executive Members as defined by the Articles of Association. The Directors are also the Trustees under charity law. Executive Members are appointed according to the terms of their employment with the company under a Relevant Qualifying Position. Non-Executive Members are appointed by the Board following an open recruitment process overseen by the Nominations Committee. Directors are appointed for a three-year term with the option to be reappointed to a second term on a vote of the Board. Directors can, following sufficient review, be appointed to a third three-year term should circumstances require this. Newly appointed Directors go through an induction process that includes service visits, meetings with key senior managers and other Directors of the Board. There is also an introduction to the regulatory and market environment, the strategic aims of the company and the associated risk and challenges. Christian Van Stolk was appointed as Non-Executive Director of Turning Point on 11 December 2020.

Statement of Directors' Responsibilities

Company, charity and registered social housing legislation require the Board to prepare financial statements for each financial year which give a true and fair view of the state of affairs of the Charity and of the income and expenditure for the period of account.

In preparing these financial statements, the Board is required to:

- Select suitable accounting policies and then apply them consistently;
- Make judgements and estimates that are reasonable and prudent;
- State whether applicable accounting standards have been followed, subject to any material departures disclosed and explained in the financial statements; and
- Prepare the financial statements on the going concern basis unless it is inappropriate to presume that the Charity will continue in business.

The Board is responsible for keeping proper accounting records which disclose with reasonable accuracy at any time the financial position of the Charity and enable it to ensure that the financial statements comply with the Companies Act 2006, Charities Act 2011 and the Housing and Regeneration Act 2008, Housing SORP 2018 and the Accounting Direction for Private Registered Providers of Social Housing 2019. It has general responsibility for taking reasonable steps to safeguard the assets of the Charity and to prevent and detect fraud and other irregularities.

Disclosure of information to auditor

As far as each of the Directors is aware, there is no relevant audit information of which the charitable company's auditors are unaware. The Directors have each taken all the steps that they ought to have taken as Directors in order to ensure they are aware of relevant audit information and to establish that the charitable company's auditors are aware of that information.

The Board of Directors is responsible for setting and monitoring vision and values. The unitary board includes Non-Executive and Executive Members who together agree corporate strategy and review corporate risk and associated internal controls. Day-to-day management of the company is delegated to the Operating Board and the senior managers. The responsibilities and function of the Board are set out in the Governance Standing Orders, which are based on the Turning Point Articles of Association and the principles of the Wates Corporate Governance Principles for Large Private Companies (the Wates Principles). The Directors apply the corporate governance they consider to be appropriate given the nature of the entity, having due regard to the principles of governance set out in the Wates Principles and Section 172 of the Companies Act 2006.

Board effectiveness

During 2020 the Board engaged in a self-assessment of board effectiveness and also an externally facilitated board effectiveness review.

Conflicts of interest

Upon appointment, all Directors are required to declare their interests. On an annual basis, all members are asked to update the register of interests, which includes the fit and proper persons requirements. At each meeting of the Board and Audit, Risk & Quality Committee, members and attendees are required to state any interests with regard to specific items on the agenda in line with their duties under the Companies Act 2006.

Payments to Directors

Since 2008, with the establishment of a unitary Board structure and as agreed by the Charity Commission and the housing regulator at the time, our Non-Executive Directors of Turning Point have been remunerated £4,000 per year for their services to the company. The Chair is paid £6,000 per year. Executive Directors are paid for their executive roles and do not receive additional payment for their responsibilities as Directors of the organisation. Apart from the reimbursement of expenses entailed in the course of the company's business, there have been no other payments to Directors in 2020–21.

Following a review by the independent Remuneration Committee, Non-Executive Directors of Turning Point remuneration levels have been increased to £7,500 per year for the Chair and £5,000 per year for the other Non-Executive Directors from 1 April 2021.

Corporate Governance Code & Fundraising

The Board has subscribed to the Wates Corporate Governance Principles for Large Private Companies since March 2019 on the basis that the Wates Principles are better suited to the organisation. The board confirms that as a small Registered Provider subject to the regulations overseen by the Regulator for Social Housing it has carried out the necessary assessment and that it continues to comply with the Governance & Financial Viability Standard. The charity had no fundraising activities requiring disclosure under S162A of the Charities Act 2011.

Our people

This year has placed significant challenges on our committed workforce of over 4,000 team members, peer mentors and volunteers, facing into the pandemic while supporting each other, and the thousands of vulnerable people who rely on us each day in services up and down the country.

We have prioritised safety, communication and engagement to keep them informed of the latest guidance on how to keep themselves and others safe, celebrated their successes in the face of adversity and made efforts to strengthen their physical, emotional and financial wellbeing.

This has been coupled with regular two way feedback channels to help make improvements, track morale and ensure spaces are available to sense make and connect with each other. Diversity and inclusion developments throughout the year have increased, creating opportunities to celebrate and learn about the dimensions of difference within our workforce and how those experiences shape our people and what we do as an organisation. Despite the challenges being faced we have continued to welcome people from inside and outside of the sector to become part of the Turning Point team over the last year, including those at the beginning of their career, and have improved the welcome and induction of new joiners to get them off to the best possible start with us.

Our suppliers

Our business model has a material reliance upon key suppliers for the delivery of agency staff, technology, facilities management and infection control/harm reduction products and services.

Appropriate risk-based relationships are maintained with these suppliers to ensure the business model and value-chain is secure to meet the needs of our beneficiaries.

Board committees

Audit, Risk & Quality Committee

The Audit, Risk & Quality Committee is a standing board committee with responsibility for overseeing the internal and external audit processes, testing the robustness of systems of controls, assessing the effectiveness of risk management and the system of internal controls as well as reviewing the company's overall financial performance. The Audit, Risk & Quality Committee receives reports from both internal and external auditors as well as executives and senior managers.

As at 31 March 2021, the members of the Audit Committee were as follows:

- Paul Picknett, Non-Executive Director (Chair)
- Alison Hill, Non-Executive Director
- Nicola Gilham, Non-Executive Director

The Chief Financial Officer is invited to Audit, Risk & Quality Committee meetings as a matter of course. Other executives and senior managers are invited to Audit, Risk & Quality Committee meetings as required. The Committee met five times between April 2020 and March 2021. All meetings were quorate. The Chief Financial Officer attended all Audit, Risk & Quality Committee meetings.

Nominations Committee

When required, the Nominations Committee is convened to make recommendations to the Board on recruitment, membership and succession planning. The Committee was convened twice during 2020–21. On the first occasion Goodman Harris was engaged to manage the initial market search and shortlisting of candidates for the Nomination Committee to interview. The board accepted the recommendation of the Nomination Committee and appointed Christian Van Stolk to the Board in December 2021.

The Nomination Committee was further convened this time with Saxton Bampfylde appointed to conduct the initial market search and shortlisting. Following recommendation by the Nomination Committee Dr. Victoria Tzortziou Brown was appointed to the Board on 11 May 2021.

Remuneration Committee

In January 2021 the Board took the decision to create a permanent Remuneration Committee to deal with executive and Non-Executive remuneration with different membership to manage conflicts of interest.

The Remuneration Committee was convened once between April 2020 – March 2021 and reviewed Non-Executive remuneration. Following a review by the independent Remuneration Committee, Non-Executive Directors of Turning Point remuneration levels have been increased to £7,500 per year for the Chair and £5,000 per year for the other Non-Executive Directors from 1 April 2021.

Review of objectives

The charitable objects of the Company are to promote or assist in promoting the protection of health of those at risk of mental disorder, alcohol, drug or other problems leading to dependency, and the treatment, care, rehabilitation, training and education of people suffering from mental disorder, alcohol, drug or other problems leading to dependency.

We meet our charitable objectives through the provision of services across England for people to improve their health and wellbeing whether that is at home, within the workplace or through specialist services. In doing so, we build upon well over 55 years of experience in substance misuse, mental health, learning disability, autism, acquired brain injury, sexual health, healthy lifestyles and employment services.

The Board of Trustees has given careful consideration and due regard to the Charity Commission's general guidance on public benefit in reviewing the activities of the Turning Point group. The trustees are satisfied that the objectives of the charity and the activities it undertakes remain entirely for the public benefit in accordance with Section 17 of the Charities Act 2011.

Environmental and energy reporting

Turning Point greenhouse gas emissions, reportable under SECR for the financial year were 1,930 tonnes CO2e.

These include the emissions associated with UK electricity and natural gas consumption, as well as business travel in company operated and private vehicles by team members. Turning Point's greenhouse gas emissions were 16% lower this financial year than in the 2019/20 reporting period. The intensity of 14.6 tonnes CO2e per £m revenue is 19% lower than the last financial year.

Greenhouse gas emissions

Emission source	2019/20	2020/21	% Share	% Change 2019/20 – 2020/21
Fuel combustion: Natural gas	1,185	1,118	58%	-6%
Purchased electricity	714	623	32%	-13%
Fuel combustion: Transport	393	189	10%	-52%
Total emissions (tCO2e)	**2,292**	**1,930**	**100%**	-16%
Annual Turnover (£m)	128	133		
Intensity: (tCO2e £m Turnover)	**17.9**	**14.6**		-19%

Figure 1: Greenhouse gas emissions by year (tonnes CO2e).

Emission source	2019/20	2020/21	% Share	% Change 2019/20 – 2020/21
Scope 1	1,189	1,155	60%	-3%
Scope 2	714	574	30%	-20%
Scope 3	389	201	10%	-48%
Total emissions (tCO2e)	**2,292**	**1,930**	**100%**	-16%

Figure 2: Greenhouse gas emissions by scope (tonnes CO2e).

Scope 1: Natural gas and company-operated transport. Scope 2: Electricity. Scope 3: Losses from electricity distribution and transmission, private vehicles used for business travel. This only includes emissions reportable under SECR and may not reflect the entire carbon footprint of the organisation.

