

**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.

Contents

Our year in numbers	Page 4
Our vision and values	Page 5

Chair and Chief Executive statement's	Page 6
--	--------

1

The ever-changing health and social care landscape
Page 8

2

Our strategic intent
Page 12

3

Our stakeholders
Page 14

4

The Turning Point team
Page 18

5

Responding to the pandemic for a stronger future
Page 24

6

Moving forward: innovation and research
Page 32

7

Clinical expertise and oversight
Page 38

8

Health and wellbeing
Page 42

9

Our Social Value
Page 48

10

Involvement and engagement
Page 52

11

Risk management
Page 56

Trustee's Report	Page 58
-------------------------	---------

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**



People supported in 2021/22

164,787

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

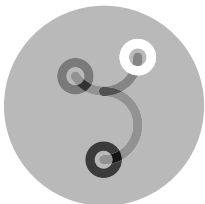
To constantly find ways to support more people to discover new possibilities in their lives.

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.

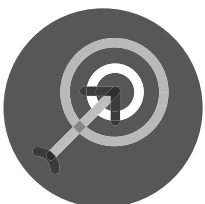
Our values



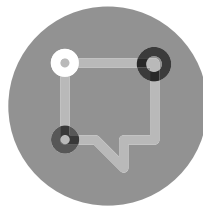
We treat each other and those we support as **individuals** however difficult and challenging.



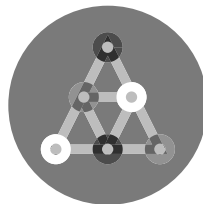
We are here to **embrace change** even when it is complex and uncomfortable.



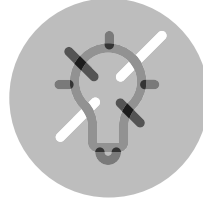
We believe that everyone has the **potential** to grow, learn and make choices.



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

A stylized black ink signature of Peter Hay, consisting of a large 'P' and 'H' followed by a long horizontal stroke.

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

A stylized handwritten signature in black ink, appearing to read 'Julie Bass'.

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>

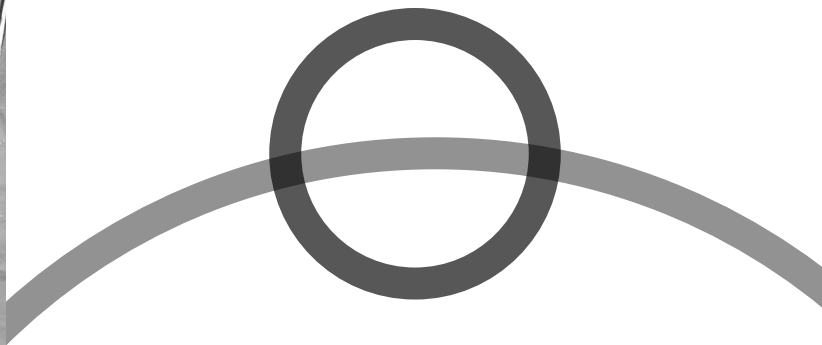


The NHS Long Term Plan remains relevant, informing subsequent white papers and frameworks for substance misuse, mental health, learning disability and autism services.⁷

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?msclid=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