Category	2019/20	2020/21	% Share	% Change 2019/20 – 2020/21
Fuel combustion: Natural gas	6,444,673	6,079,819	68%	-6%
Purchased electricity	2,794,384	2,460,779	27%	-12%
Fuel combustion: Transport	1,606,846	445,761	5%	-72%
Total	**10,845,903**	**8,986,358**	**100%**	**-17%**

Figure 3: Energy consumption by year (kWh).

Boundary, methodology and exclusions

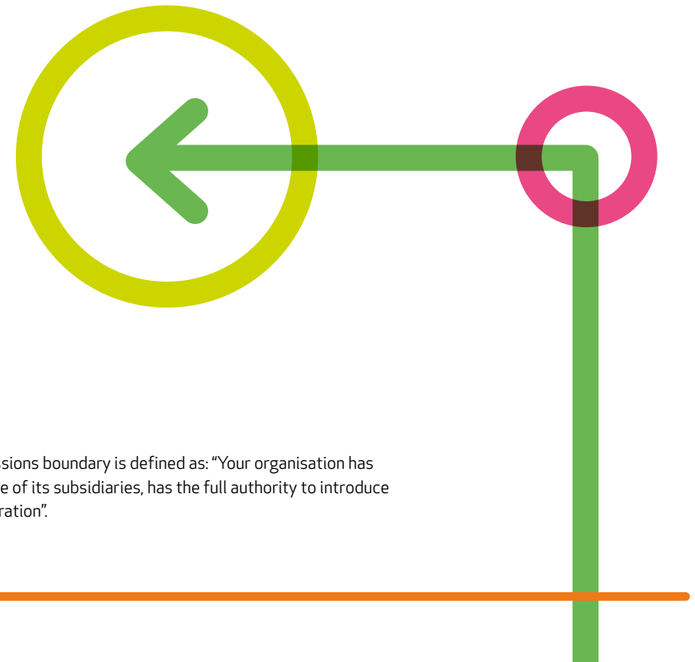
An 'operational control' approach has been used to define the Greenhouse Gas emissions boundary.[9] This approach captures emissions associated with the operation of buildings in the Turning Point Estate for example the residential properties, independent hospitals, office sites and storage facilities, plus company-owned, leased and employee-owned vehicles. This information was collected and reported in line with the methodology set out in the UK Government's Environmental Reporting Guidelines, 2019.

Emissions have been calculated using the latest conversion factors provided by the UK Government. The emissions from the transmission and distribution of electricity are voluntarily reported under Scope 3. There are no material omissions from the mandatory reporting scope. A percentage of emissions relating to gas and electricity has been estimated, due to invoicing end dates, this is allowed under the guidance of the Regulation.

The reporting period is April 2020 to March 2021, as per the financial accounts.

Energy efficiency initiatives

In the period covered by the SECR Report Turning Point has not undertaken any significant energy efficiency actions within the business. This is in part due to the capital spend limitations, generated by the uncertainty of the long-term impact of COVID-19, which has necessitated a pause in investment.



9 An operational control approach to GHG emissions boundary is defined as: "Your organisation has operational control over an operation if it, or one of its subsidiaries, has the full authority to introduce and implement its operating policies at the operation".

Achievements and performance

As set out in the strategic report, over the past year, despite the pandemic, we have continued to deliver our strategic priorities around our people, growth, quality, innovation, diversification and financial performance. We have kept the people we support and team members safe through strong infection control measures.

Supporting the health and wellbeing of our team members has been a key priority with positive results as indicated by our employee engagement survey. We have delivered organic growth, working closely with our commissioners to mobilise new services to relieve pressure on the acute sector, e.g. Coulgate Street and developing innovative new services to support the most vulnerable, e.g. HDAS. We have ensured the quality of service delivery has remained high as services have transformed in response to new government guidance. We have diversified our portfolio, introducing new service models such as the Central Access Point in Leicestershire, Turning Point Connect in Nottinghamshire and our new Commercial Venture livelife. Our financial performance has been strong during 2020/21 putting us in a good position moving into the next strategic period.

Value for money

Turning Point value for money means delivering the best possible health and social care outcomes for the service price. We deliver value by continually improving the efficiency and effectiveness of our people, processes and systems to drive ever better outcomes. This means we need to ensure there is money available to invest in our people and our technology infrastructure. We understand value for money along the lines of the National Audit Office definition which assesses value across three criteria:

- **Economy:** minimising the cost of resources used or required.
- **Efficiency:** the relationship between the outcomes delivered through our services and the resources needed to produce them.
- **Effectiveness:** the relationship between the intended and actual outcomes delivered through our services.

This approach is governed through our Quality Governance Framework and provides us with the means of achieving cost effectiveness, which we define as the optimal use of resources to achieve the intended health and social care outcomes.

As a provider of health and social care services, Turning Point benchmarks its Care Quality Commission (CQC) regulated services against other providers to ensure that service effectiveness compares favourably and serves as an indicator of the value we deliver through the quality of our services.

Turning Point Overall Ratings (April 2021) – 91% Good or Outstanding

Our overall rating for our CQC regulated services is 91% Good or Outstanding. We are regulated by the CQC for our Care Home services with and without nursing; Community-based services for people who misuse substances; Domiciliary Care services; Hospital services for people with mental health needs, learning disabilities and problems with substance misuse; Rehabilitation services; Residential substance misuse treatment and/or rehabilitation service and our Supported Living services.

Our Substance Misuse services are also benchmarked on the basis of successful completion outcomes for each Public Health England Partnership Area compared to other Partnership Areas that share the same client characteristics. This information forms part of the Public Health England official statistics and is therefore subject to reporting restrictions beyond internal use for management, quality assurance and briefing purposes.

Turning Point is first and foremost a national provider of health and Social Care services and therefore provides little social housing and where it does so, this is only in conjunction with, and for the purpose of health and social care provision. The value for money metrics required of a typical Registered Provider by the Regulator for Social Housing do not provide meaningful information for the annual report and are therefore not included.

Financial performance

In a year dominated by the uncertainties of the COVID-19 pandemic, Turning Point has performed well and maintained financial control in unprecedented circumstances. Turnover reached £132.8 million, generating an operating surplus of £4.4 million.

COVID-19 presented a series of challenges to Turning Point. The safety of team members and people we support has been paramount throughout the year and in order to achieve this, the organisation was able to access additional funding streams and financial support frameworks. Infection Control Funding, the Rapid Testing Fund and the Workforce Capacity Fund have all been successfully accessed and the funding has been used to support team members and the people we support. Extremely Clinically Vulnerable team members have been protected from frontline activity and placed on furlough, supported by the Government's Job Retention Scheme. The deferral of VAT payments facilitated improved cashflow and allowed us to cover costs associated with COVID-19, including vital Personal Protective Equipment (PPE) initially funded by ourselves until the NHS portal was opened and we could order directly from it.

The long-awaited resolution of the sleep-ins case at the Supreme Court (Royal Mencap Society v Tomlinson-Blake) provided confirmation that 'sleep-in time' should not be classified as 'working time', and therefore not be subject to National Minimum Wage hourly rates. Whilst this judgment has been a disappointment to many frontline workers, it has relieved the uncertainty and financial pressure of any potential backpay liabilities anticipated to have cost the sector £400 million. We remain committed to supporting better pay and conditions for social care frontline staff and constantly review our team members remuneration.

Although growth opportunities have been limited this year due to the pandemic, Turning Point has secured and implemented some new business opportunities. October 2020 saw the addition of the Hackney and the City of London service to our portfolio of services. We were also successful in winning the Herefordshire substance misuse contract, which launched in April 2021. The Mental Health portfolio has been buoyed by new activity including the launch of the Angel Lace Supported Accommodation service in Nottingham, alongside a Crisis Café and Personality Disorder service in the same area, and the Aldbanks contract in Bedfordshire. Several places on Learning Disabilities frameworks have been secured including the London Borough of Tower Hamlets, and a new Positive Behavioural Support contract in Kent opened its doors at the end of March.

The business to business brand Rightsteps has continued to develop its offering and customer base this year, winning 18 new contracts and significantly increasing its annual revenue. We are now seeing much higher levels of referrals coming through and expect further growth in 2021/22.

A new product, livelife, was launched on 1 March 2021 providing remote cognitive behavioural therapy (CBT) and counselling directly to individual customers for a range of common mental health problems. This innovative offering is also set to grow and develop in 2021/22.

Despite all the difficulties presented by the COVID-19 pandemic, the financial control and stewardship at Turning Point has resulted in a solid performance, built on the back of our key organisational value of building a strong and financially resilient Turning Point together.

Reserves

Reserves are that part of a charity's unrestricted income funds that are freely available to spend to further the charity's objects, and have been set aside for future use. Turning Point has no designated or restricted funds.

At 31 March 2021, we transferred a surplus of £3.1 million to reserves, giving us unrestricted reserves of £9.2 million (2020: £6.5 million). This strong performance was achieved through a determined focus on our business priorities for the year, and the ability to adapt our service and business delivery models quickly and innovatively to the changing circumstances of the COVID-19 pandemic. We successfully continued to offer support to people, in ways which best met their needs, whilst keeping them and our team members safe.

Our priorities are to build our reserves for 2020/21 through continuous improvement and driving efficiency. The priorities for the year included:

- Supporting the health and wellbeing of our people, with a particular focus on mental wellbeing.
- Reaching more people and driving efficacy of outcomes through a cohesive framework of people, clinical and operational governance.
- Focussing on customer relationship management and business development capability to retain our existing contracts.
- Promoting inclusion, involvement and innovation through active engagement with the people we support, our team members and our commissioners.
- Creating a sustainable Turning Point which includes building reserves and managing long term commitments through a clear focus on financial performance.

We are continuing to build on these priorities in 2021/22, with the aim of strengthening our financial position each year.

The board assesses the risks to the organisation annually, and sets the target level of unrestricted funds. In the short term, the Trustees have set the target for unrestricted reserves to cover the pension reserve, thereby bringing total reserves back to a positive position. Thereafter the target is one twelfth of income (8.33%), which is £11.1 million based on the income from operations in 2020/21.

At 31 March 2021, the Group's total reserves, which include the pension reserve, were -£5.7 million (2020: -£8.8 million). The pension reserve represents the discounted value of the Group's future contributions to the defined benefit pension scheme, which is provided for on the Group's balance sheet in compliance with FRS 102. This is an accounting adjustment and does not directly impact our operating cashflows.

The board has reviewed the budgets and cashflow forecasts for 2021/22 and 2022/23, which reflect all of the known opportunities and challenges, both internally and in the external environment. They consider the cash balance to be adequate for the purpose of meeting the working capital requirements for the foreseeable future and coping with the financial impacts of the risks faced by the organisation. The approach to reserves is approved with input from the Audit, Risk & Quality Committee.

This report was approved by the Board on 27 July 2021 and signed on its behalf.

Paul Picknett (Vice Chair)
Director

Independent Auditor's Report

to the Members of Turning Point

Opinion

We have audited the financial statements of Turning Point (the 'parent Charity') and its subsidiaries (the 'Group') for the year ended 31 March 2021, which comprise the Group and Charity Statements of comprehensive income and Statements of financial position, the Group Statement of cash flows, the Group Statement of changes in reserves and the related notes, including a summary of significant accounting policies. The financial reporting framework that has been applied in their preparation is applicable law and United Kingdom Accounting Standards, including Financial Reporting Standard 102 'The Financial Reporting Standard applicable in the UK and Republic of Ireland' (United Kingdom Generally Accepted Accounting Practice).

In our opinion the financial statements:

- give a true and fair view of the state of the Group's and of the charitable company's affairs as at 31 March 2021 and of the Group's incoming resources and application of resources, including its income and expenditure for the year then ended;
- have been properly prepared in accordance with United Kingdom Generally Accepted Accounting Practice; and
- have been prepared in accordance with the requirements of the Companies Act 2006, Housing and Regeneration Act 2008 and The Accounting Direction for Registered Providers of Social Housing from April 2019.

Basis for opinion

We conducted our audit in accordance with International Standards on Auditing (UK) (ISAs (UK)) and applicable law. Our responsibilities under those standards are further described in the Auditor's responsibilities for the audit of the financial statements section of our report. We are independent of the Group in accordance with the ethical requirements that are relevant to our audit of the financial statements in the United Kingdom, including the Financial Reporting Council's Ethical Standard, and we have fulfilled our other ethical responsibilities in accordance with these requirements. We believe that the audit evidence we have obtained is sufficient and appropriate to provide a basis for our opinion.

Conclusions relating to going concern

In auditing the financial statements, we have concluded that the Board's use of the going concern basis of accounting in the preparation of the financial statements is appropriate.

Based on the work we have performed, we have not identified any material uncertainties relating to events or conditions that, individually or collectively, may cast significant doubt on the Group's or Trust's ability to continue as a going concern for a period of at least 12 months from when the financial statements are authorised for issue.

Our responsibilities and the responsibilities of the Board with respect to going concern are described in the relevant sections of this report.

Other information

The trustees are responsible for the other information within the Annual Report. The other information comprises the information included in the Annual Report, other than the financial statements and our Auditor's Report thereon. Our opinion on the financial statements does not cover the other information and, except to the extent otherwise explicitly stated in our report, we do not express any form of assurance conclusion thereon.

In connection with our audit of the financial statements, our responsibility is to read the other information and, in doing so, consider whether the other information is materially inconsistent with the financial statements or our knowledge obtained in the audit or otherwise appears to be materially misstated. If we identify such material inconsistencies or apparent material misstatements, we are required to determine whether there is a material misstatement in the financial statements or a material misstatement of the other information. If, based on the work we have performed, we conclude that there is a material misstatement of this other information, we are required to report that fact.

We have nothing to report in this regard.

INDEPENDENT AUDITOR'S REPORT

Opinion on other matters prescribed by the Companies Act 2006

In our opinion, based on the work undertaken in the course of the audit:

- the information given in the Group strategic report and the Directors' report for the financial year for which the financial statements are prepared is consistent with the financial statements; and
- the Group strategic report and the Directors' report have been prepared in accordance with applicable legal requirements.

Matters on which we are required to report by exception

In the light of the knowledge and understanding of the Group and the parent Charity and its environment obtained in the course of the audit, we have not identified material misstatements in the Group strategic report or the Directors' report.

We have nothing to report in respect of the following matters in relation to which the Companies Act 2006 requires us to report to you if, in our opinion:

- adequate accounting records have not been kept by the parent Charity, or returns adequate for our audit have not been received from branches not visited by us; or
- the parent Charity financial statements are not in agreement with the accounting records and returns; or
- certain disclosures of trustees' remuneration specified by law are not made; or
- we have not received all the information and explanations we require for our audit.

Responsibilities of Directors

As explained more fully in the Directors' responsibilities statement on page 70, the trustees are responsible for the preparation of the financial statements and for being satisfied that they give a true and fair view, and for such internal control as the trustees determine is necessary to enable the preparation of financial statements that are free from material misstatement, whether due to fraud or error.

In preparing the financial statements, the trustees are responsible for assessing the Group's and the parent Charity's ability to continue as a going concern, disclosing, as applicable, matters related to going concern and using the going concern basis of accounting unless the trustees either intend to liquidate the Group or the parent Charity or to cease operations, or have no realistic alternative but to do so.

Auditor's responsibilities for the audit of the financial statements

Our objectives are to obtain reasonable assurance about whether the financial statements as a whole are free from material misstatement, whether due to fraud or error, and to issue an Auditor's Report that includes our opinion. Reasonable assurance is a high level of assurance but is not a guarantee that an audit conducted in accordance with ISAs (UK) will always detect a material misstatement when it exists. Misstatements can arise from fraud or error and are considered material if, individually or in the aggregate, they could reasonably be expected to influence the economic decisions of users taken on the basis of these financial statements.

A further description of our responsibilities for the audit of the financial statements is located on the Financial Reporting Council's website at: www.frc.org.uk/auditorsresponsibilities. This description forms part of our Auditor's Report.

Extent to which the audit was considered capable of detecting irregularities, including fraud

Irregularities, including fraud, are instances of non-compliance with laws and regulations. We identified and assessed the risks of material misstatement of the financial statements from irregularities, whether due to fraud or error, and discussed these between our audit team members. We then designed and performed audit procedures responsive to those risks, including obtaining audit evidence sufficient and appropriate to provide a basis for our opinion.

We obtained an understanding of the legal and regulatory frameworks within which the charitable company and group operates, focusing on those laws and regulations that have a direct effect on the determination of material amounts and disclosures in the financial statements. The laws and regulations we considered in this context were the Companies Act 2006, the Charities Act 2011, the Housing and Regeneration Act 2008 and The Accounting Direction for Registered Providers of Social Housing from April 2019 together with the Housing SORP. We assessed the required compliance with these laws and regulations as part of our audit procedures on the related financial statement items.

In addition, we considered provisions of other laws and regulations that do not have a direct effect on the financial statements but compliance with which might be fundamental to the charitable company's and the group's ability to operate or to avoid a material penalty. We also considered the opportunities and incentives that may exist within the charitable company and the group for fraud. The laws and regulations we considered in this context for the UK operations were Care Quality Commission (CQC) Regulations for service providers and managers, Employment and Health and Safety legislation, and requirements imposed by the Regulator of Social Housing. Auditing standards limit the required audit procedures to identify non-compliance with these laws and regulations to enquiry of the Trustees and other management and inspection of regulatory and legal correspondence, if any.

We identified the greatest risk of material impact on the financial statements from irregularities, including fraud, to be within the timing of recognition of contract income, recording the impact of the CQC regulatory review and the override of controls by management. Our audit procedures to respond to these risks included enquiries of management, review of internal audit reports, review of the fraud reports made to the Audit, Risk & Quality Committee, sample testing on the posting of journals, agreement of income to contracts, reviewing accounting estimates for biases, reviewing regulatory correspondence with the Charity Commission and CQC and reading minutes of meetings of those charged with governance.

Owing to the inherent limitations of an audit, there is an unavoidable risk that we may not have detected some material misstatements in the financial statements, even though we have properly planned and performed our audit in accordance with auditing standards. For example, the further removed non-compliance with laws and regulations (irregularities) is from the events and transactions reflected in the financial statements, the less likely the inherently limited procedures required by auditing standards would identify it. In addition, as with any audit, there remained a higher risk of non-detection of irregularities, as these may involve collusion, forgery, intentional omissions, misrepresentations, or the override of internal controls. We are not responsible for preventing non-compliance and cannot be expected to detect non-compliance with all laws and regulations.

Use of our report

This report is made solely to the Charity's members, as a body, in accordance with Chapter 3 of Part 16 of the Companies Act 2006 and Section 128 of the Housing and Regeneration Act 2008. Our audit work has been undertaken so that we might state to the Charity's members those matters we are required to state to them in an Auditor's Report and for no other purpose. To the fullest extent permitted by law, we do not accept or assume responsibility to anyone other than the Charity and the Charity's members, as a body, for our audit work, for this report, or for the opinions we have formed.