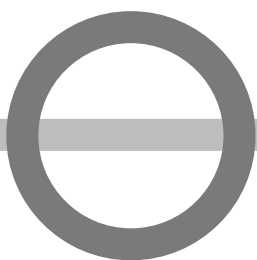
3 Our stakeholders

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

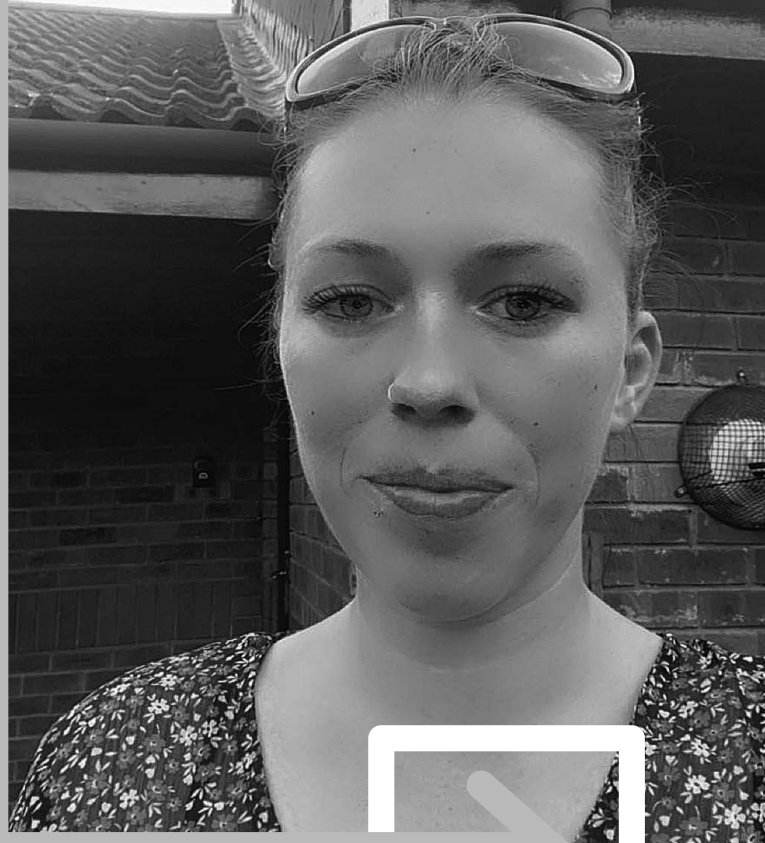
attracted more visitors to our new look careers website as well as using some of the more traditional methods to reach more people such as leaflet drops and job fairs. We have also invested in developing around 100 managers across Turning Point and improved recruitment and selection techniques, supporting 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 LGBTQ+ 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."

"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.

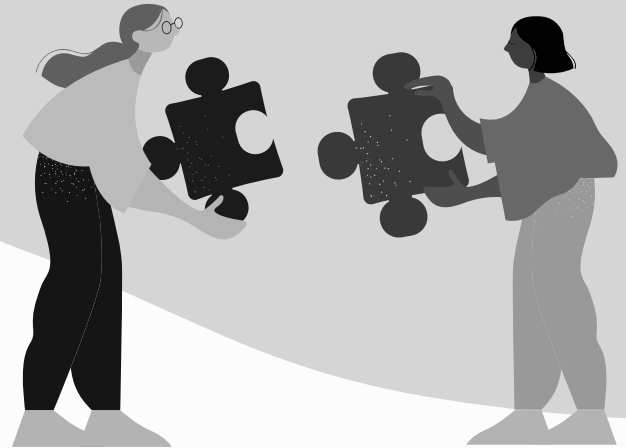
Securing new services

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.

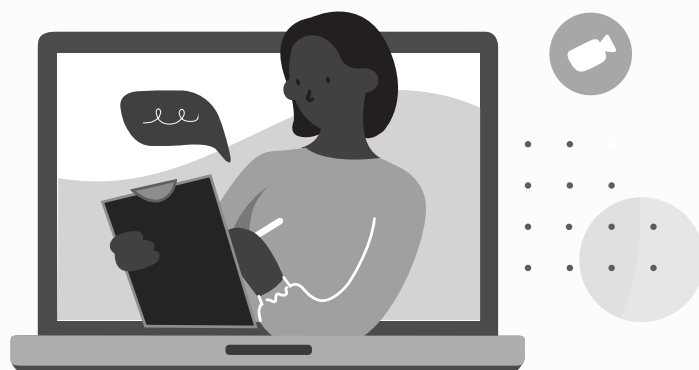
We have launched our first customer newsletter, run several innovative therapist-led TikTok campaigns, worked with influencers, grown our follower count on Instagram and developed our profiles on Hub of Hope and in the Social Enterprise UK directory. We have also used our blog to reach new clients and 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.



Welcome to Turning Point

We believe that everyone has the potential to grow, learn and make choices.

We are inspired by possibility.



Urgent Help



Find Support



Contact Us



For Professionals



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.



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.

➤ **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.

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.

²⁴ <https://britishlivertrust.org.uk/about-us/media-centre/statistics/>

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.

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 brought 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.