V Szulist
Senior Statutory Auditor

for and on behalf of
Crowe U.K. LLP

Statutory Auditor

3rd floor
The Lexicon
Mount Street
Manchester
M2 5NT

Date: 30 July 2021

Group statement of comprehensive income

For the year ended 31 March 2021

	Note	Total 2021 £000	Total 2020 £000
Turnover	4	**132,794**	128,177
Other operating charges	4	**(128,361)**	(125,876)
Operating surplus		**4,433**	2,301
Interest receivable and similar income	12	**18**	44
Impact of changing assumptions and discount rate on pension deficit reduction plan	23	**(648)**	(3,131)
Surplus/(Deficit) for the financial year		**3,803**	(786)
Actuarial (losses)/gains on defined benefit pension schemes	30	**(658)**	1,610
Other comprehensive income for the year		**(658)**	1,610
Total comprehensive surplus		**3,145**	824

All 2021 activities relate to continuing operations.

Charity statement of comprehensive income

For the year ended 31 March 2021

	Note	Total 2021 £000	Total 2020 £000
Turnover	5	**131,527**	126,284
Other operating charges	5	**(128,346)**	(125,917)
Operating surplus		**3,181**	367
Interest receivable and similar income	12	**18**	44
Impact of changing assumptions and discount rate on pension deficit reduction plan	23	**(648)**	(3,131)
Impact of termination of lease and impairment of investment in Turning Point Building Futures Limited		**-**	(53)
Surplus/(Deficit) for the financial year		**2,551**	(2,773)
Actuarial (losses)/gains on defined benefit pension schemes	30	**(658)**	1,610
Gift aid from subsidiaries	32	**1,927**	1,838
Other comprehensive income for the year		**1,269**	3,448
Total comprehensive surplus		**3,820**	675

All 2021 activities relate to continuing operations.

Gift aid from subsidiaries of £1,927k relates to Gift Aid arising on profits generated in the previous accounting period.

Consolidated statement of financial position

As at 31 March 2021

	Note	2021 £000	2020 £000
Fixed assets			
Housing properties	14	**4,145**	4,311
Other fixed assets	15	**306**	173
Investments	16	**1**	1
		4,452	4,485
Current assets			
Debtors	17	**20,024**	11,961
Cash and cash equivalents	18	**7,791**	8,606
		27,815	20,567
Creditors: amounts falling due within one year	19	**(19,315)**	(15,257)
Net current assets		**8,500**	5,310
Total assets less current liabilities		**12,952**	9,795
Creditors: amounts falling due after more than one year	21	**70**	77
		70	77
Provisions for liabilities			
Defined benefit pension liability	30	**2,017**	1,397
Pension provision	23	**14,846**	15,301
Reinstatement provision	23	**1,675**	1,821
		18,538	18,519
Reserves			
Unrestricted reserves		**9,180**	6,500
Pension reserve		**(14,846)**	(15,301)
Restricted reserves		**10**	-
		12,952	9,795

The financial statements were approved and authorised for issue by the Board and were signed on its behalf on 27 July 2021.

Paul Picknett (Vice Chair)
Director

Charity statement of financial position

As at 31 March 2021

	Note	2021 £000	2020 £000
Fixed assets			
Housing properties	14	**4,145**	4,311
Other fixed assets	15	**306**	173
Investments	16	**1**	1
		4,452	4,485
Current assets			
Debtors	17	**10,940**	6,125
Cash and cash equivalents	18	**7,767**	8,359
		18,707	14,484
Creditors: amounts falling due within one year	19	**(12,783)**	(12,425)
Net current assets		**5,924**	2,059
Total assets less current liabilities		**10,376**	6,544
Creditors: amounts falling due after more than one year	21	**70**	77
		70	77
Provisions for liabilities			
Defined benefit pension liability	30	**2,017**	1,397
Pension provision	23	**14,846**	15,301
Reinstatement provision	23	**1,675**	1,821
		18,538	18,519
Reserves			
Unrestricted reserves		**6,604**	3,249
Pension reserve		**(14,846)**	(15,301)
Restricted reserves		**10**	-
		10,376	6,544

The financial statements were approved and authorised for issue by the Board and were signed on its behalf on 27 July 2021.

Paul Picknett (Vice Chair)
Director

Consolidated statement of changes in reserves

For the year ended 31 March 2021

	Restricted reserves £000	Pension reserve £000	Unrestricted reserves £000	Total reserves £000
At 1 April 2020	-	(15,301)	6,500	(8,801)
Comprehensive income for the year				
Surplus for the year	10	-	3,793	3,803
Actuarial losses on pension schemes	-	-	(658)	(658)
Movement on pension deficit	-	455	-	455
Transfer to profit and loss account	-	-	(455)	(455)
At 31 March 2021	**10**	**(14,846)**	**9,180**	**(5,656)**

The notes on pages 90 to 115 form part of these financial statements.

Consolidated statement of changes in reserves

For the year ended 31 March 2020

	Pension reserve £000	Unrestricted reserves £000	Total reserves £000
At 1 April 2019	(13,185)	3,560	(9,625)
Comprehensive income for the year			
Deficit for the year	-	(786)	(786)
Actuarial gain on pension schemes	-	1,610	1,610
Movement on pension deficit	(2,116)	-	(2,116)
Transfer to profit and loss account	-	2,116	2,116
At 31 March 2020	**(15,301)**	**6,500**	**(8,801)**

The notes on pages 90 to 115 form part of these financial statements.

Consolidated statement of cash flows

For the year ended 31 March 2021

	2021 £000	2020 £000
Cash flows from operating activities		
Profit/(loss) for the financial year	**3,803**	(786)
Adjustments for:		
Depreciation of tangible assets	**589**	541
Profit on disposal of tangible assets	**24**	3
Amortisation of capital grants	**(7)**	(6)
Interest received	**(18)**	(44)
(Increase)/decrease in debtors	**(8,063)**	134
Increase in creditors	**4,058**	1,094
(Decrease)/increase in provisions	**(601)**	2,048
Defined benefit pension contributions	**(327)**	(159)
Pension interest and service costs	**289**	429
Net cash generated from operating activities	**(253)**	**3,254**
Cash flows from investing activities		
Improvement to housing properties	**(276)**	(195)
Purchase of tangible fixed assets	**(304)**	(154)
Interest received	**18**	44
Net cash from investing activities	**(562)**	(305)
Net increase in cash and cash equivalents	**(815)**	2,949
Cash and cash equivalents at the beginning of the year	**8,606**	5,657
Cash and cash equivalents at the end of the year	**7,791**	8,606
Cash and cash equivalents at the end of year comprise:		
Cash at bank and in hand	**7,791**	8,606
	7,791	8,606

The notes on pages 90 to 115 form part of these financial statements.

Analysis of net debt

For the year ended 31 March 2021

	At 1 April 2020 £000	Cash flows £000	At 31 March 2021 £000
Cash at bank and in hand	8,606	(815)	7,791
	8,606	(815)	7,791

The notes on pages 90 to 115 form part of these financial statements.

Notes to the financial statements

For the year ended 31 March 2021

Accounting policies

1. General information

Turning Point is a company limited by guarantee and is incorporated in England. The registered office is Standon House, 21 Mansell Street, London E1 8AA. The registered number is 793558.

2. Accounting policies

The principal accounting policies adopted, judgements and key sources of estimation in the preparation of the financial statements are as follows:

2.1 Accounting convention

Turning Point is registered under the Companies Act 2006 and is a registered housing provider.

The financial statements have been prepared in accordance with applicable Accounting Standards, including Financial Reporting Standard 102 (FRS 102), the Accounting Direction for Registered Providers of Social Housing from January 2019, and the Housing SORP 2018: Statement of Recommended Practice for Registered Social Housing Providers.

Turning Point meets the definition of a public benefit entity under FRS 102. Assets and liabilities are initially recognised at fair value or transaction value unless otherwise stated in the relevant accounting policy.

2.2 Going concern

At 31 March 2021, Turning Point had working capital of £8.5m (2020: £5.3m) and a cash balance of £7.8m (2020: £8.6m). Forecast cashflows show significant headroom against working capital requirements. Turning Point has taken active steps to mitigate the effects of the COVID-19 pandemic by securing additional funding from commissioners in line with support agreed by the Government, as well as joining the VAT Deferral Scheme. The deferral of VAT payments has provided a significant cashflow benefit through 2020/21 and will be repaid over 11 instalments commencing in March 2021. The operating surplus in 2020/21 of £4.4m has been retained in the business and has increased the core cash balance.

The business is taking forward the new ways of working that have driven cost efficiencies during the year, and is negotiating and managing contracts to ensure their profitability. We are continuing to develop innovative ways of supporting people, through engagement with the people we support and commissioners, and this will drive future growth and secure retention of our current contracts.

These activities underpin the budgets and cash forecasts for 2021/22 and 2022/23, which have been reviewed and challenged by the Board. In addition, the Board has considered the organisation's ability to respond to the longer-term impacts of the COVID-19 pandemic and changes in the economic environment and have reviewed the corporate strategy to ensure it will support the continuing financial viability of the business.

After due consideration, the Board has a reasonable expectation that the Group has adequate resources to continue its activities for the foreseeable future. Accordingly, the Trustees continue to adopt the going concern basis in preparing the financial statements as outlined in the Statement of Trustees Responsibilities.

2.3 Basis of consolidation

The financial statements consolidate the accounts of the Charity and its trading subsidiary, Turning Point (Services) Limited under the purchase method. They do not include the accounts of the Charity's non-trading subsidiary, Turning Point Building Futures Limited, which ceased trading in December 2018 and was dissolved in December 2020.

The Charity's jointly controlled entity, Northern Pathways Limited, incorporated under the Companies Act 2006, is accounted for under the equity method of accounting.

Investments in subsidiaries are accounted for at cost less impairment in the individual financial statements.

2.4 Turnover

Turnover represents contract and grant income from statutory sources (including rents net of voids), payments from residents and donations. Grant income is recognised when the related provisions for the grant have been met. Donations are recognised when the charity is legally entitled to the income and the amount can be quantified with reasonable certainty. All other income is accounted for on an accruals basis.

2.5 Value Added Tax (VAT)

Turning Point and Turning Point (Services) Limited are members of a VAT group and operate the standard method for partial exemption. Irrecoverable VAT is recognised as an expense when the tax point of the relevant expenditure is reached.

2.6 Taxation

A current corporation tax charge is recognised for the amount of corporation tax payable in respect of the taxable income for the current or past reporting periods using the tax rates and laws that have been enacted or substantively enacted by the reporting date.

Turning Point is a registered charity that is exempt from taxation on income and gains to the extent that they fall within the exemptions for charities in Part 11 Corporation Tax Act 2010 or s.256 of the Taxation of Chargeable Gains Act 1992.

The non-charitable subsidiaries typically claim relief against their taxable profits by making Gift Aid payments to Turning Point.

2.7 Capital grants

Capital grants (including social housing grants) are provided for in creditors and written off in the Statement of Comprehensive Income over the expected period of the useful life of the assets acquired.

2.8 Accrued income

Accrued income is classified as "Debtors" and includes contract and grant income (especially outcome related income) that will probably be received in a reporting period after that to which it relates.

2.9 Deferred income

Contract income and revenue grants are recognised as income in the period in which the performance criteria are met.

Deferred income is classified as "Creditors: amounts falling due within one year" and includes contract and grant income received in advance. These contracts and grants represent funds that have been received for specific purposes and are potentially refundable if the conditions of the contract or grant are not satisfied.

Contract and grant income received in the year but which remains unspent at the year-end is, with the agreement of the funder, carried forward in creditors at the year-end to be spent in the following year.

2.10 Fixed assets and depreciation

Depreciation is provided by the Charity to write off the cost net of grant less the estimated residual value of tangible fixed assets in equal instalments over their estimated useful economic lives as follows:

- Freehold properties and improvements to freehold properties are depreciated over 50 years.
- Improvements to leasehold properties are depreciated over the shorter of the term of the lease and the expected useful life of the asset.
- Fixtures and fittings, office equipment and motor vehicles over 3 years.
- Software – over 3 years.

In accordance with the Housing SORP 2018: Statement of Recommended Practice for Registered Social Housing Providers, the overall cost of any property, fixtures and fittings, and office equipment will be split between significant components to enable each component to be depreciated according to its economic useful life. The categories of components and the relevant depreciation rates are those listed above. A 'significant component' will have a:

- Cost greater than £10,000, and
- Cost greater than 10% of the whole asset, and
- Have a useful economic life of less than half that of the whole asset.

Accounting policies (continued)

Where a component is replaced or restored, the carrying amount of the old component will be disposed of and the new component will be capitalised.

The Charity adopts a policy to write off, in the year of acquisition, items costing less than £3,000.

2.11 Improvement to properties

Expenditure on existing housing properties is capitalised to the extent that it improves the economic benefit of the asset either through an increase in rental income, a reduction in maintenance costs or through an extension of the life of the property.

2.12 Operating leases

Rents payable and motor vehicles under operating leases are charged on a straight-line basis over the term of the lease.

Rental lease commitments are measured at the full cost of the lease payments to the date on which the Charity expects to leave each property.

2.13 Provision for liabilities

Provisions are recognised when the Group has a present obligation (legal or constructive) as a result of a past event, it is probable that the Group will be required to settle the obligation, and a reliable estimate can be made of the amount of the obligation. The amount recognised as a provision is the best estimate of the consideration required to settle the present obligation at the end of the reporting period, taking into account the risks and uncertainties surrounding the obligation.

2.14 Financial instruments

The Charity's financial instruments consist of debtors, cash and creditors and as such are all basic in nature as defined in FRS 102. They are measured at the cash consideration expected to be paid or received.

2.15 Pension costs

The Charity operated a defined benefit pension scheme, which is contracted out of the State Scheme and provides benefits based on final pensionable pay. The scheme is a multi employer pension scheme and it is not possible to identify the assets and liabilities of the scheme which are attributable to the Charity. In accordance with FRS 102 the scheme is accounted for as a defined contribution scheme. The assets of the scheme are held separately from those of the Charity. The funds are valued every three years by a professionally qualified independent actuary, the rates of contribution payable then being determined by Pension Trustees on advice of the actuary. The latest completed triennial actuarial valuation took place on 31 March 2019. The Charity has provided for the committed contributions payable, discounted appropriately, to fund the deficit of the scheme.

The defined benefit scheme closed at 31 March 2012 and on 1 April 2012, Turning Point started a defined contribution scheme.

The Charity also has a number of team members who are members of Local Government Pension Schemes which are defined benefit schemes. The defined benefit pension scheme current service costs are charged to the Statement of Comprehensive Income within staff costs. The expected return on the scheme assets less the scheme interest costs are credited within other interest. The scheme actuarial gains and losses are recognised immediately as other recognised gains and losses. The defined benefit scheme assets are measured at fair value at the year-end date. Scheme liabilities are measured on an actuarial basis at the year-end date using the projected unit method and discounted at a rate equivalent to the current rate of return on a high-quality corporate bond of equivalent term to the scheme liabilities. The resulting defined benefit asset or liability is presented separately after other net assets on the face of the Statement of Financial Position.

The Charity pays contributions to the NHS Pension Scheme in relation to team members who are members. This is a defined benefit public service scheme and the costs are charged to the Statement of Comprehensive Income in the period to which they relate.

2.16 Designated reserves

The Charity has no designated reserves at 31 March 2021.

2.17 Investments

The only investments held by the Group are in its subsidiaries and jointly controlled entity.

- **Subsidiary undertakings** – Investments in subsidiaries are valued at cost less provision for impairment.
- **Jointly controlled entity** – Investments in jointly controlled entities are stated at the charity's share of net assets/ liabilities. The charity's share of the profits or losses of the jointly controlled entity is included in the Statement of Comprehensive Income using the equity accounting basis.

3. Judgements in applying accounting policies and key sources of estimation uncertainty

The principal risks and uncertainties of the business are set out in the Strategic Report, together with the actions taken to mitigate these risks.

The Trustees have considered the residual risks and have received adequate assurance that they do not cast significant doubt on the business's ability to continue as a going concern.

In the application of the entity's accounting policies, which are described in note 2, the Trustees are required to make judgments, estimates and assumptions about the carrying value of assets and liabilities that are not readily apparent from other sources. The estimates and underlying assumptions are based on historical experience and other factors that are considered to be relevant. Actual results may differ from these estimates.

The estimates and underlying assumptions are reviewed on an on-going basis. Revisions to accounting estimates are recognised in the period in which the estimate is revised, if the revision affects only that period, or in the period of the revision and future periods, if the revision affects the current and future periods.

The key sources of estimation uncertainty that have a significant effect on the amounts recognised in the financial statements are described in the accounting policies and are summarised below:

- **Reinstatement provision** – Turning Point has provided for its potential reinstatement liability to cover expected building costs when it returns its leased properties to the landlord. This has been calculated by property, where a reinstatement requirement exists in the contract, and based on a valuation of works or estimated cost per square metre.
- **Pension provision** – Turning Point has an obligation to pay deficit funding contributions towards the defined benefit pension plan. This provision is dependent on a number of factors including discount rate, life expectancy and asset valuations. The assumptions reflect historical experience and current trends.
- **Defined benefit pension schemes** – Turning Point has obligations to pay pension benefits to certain team members who are members of Local Government Pension Schemes. The cost of these benefits and the present value of the obligation depend on a number of factors including life expectancy, salary increases and the discount rate on corporate bonds. Management review the actuaries' estimates of these factors which determine the net pension obligations in the Statement of Financial Position. The assumptions reflect historical experience and current trends.

4. Turnover and operating surplus – 2021 Group

	Turnover £000	Operating costs £000	Operating surplus £000
Income and expenditure from lettings			
Supported housing accommodation:			
Residential services	63,713	(58,169)	5,544
Non residential services	68,910	(58,172)	10,738
	132,623	(116,341)	16,282
Other income and expenditure	171	(12,020)	(11,849)
	132,794	(128,361)	4,433

Turnover and operating surplus – 2020 Group

	Turnover £000	Operating costs £000	Operating surplus £000
Income and expenditure from lettings			
Supported housing accommodation:			
Residential services	66,257	(55,142)	11,115
Non residential services	61,733	(58,961)	2,772
	127,990	(114,103)	13,887
Other income and expenditure	187	(11,773)	(11,586)
	128,177	(125,876)	2,301

5. Turnover and operating surplus – 2021 Charity

	Turnover £000	Operating costs £000	Operating surplus £000
Income and expenditure from lettings			
Supported housing accommodation:			
Residential services	83,026	(58,194)	24,832
Non residential services	48,328	(58,131)	(9,803)
	131,354	(116,325)	15,029
Other income and expenditure	173	(12,021)	(11,848)
	131,527	(128,346)	3,181

Turnover and operating surplus – 2020 Charity

	Turnover £000	Operating costs £000	Operating surplus £000
Income and expenditure from lettings			
Supported housing accommodation:			
Residential services	73,577	(55,197)	18,380
Non residential services	52,553	(58,948)	(6,395)
	126,130	(114,145)	11,985
Other income and expenditure	154	(11,772)	(11,618)
	126,284	(125,917)	367

The further analysis of income and expenditure from lettings in notes 6 and 7 reflects the disclosure required by the Accounting Direction for Registered Providers of Social Housing from April 2019.