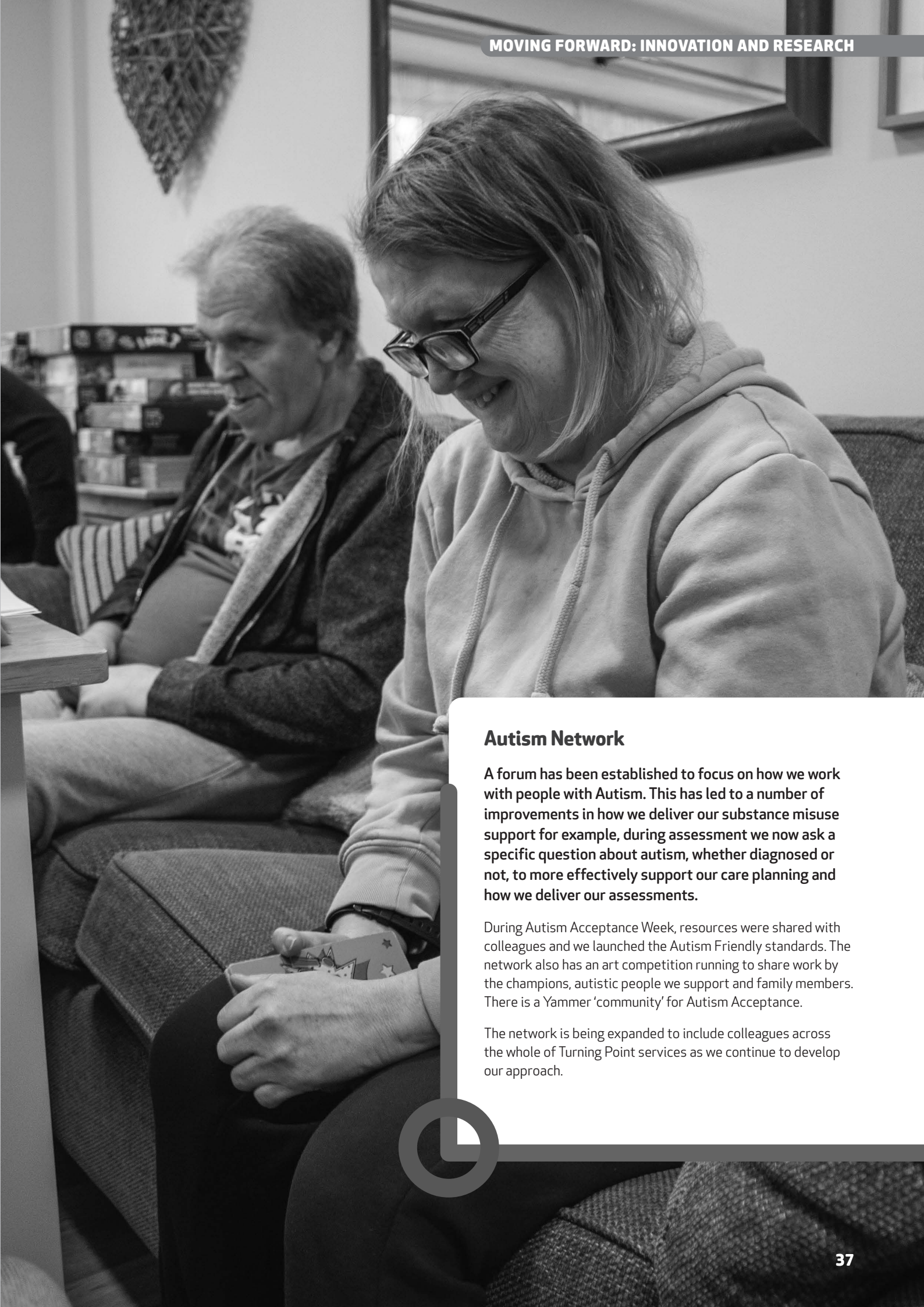
There are also plans to purchase a Mobile Outreach Vehicle to enhance the offer of harm reduction advice, needle exchange, naloxone, and other outreach support to more people across the county, with a focus on providing an 'out there, everywhere' offer for people in more remote areas or with limited 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.



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.

- 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.

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.