6. Income and expenditure from lettings – Group

	Residential services 2021 £000	Non residential services 2021 £000	Total 2021 £000	Residential services 2020 £000	Non residential services 2020 £000	Total 2020 £000
Income from lettings						
Rent receivable	**1,030**	**-**	**1,030**	1,143	41	1,184
Service charge receivable	**1,505**	**(36)**	**1,469**	1,549	187	1,736
Net rents receivable	**2,535**	**(36)**	**2,499**	2,692	228	2,920
Revenue grants from local authorities and other agencies	**61,178**	**68,946**	**130,124**	63,565	61,505	125,070
Total income from lettings	**63,713**	**68,910**	**132,623**	66,257	61,733	127,990
Expenditure on letting activities						
Services	**45,495**	**45,168**	**90,663**	44,176	46,926	91,102
Management	**9,809**	**9,737**	**19,546**	8,124	8,712	16,836
Routine maintenance	**491**	**547**	**1,038**	639	530	1,169
Planned maintenance	**143**	**95**	**238**	104	104	208
Rent losses from bad debts	**116**	**17**	**133**	25	22	47
Property lease charges	**1,987**	**2,294**	**4,281**	1,862	2,515	4,377
Depreciation of housing properties	**128**	**314**	**442**	212	152	364
Total expenditure on lettings	**(58,169)**	**(58,172)**	**(116,341)**	(55,142)	(58,961)	(114,103)
Operating surplus on letting activities	**5,544**	**10,738**	**16,282**	11,115	2,772	13,887
Void losses			**2,097**			4,772

7. Income and expenditure from lettings – Charity

	Residential services 2021 £000	Non residential services 2021 £000	Total 2021 £000	Residential services 2020 £000	Non residential services 2020 £000	Total 2020 £000
Income from lettings						
Rent receivable	**1,030**	**-**	**1,030**	1,143	41	1,184
Service charge receivable	**1,575**	**(21)**	**1,554**	1,618	187	1,805
Net rents receivable	**2,605**	**(21)**	**2,584**	2,761	228	2,989
Revenue grants from local authorities and other agencies	**80,421**	**48,349**	**128,770**	70,816	52,325	123,141
Total income from lettings	**83,026**	**48,328**	**131,354**	73,577	52,553	126,130
Expenditure on letting activities						
Services	**45,516**	**45,134**	**90,650**	44,176	46,917	91,093
Management	**9,813**	**9,730**	**19,543**	8,178	8,710	16,888
Routine maintenance	**491**	**547**	**1,038**	639	530	1,169
Planned maintenance	**143**	**95**	**238**	105	103	208
Rent losses from bad debts	**116**	**17**	**133**	26	20	46
Property lease charges	**1,987**	**2,294**	**4,281**	1,862	2,515	4,377
Depreciation of housing properties	**128**	**314**	**442**	211	153	364
Total expenditure on lettings	**(58,194)**	**(58,131)**	**(116,325)**	(55,197)	(58,948)	(114,145)
Operating surplus/(deficit) on letting activities	**24,832**	**(9,803)**	**15,029**	18,380	(6,395)	11,985
Void losses			**2,097**			4,772

8. Operating surplus

The operating surplus is stated after charging:

	Group 2021 £000	Group 2020 £000	**Charity 2021 £000**	Charity 2020 £000
Other housing depreciation	**442**	375	**442**	375
Depreciation of other tangible owned fixed assets	**147**	166	**147**	166
Amortisation of capital grant on housing properties	**(15)**	(6)	**(15)**	(6)
Impairment of investments in subsidiary	**-**	**-**	**-**	53
Audit fees payable	**55**	54	**28**	27
Hire of plant and machinery – rentals payable under operating leases	**519**	397	**519**	397

9. Auditor's remuneration

	2021 £000	2020 £000
Fees payable to the Group's auditor	**71**	70
Fees payable to the Group's auditor and its associates in respect of:		
Audit of charity	**28**	27
Audit of subsidiaries	**27**	27
Tax compliance and advisory services	**4**	4
Accounts preparation fee	**12**	12
	71	70

10. Employees – Group and Charity

Staff costs were as follows:

	2021 £000	2020 £000
Salaries	**86,750**	83,271
National insurance	**7,099**	6,400
Pension contributions	**3,314**	3,449
	97,163	93,120

The average monthly number of employees, including the Chief Executive, during the year was as follows:

	2021 No.	2020 No.
Management and administration	**687**	549
Operational	**2,898**	2,966
	3,585	3,515

The key management personnel of the charity and the parent group comprise the Executive Directors, Operating Board Members, and Non-Executive Board Members. The headcount of key management personnel during the year was seven Executive Directors and Operating Board Members, and eight Non-Executive Directors (2020: 9 ED and 7 NED).

The total employee benefits of the key management personnel of the charity and parent group were £1,046k paid to Executive Directors and Operating Board Members and £27k paid to Non-Executive Board Members (2020: £1,315k, £24k).

During the year, 14 team members were paid a total of £20k as compensation for the termination of their employment before the normal retirement date. A total of £39k was paid to seven team members who accepted the offer of voluntary redundancy. The payments are fully recognised in the Statement of Comprehensive Income for 2020/21, being the period in which the plans were finalised.

The average number of full-time equivalent persons (including the Chief Executive) employed during the year:

	2021 No.	2020 No.
Management and administration	**531**	518
Operational	**2,462**	2,384
	2,993	2,902

The full-time equivalent number of team members whose remuneration payable in relation to the period of account fell within the following bands:

	2021 No.	2020 No.
Group and charity		
£60,001 – £70,000	13	15
£70,001 – £80,000	16	9
£80,001 – £90,000	8	9
£90,001 – £100,000	2	1
£100,001 – £110,000	3	4
£110,001 – £120,000	2	-
£120,001 – £130,000	1	2
£130,001 – £140,000	3	1
£140,001 – £150,000	-	1
£150,001 – £160,000	1	1
£160,001 – £170,000	-	-
£170,001 – £180,000	-	-
£180,001 – £190,000	1	1
£190,001 – £200,000	-	1
£200,001 – £210,000	-	1
£210,001 – £220,000	-	-
£220,001 – £230,000	1	-
	51	46

11. Directors' and trustees' emoluments

	2021 £000	2020 £000
Group and Charity		
Director emoluments (including pension contributions and benefits in kind)	443	616
Director pension contributions (included above)	20	24
The headcount of Directors during the year was 2 (2020: 3)		
Two Directors were paid pension contributions during the year (2020: 2)		
Non-executive trustee emoluments (including expenses)	**27**	27
£Nil (2020: £1k) of travel expenditure was reimbursed to 0 (2020: 3) trustees		
The emoluments of Directors disclosed above (excluding pension contributions and benefits in kind) include amounts paid to:		
The highest paid Director	227	210
Pension contributions of the highest paid Director	14	13

The company paid emoluments of £4k to two Directors of Turning Point (Services) Limited during the year (2020: £2k to one Director).

Details of the nature of the Chief Executive's pension arrangements:

The CEO is an 'ex defined benefit' member of the Group Personal Pension Plan with Standard Life, as are all other team members who were active members of the Turning Point Pension Scheme at 31 March 2012.

No enhanced or special terms apply.

The Group contributed 6% to the GPPP on behalf of the CEO, and did not contribute to any individual pension arrangements.

12. Interest receivable

	Group 2021 £000	Group 2020 £000	Charity 2021 £000	Charity 2020 £000
Other interest receivable	**18**	44	**18**	44
	18	44	**18**	44

13. Taxation

Turning Point is a registered charity. Under Part 11 Corporation Tax Act 2010 and s.256 of the Taxation of Chargeable Gains Act 1992, it is entitled to exemption from Corporation Tax on donations, certain investment income and gains, property income, and on profits from any trading activities exercised in the course of carrying out a primary purpose of the charity, so long as they are applied to Turning Point's charitable purposes.

Turning Point (Services) Limited intends to donate a sum equivalent to any taxable profits to Turning Point, to reduce the company's tax liability to nil.

Northern Pathways Limited and Turning Point Building Futures Limited have not traded in the year and are in the process of being wound up. They did not make a profit for tax purposes and do not have a Corporation Tax liability.

There were no factors that may affect future tax charges.

14. Housing properties

Group

	Housing properties £000
Cost	
At 1 April 2020	7,761
Additions	276
At 31 March 2021	8,037
Depreciation	
At 1 April 2020	3,450
Charge for the year	442
At 31 March 2021	3,892
Net book value	
At 31 March 2021	4,145
At 31 March 2020	4,311

The aggregate amount of finance costs included in the cost of housing properties is £nil (2020: £nil). The aggregate market value of the properties is, in the opinion of the Trustees, in excess of net book value.

	2021 £000	2020 £000
Housing properties cost comprise:		
Freeholds	**2,554**	2,554
Short leaseholds (less than 50 years)	**4,617**	4,341
Long leaseholds (more than 50 years)	**848**	848
	8,019	7,743
Expenditure on works to existing properties:		
Capitalised in the year	276	195
Charged to income and expenditure	448	375
	724	570

Charity

	Housing properties £000
Cost	
At 1 April 2020	7,761
Additions	276
At 31 March 2021	8,037
Depreciation	
At 1 April 2020	3,450
Charge for the year	442
At 31 March 2021	3,892
Net book value	
At 31 March 2021	4,145
At 31 March 2020	4,311

15. Tangible fixed assets

Group

	Motor vehicles £000	Fixtures and fittings £000	Office equipment £000	Software £000	Total £000
Cost					
At 1 April 2020	22	691	660	814	2,187
Additions	-	58	90	156	304
Disposals	-	-	(15)	(11)	(26)
At 31 March 2021	22	749	735	959	2,465
Depreciation					
At 1 April 2020	8	656	539	811	2,014
Charge for the year on owned assets	5	35	89	18	147
Disposals	-	-	(1)	(1)	(2)
At 31 March 2021	13	691	627	828	2,159
Net book value					
At 31 March 2021	9	58	108	131	306
At 31 March 2020	14	35	121	3	173

In accordance with the Housing SORP 2018, the overall cost of any property, fixtures and fittings, and office equipment has been split between significant components to enable each component to be depreciated according to its economic useful life.