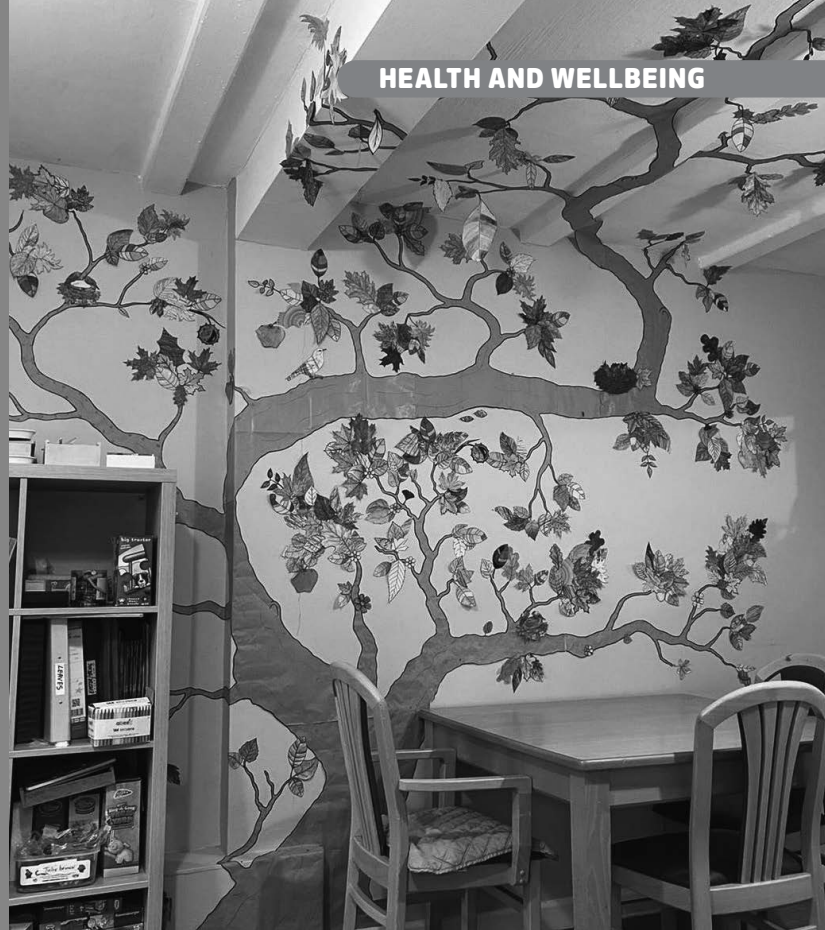
All the residents at Brickfield Cottage have relied upon each other and colleagues to pass the time and keep themselves busy. Like many people stuck indoors, crafts and activities have helped them manage the time they would have spent outdoors, meeting loved ones, or visiting places they enjoy.

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 months of their recovery, using this to assist in reducing lapses and relapses, by mutual assistance and recovery groups with like-minded peers. Turning Point supports 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.

GARY

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



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.

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.

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

A stylized, handwritten signature in black ink, consisting of a large, looped 'P' followed by a series of horizontal strokes.

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 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.	<p>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.</p> <p>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.</p> <p>There is a process in place for regular Board effectiveness reviews. More information regarding Board effectiveness is included on page 62.</p>
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.	<p>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.</p> <p>In addition, certain responsibilities are delegated to the committees in accordance with the approved Governance Standing Orders.</p> <p>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.</p>
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.	<p>The Board seeks out opportunity while mitigating risk. The Board annually discusses emergent strategy and the operational performance at the Board away day.</p> <p>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.</p> <p>The principal risks of the company are set out on page 56.</p>

Corporate Governance Report

Principal

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.

Summary

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 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 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 CO₂e 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 (tCO₂e)	1,930	1,777	100%	-7.9%
Annual Turnover (£m)	133	143		
Intensity: (tCO₂e £m Turnover)	14.6	12.4		-14.9%

Figure 1 Greenhouse gas emissions by year (tonnes CO₂e)

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 (tCO₂e)	1,930	1,777	100%	-7.9%

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.

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 tender 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
	<u>7,791</u>	<u>(3,019)</u>	<u>4,772</u>

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
	<hr/>
At 31 March 2022	8,484
Depreciation	
At 1 April 2021	3,892
Charge for the year	364
	<hr/>
At 31 March 2022	4,256
Net book value	
At 31 March 2022	<hr/> 4,228 <hr/>
At 31 March 2021	<hr/> 4,145 <hr/>

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	<u>1</u>
Net book value	
At 31 March 2022	<u>1</u>
At 31 March 2021	<u>1</u>

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	<u>1</u>
Net book value	
At 31 March 2022	<u>1</u>
At 31 March 2021	<u>1</u>

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
	<hr/> 2,574	<hr/> 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