Charity

	Motor vehicles £000	Fixtures and fittings £000	Office equipment £000	Software £000	Total £000
Cost					
At 1 April 2020	22	691	660	814	2,187
Additions	-	58	90	156	304
Disposals	-	-	(15)	(11)	(26)
At 31 March 2021	22	749	735	959	2,465
Depreciation					
At 1 April 2020	8	656	539	811	2,014
Charge for the year on owned assets	5	35	89	18	147
Disposals	-	-	(1)	(1)	(2)
At 31 March 2021	13	691	627	828	2,159
Net book value					
At 31 March 2021	9	58	108	131	306
At 31 March 2020	14	35	121	3	173

16. Fixed asset investments

Group

	Investments in joint venture £000
Cost or valuation	
At 1 April 2020	1
At 31 March 2021	1
Net book value	
At 31 March 2021	1
At 31 March 2020	1

Turning Point, Charity and Group, own 50% of the 1,000 £1 ordinary shares in Northern Pathways Ltd amounting to £500 (2020: £500). Northern Pathways Ltd is a jointly controlled company incorporated in Great Britain, it ceased trading in 2018/19 and will be wound up in the coming months. It has total assets less current liabilities at 31 March 2021 of negative £149k (2020: negative £132k). Its trading loss for the year was £16k (2020: loss £38k).

Charity

	Investments in subsidiary companies £000
Cost or valuation	
At 1 April 2020	2,501
At 31 March 2021	2,501
Impairment	
At 1 April 2020	2,500
At 31 March 2021	2,500
Net book value	
At 31 March 2021	1
At 31 March 2020	1

Turning Point the Charity owns 100% of the 100 £1 ordinary shares in Turning Point (Services) Ltd amounting to £100 (2020: £100). Turning Point (Services) Ltd is a company incorporated in Great Britain that provides support services to the Charity. It has total assets less current liabilities at 31 March 2021 of £2,575k (2020: £3,249k). Its trading profit for the year after Gift Aid was £1,253k (2020: £147k).

17. Debtors

	Group 2021 £000	Group 2020 £000	**Charity 2021 £000**	Charity 2020 £000
Rental debtors	**129**	114	**129**	114
Less: provision for bad debts		-		(50)
Net rental debtors	**129**	64	**129**	64
Due from statutory sources	**14,851**	6,617	**2,690**	2,699
Less: provision for bad debts	**-**	(50)	**-**	(50)
Net statutory debtors	**14,621**	6,436	**2,507**	2,558
Prepayments and accrued income	**5,051**	5,237	**3,454**	3,279
Other debtors	**223**	180	**223**	180
Amounts owed by group companies and joint ventures	**-**	44	**4,627**	44
	20,024	11,961	**10,940**	6,125

18. Cash and cash equivalents

	Group 2021 £000	Group 2020 £000	**Charity 2021 £000**	Charity 2020 £000
Cash at bank and in hand	7,791	8,606	7,767	8,359
	7,791	8,606	7,767	8,359

In October 2019, the Charity entered into a debenture with Turning Point (Services) Limited and Barclays Bank, which includes a cross guarantee and indemnity. If either Turning Point or Turning Point (Services) Limited defaults under any agreement entered into with Barclays Bank, then Barclays Bank may seek to recover any debts due to it from the other party. This debenture replaces the CAS Cross-guarantee dated March 2008 and the debenture dated December 2008.

Turning Point and Turning Point (Services) Limited have entered into this agreement to best facilitate when Turning Point (Services) Limited bids for contracts and they are delivered by Turning Point.

Turning Point hold a small number of bank accounts on behalf of clients who lack the required documents to open an account in their own name. Turning Point does not have control over the bank accounts. As a result, no amounts are recognised in the financial statements. The total held in such bank accounts as at 31 March 2021 was £88k (2020: £80k).

19. Creditors: Amounts falling due within one year

	Group 2021 £000	Group 2020 £000	**Charity 2021 £000**	Charity 2020 £000
Trade creditors	**2,156**	3,136	**2,156**	3,136
Amounts owed to group companies	**-**	-	**-**	2,498
Other taxation and social security costs	**10,271**	5,264	**4,546**	588
Other creditors	**170**	173	**170**	173
Accruals and deferred income	**6,718**	6,684	**5,911**	6,030
	19,315	15,257	**12,783**	12,425

Barclays have a legal charge over 6 Penywern Road as security for Turning Point's overdraft facility.

20. Deferred income

	At 1 April 2020 £000	Deferred £000	Released £000	At 31 March 2021 £000
Group	1,266	2,159	(1,266)	2,159
Charity	612	1,351	(612)	1,351

Contract income and revenue grants are recognised as income in the period in which the performance criteria are met. Where funds are received for specific purposes and are potentially refundable if the conditions of the contract or grant are not satisfied, they will be deferred, with agreement of the funder, until the performance criteria are met.

21. Creditors: Amounts falling due after more than one year

	Group 2021 £000	Group 2020 £000	**Charity 2021 £000**	Charity 2020 £000
Social housing and other grants	**70**	77	**70**	77
	70	77	**70**	77

22. Financial Instruments

	Group 2021 £000	Group 2020 £000
Financial assets		
Financial assets that are debt instruments measured at amortised cost	24,782	17,545
	24,782	17,545
Financial liabilities		
Other financial liabilities measured at fair value through profit or loss	16,521	17,122
Financial liabilities measured at amortised cost	6,885	8,727
	23,406	25,849

Financial assets that are debt instruments measured at amortised cost comprise trade debtors, other debtors and accrued income.

Financial liabilities measured at fair value through profit and loss comprise the pension deficit reduction provision and reinstatement provision.

Financial liabilities measured at amortised cost comprise bank loans, trade creditors, other creditors and accruals.

23. Provisions

	Pension provision £000	Reinstatement provision £000	Total £000
Group and Charity			
At 1 April 2020	15,301	1,821	17,122
Additions	648	-	648
Releases	(1,103)	(146)	(1,249)
At 31 March 2021	14,846	1,675	16,521

The pension provision represents the discounted value of the agreed future contributions to be paid to the Turning Point defined benefit pension scheme by Turning Point. Turning Point agreed to pay contributions of £1,040k for the period 1 April 2020 to 30 June 2020, £1,124k, for the period 1 July 2020 to 31 March 2021, and £1,140k from 1 April 2021 with contributions then increasing in line with RPI each year.

The reinstatement provision of £1,675k (2020: £1,821k) represents the amount set aside, based on individual property contracts, to cover expected building costs when Turning Point returns its leased properties to the landlord.

24. Restricted reserves

	2021 £000	2020 £000
Balance as at 1 April 2020	**-**	-
Restricted Income	**10**	-
Balance as at 31 March 2021	**10**	-

Restricted reserves relate to income received to support adult social care providers to reduce the transmission of COVID-19 within and between care settings.

25. Legislative provisions

The Charity and its subsidiaries are incorporated under the Companies Act 2006.

26. Contingent assets

Group

The Group has £9k in contingent assets at 31 March 2021. This represents income considered possible at that date.

The Group had £46k in contingent assets at 31 March 2020. This represented income considered possible at that date, £23k was received in the year ended 31 March 2021.

Charity

The Charity has £9k in contingent assets at 31 March 2021. This represents income considered possible at that date.

The Charity had £22k in contingent assets at 31 March 2020. This represented income considered possible at that date. £9k was received in the year ended 31 March 2021.

27. Statement of capital grant movements

	2021 £000	2020 £000
Balance as at 1 April 2020	**85**	91
Amortised in year	**(15)**	(6)
Balance as at 31 March 2021	**70**	85

28. Bedspaces

	Care Homes No.	Supported Living No.	Total No.
At 31 March 2020	448	754	1,202
Additions	10	175	185
Disposals	(74)	(341)	(415)
At 31 March 2021	384	588	972

29. Capital commitments

At 31 March 2021 the group had capital commitments of £nil (2020: £nil).

30. Pension commitments

Turning Point Pension Scheme

The total net pension cost for the group for the year was £2,365k for the defined contribution pension scheme (2020: £2,130k) and £1,103k for the defined benefit pension scheme (2020: £1,015k). Turning Point participated in the Turning Point Pension Scheme ("The Scheme") which is a defined benefit pension scheme. This is a multi employer scheme covering Turning Point and Turning Point Scotland team members (and former team members). Turning Point Scotland left the Group and became a separate entity in 1999.

The Turning Point Pension Scheme is a defined benefit plan but is being accounted for as a defined contribution plan because the Scheme is a multi employer non segregated arrangement. This means that the assets and liabilities of the Scheme are not separately identified for the two participating employers.

The latest completed triennial actuarial valuation took place on 31 March 2019. The results showed assets of £100m, liabilities of £135m, and a deficit of £35m on a technical provisions basis. In order to remove the deficit over a 14 year period, Turning Point has agreed to pay contributions of £1,040k per annum (pro rata) for the period from 1 April 2020 to 30 June 2020 and £1,124k from 1 July 2020 to 31 March 2021, with contributions then increasing in line with RPI each year until 31 March 2033.

Turning Point Scotland has agreed to pay contributions of £338k per annum for the year from 1 April 2019 to 31 March 2020, with contributions then increasing in line with RPI each year until 31 March 2033.

Contribution levels are subject to review at subsequent actuarial valuations.

The Scheme assets comprise 47% equities, 8% government and corporate bonds, 11% diversified growth funds, 30% Liability Driven Investment (LDI), 3% property and 1% cash as at 31 March 2021.

We understand that the Scheme is set up on a "last man standing basis" whereby if one employer becomes insolvent, the other employer will be responsible for all the Scheme's liabilities.

The pension liability shown on the balance sheet is measured as the discounted present value of the contributions payable by Turning Point to eliminate its share of the Scheme's deficit. The deficit contributions are agreed with the Scheme's Trustees as part of the three yearly actuarial valuation of the Scheme. The rate used to discount the future contributions is made by reference to market yields at the reporting date on high quality corporate bonds whose term is consistent with the estimated period of the future contributions. The unwinding of the discount rate is recognised as a finance cost in profit or loss in the period in which it arises.

NHS Pension Scheme

Turning Point has team members who are covered by the provisions of the NHS Pension Scheme(s). Details of the benefits payable and rules of the scheme can be found on the NHS Pensions website at www.nhsbsa.nhs.uk/pensions. The scheme is an unfunded defined benefit scheme that covers NHS employers, GP practices and other bodies, allowed under the direction of the Secretary of State for England and Wales. They are not designed to be run in a way that would enable NHS bodies to identify their share of the underlying scheme assets and liabilities.

Therefore, each scheme is accounted for as if it were a defined contribution scheme. The cost to Turning Point of participating in each scheme is taken as equal to the contributions payable to that scheme for the accounting period. The contributions payable to the scheme by Turning Point for the year to 31 March 2021 were £717k.

In order that the defined benefit obligations recognised in the financial statements do not differ materially from those that would be determined at the reporting date by a formal actuarial valuation, the Government Financial Reporting Manual (FReM) requires that "the period between formal valuations shall be four years, with approximate assessments in intervening years". An outline of these follows:

a) A valuation of scheme liability is carried out annually by the scheme actuary (currently the Government Actuary's Department) as at the end of the reporting period. This utilises an actuarial assessment for the previous accounting period in conjunction with updated membership and financial data for the current reporting period, and accepted as providing suitably robust figures for financial reporting purposes.

   The valuation of scheme liability as at 31 March 2021, is based on valuation data as at 31 March 2019, updated to 31 March 2021 with summary global member and accounting data. In undertaking this actuarial assessment, the methodology prescribed in IAS 19, relevant FReM interpretations and the discount rate prescribed by HM Treasury have also been used.

   The latest assessment of the liabilities of the scheme is contained in the scheme actuary report, which forms part of the annual NHS Scheme (England and Wales) Pension Accounts. These accounts can be viewed on the NHS Pensions website and are published annually.

b) The last published actuarial valuation undertaken for the NHS Pension Scheme was completed for the year 31 March 2019. The Scheme Regulations allow for the level of contribution rates to be changed by the Secretary of State for Health, with the consent of HM Treasury, and consideration of the advice of the Scheme Actuary and appropriate employee and employer representatives as deemed appropriate.

Local Government Pension Schemes

Turning Point employs members of 3 Local Government Pension Schemes (LGPS) due to the takeover of services. These LGPS are funded defined benefit schemes, with assets held in separate trustee administered funds.

The total defined benefit pension cost recognised in the Statement of Comprehensive Income is £399k and the projected cost for the year to 31 March 2022 is £412k

Turning Point has bonds totalling £381k provided to commissioners in respect of some of the LGPS. The provision for the defined benefit pension liability at 31 March 2021 includes an allowance for full GMP indexation. The actuaries have not made any allowance in the calculations for the second ruling on GMP equalisation on the basis that any figure is unlikely to be significant.

The reconciliation of the net pension scheme liability below relates to the Local Government Pension Schemes.

Reconciliation of present value of LGPS plan liabilities and assets

	2021 £000	2020 £000
Reconciliation of present value of plan liabilities:		
At the beginning of the year	**7,059**	8,086
Actuarial adjustment – release of closing provision	**-**	(420)
Current service cost	**258**	357
Interest cost	**165**	196
Actuarial losses/(gains)	**1,844**	(1,164)
Contributions	**4**	(1)
Past service cost	**-**	5
At the end of the year	**9,330**	7,059
Reconciliation of present value of plan assets:		
At the beginning of the year	**5,662**	5,349
Actuarial adjustment – release of closing provision	**-**	(284)
Interest income	**134**	129
Actuarial gains	**1,186**	310
Contributions	**4**	(1)
Employer contributions	**327**	159
At the end of the year	**7,313**	5,662

	2021 £000	2020 £000
Fair value of plan assets	**7,313**	5,662
Present value of plan liabilities	**(9,330)**	(7,059)
Net pension scheme liability	**(2,017)**	(1,397)

The amounts recognised in the statement of comprehensive income are as follows:

	2021 £000	2020 £000
Current service cost	**258**	362
Interest cost	**31**	67
Total	**289**	429

Principal actuarial assumptions at the statement of financial position date (expressed as weighted averages):

	2021 %	2020 %
Discount rate	**2.10 – 2.15**	2.3
Future salary increases	**2.00 – 3.95**	2.3 – 3.2
Future pension increases (CPI)	**2.6 – 2.7**	1.8 – 1.9
Mortality rates		
For a male aged 65 now	**21.7 – 21.9**	21.5 – 21.8
At 65 for a male aged 45 now	**22.6**	22.2 – 22.5
For a female aged 65 now	**24.2 – 24.7**	23.8 – 24.6
At 65 for a female aged 45 now	**25.8 – 25.9**	25.2 – 25.7
Major categories of plan assets as a percentage of total plan assets		
Equities	**62**	77
Property	**8**	7
Bonds	**25**	13
Cash	**5**	3

31. Leasing commitments

Future minimum lease payments under non cancellable operating leases are as follows:

	2021 £000	2020 £000
Group and Charity		
Land and buildings		
Within one year	**1,599**	2,187
Within two to five years	**1,057**	2,132
After five years	**39**	175
	2,695	4,494
Other		
Within one year	**857**	606
Within two to five years	**1,076**	591
After five years	**5**	-
	1,938	1,197

32. Related party transactions

Group and Charity

Turning Point, Turning Point (Services) Ltd and Northern Pathways Ltd are all entities incorporated in the United Kingdom. Turning Point is the only entity registered with the Housing Regulator and is the parent company of Turning Point (Services) Ltd, a wholly owned subsidiary. Turning Point is required to prepare consolidated financial statements that consolidate the accounts of the Charity and Turning Point (Services) Limited. Northern Pathways Ltd is a jointly controlled entity, controlled equally by Turning Point and The Retreat York. It is accounted for in the Charity and consolidated accounts under the equity method of accounting. Turning Point Building Futures was a wholly owned subsidiary of Turning Point until it was dissolved on 1 December 2020.

During the year, Turning Point (Services) Ltd made an operating profit of £1,253k (2020: £1,932k). £1,242k (2020: £1,919k) will be Gift Aided to Turning Point. As at 31 March 2021, Turning Point (Services) Ltd owed Turning Point £4,627k (2020: Turning Point owed Turning Point (Services) Ltd £2,496k).

Turning Point incurs all of the costs associated with providing healthcare and social care services to commissioners, including the employment of team members and contracting with suppliers. Turning Point charges Turning Point (Services) Ltd a percentage of the total income due to Turning Point (Services) Ltd each month, which reflects the risk that costs might exceed income in the future. The total recharged in the year was £99,302k (2020: £92,680k).

During the year, Turning Point Building Futures Ltd made an operating profit of £nil (2020: £nil). £nil (2020: £53k) was Gift Aided to Turning Point in the year. As at the 31 March 2021, Turning Point owed Turning Point Building Futures Ltd £nil (2020: £nil).

Northern Pathways Ltd is a jointly controlled entity between Turning Point 50% and The Retreat York 50%. During the year, Northern Pathways Ltd made an operating loss of £16k (2020: £38k).

As at 31 March 2020, Northern Pathways Ltd owed Turning Point £105k (2020: £105k) in relation to the management fee for providing the central function support and supplier invoices paid on their behalf. The charges for central function support and recharges of supplier invoices totalled £nil (2020: £37k).

NHS contracts are not deemed to be a related party transaction for 2020/21.

A decision has been taken by the respective Director boards to wind up Northern Pathways Limited.

33. Subsidiary undertakings

The following were subsidiary undertakings of the Charity:

Name	Class of shares	Holding	Principal activity	Registered office
Turning Point (Services) Limited	Ordinary	100%	The provision of health and social care services primarily to people with drug or alcohol issues, mental health issues or a learning disability.	Standon House, 21 Mansell Street, London E1 8AA

The aggregate of the share capital and reserves as at 31 March 2021 and of the profit or loss for the year ended on that date for the subsidiary undertakings were as follows:

	Aggregate of share capital and reserves £000	Profit/(loss) £000
Turning Point (Services) Limited	2,575	1,253
	2,575	1,253

Company information

Directors

- Peter Hay (Chair)
- Paul Picknett
- Nicola Gilham
- Alison Hill
- Helen Spice
  (resigned 30 June 2020)
- Julie Bass
- Amarjit Dhillon
  (appointed 1 April 2020)
- Christian Van Stolk
  (appointed on11 December 2020)
- Christopher Parker
  (resigned 19 January 2021)

Registered number

00793558

Registered Office

Standon House
21 Mansell Street
London
E1 8AA

Independent auditor

Crowe U.K. LLP
3rd floor
The Lexicon
Mount Street
Manchester
M2 5NT

Bankers

Barclays Bank PLC
Level 11
20 Chapel Street
Liverpool
L3 9AG

Solicitors

Eversheds Sutherland
Eversheds House
70 Great Bridgewater Street
Manchester
M1 5ES

Contact us

Head Office
Standon House
21 Mansell Street
London
E1 8AA

T: 020 7481 7600
E: info@turning-point.co.uk

www.turning-point.co.uk

TURNING POINT
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