Charity registration number 1156578

PERSONALISED EATING DISORDER SUPPORT ANNUAL REPORT AND UNAUDITED FINANCIAL STATEMENTS FOR THE YEAR ENDED 31 MARCH 2022

1.4

LEGAL AND ADMINISTRATIVE INFORMATION

Trustees	R Ferris	(Appointed 3 May 2022)
	H Walker	(Appointed 22 February 2022)
	L Probert	(Appointed 13 December 2021)
	S Brown	
	P Patel	
	A Goode	(Appointed 1 November 2022)
	M Ward	(Appointed 13 December 2021)
Co-Founders	M Scott	
co-rounders	S Rattle	
	0 Hallo	
Charity number	1156578	
Principal address	Boroughbury Medical Centre	
	Craig Street	
	Peterborough	
	PE1 2EJ	
Independent examiner	Kerry Hilliard ACA FCCA CTA	
Bankers	HSBC	
Buillers	Cathedral Square	
	Peterborough	
	Cambs	
	PE1 1XL	

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CHAIRMAN'S STATEMENT AND CO-FOUNDERS REPORT FOR THE YEAR ENDED 31 MARCH 2022

Chairman's statement

I've had the great honour of being a Trustee of PEDS for over two years and in that time we've been able to achieve a tremendous amount. The COVID-19 pandemic has had a powerful impact on all of us with a dramatic impact on people at risk of an eating disorder. The number of people coming to us for help has increased more than threefold, they are typically in a significantly worse state of health when we see them and this has not reduced post-COVID. The ability of the team at PEDS to adjust, to innovate and to keep focus on helping our patients is inspiring and will serve us well as we look to the future.

The Board of Trustees recognise the commitment and dedication of this team and how its has responded to the pressure with skill, grace and determination. The greatest achievement lies in how the team helped and cared for so many people and the demonstration of the power of PEDS' nurse led pathway developed by Sue and Mandy. Alongside this they have also made outstanding contribution to the NHS Transformation Pathway that has been nominated for a major award and is an exemplar for how the NHS can work with third sector providers like PEDS. PEDS has also developed its pioneering work with the Universities in Cambridge and launched a new prevention service working across Cambridgeshire to train and educate people in key organisations.

PEDS set out in 2022 to secure the foundations on which to expand in future and ensure more people are able to access nurse-led care. On behalf of the Trustees I would like to thank the team for helping so many people whilst under such pressure. I would also thank our partners in NHS, Cambridge and Anglia Ruskin Universities, Cambridge county council, Donors, corporate sponsors and individual fund raisers. Your ongoing support and contribution to PEDS enables people suffering from these deadly and dreadful illnesses to succeed in finding their life to get well for.

Simon Brown

Chairman

CHAIRMAN'S STATEMENT AND CO-FOUNDERS REPORT (CONTINUED)

FOR THE YEAR ENDED 31 MARCH 2022

Co-Founders report

The past year has seen significant growth of PEDS as we have continued to expand our services to meet the needs of the community we serve. Whilst the number of people suffering with an eating disorder continues to grow, we too have grown our service offering and our team to reach as many individuals and their loved ones, as quickly as possible. In the past 12 months, we have received and triaged 662 referrals.

Our service supports children, young people and adults from a wide range of referrers including:

- · Self and family / parent
- · GPs and Practice Nurses
- CPFT AEDS NHS Secondary Care, Adult Eating Disorder Service
- CPFT CAMHS Eating Disorder Service -for under 18s
- · CPFT Younited -Children and Young People's Mental Health Service
- · University Nurses, Counsellors and Mental Health Advisors
- Psychological Wellbeing Service
- · Community NHS Diabetes service
- CPFT Perinatal Team
- Cambridgeshire Substance Misuse Services
- Cambridgeshire diabetic clinic
- Rape Crisis Service
- Primary Care Mental Health Team
- Personality Disorder Team
- Community Mental Health Teams
- HMP Prison
- Centre 33
- Ormiston Families

With eating disorders having the highest mortality rate of any psychiatric illness, plus the implications of the COVID 19 pandemic on mental health and wellbeing, this has made it priority for our charity to focus on reaching people as early as possible into their eating disorder journey as the outcomes are far more positive in relation to an individual's quality of life, when they receive support promptly. We also maintain a dedicated focus on prevention and education.

Our services help people via telephone support, emails, SMS, 1:1 sessions and group support. Including referral triage, PEDS has helped people more than 12,775 times in the last 12 months.

CHAIRMAN'S STATEMENT AND CO-FOUNDERS REPORT (CONTINUED)

FOR THE YEAR ENDED 31 MARCH 2022

Growth and Expansion

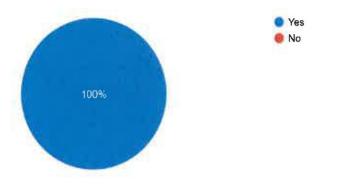
- The launch of our collaborative pathway with CPFT AEDS, the secondary care eating disorder team in October 2021 has continued to strengthen in relationships, shared resources and capacity. We meet frequently for our clinical team meetings to discuss and allocate cases, step up and step down based around the patient's best interests and share good practice as well as overcoming challenges, through joint solutions. An example being the medical monitoring of patients and how best to support this alongside our GP colleagues.
- We have run our weekly Peer Support Group for sufferers for 51 weeks out of the 54. This group supports sufferers who are either open to PEDS or our local secondary care eating disorder team and provides additional support to those on a waiting list for either service, as well as those in treatment.
- We have set up a Binge Eating Programme, a group for sufferers which runs for 10 weeks at a time. We are now into the second cohort of this programme.
- We have welcomed 3 New Trustees to our Board.
- Our team has expanded considerably and now includes a Service Manager.
- We have initiated and developed a Training and Education department and have established a contract with the local Council and have been able to recruit a Training and Education Team. This consists of two posts, a Training and Education Facilitator and an Assistant with their primary aim being to raise awareness of eating disorders, prevention and detection and how to help someone suffering.
- We have established a contract with CPFT Children's Commissioning (CCG), now ICB and can now provide a service to all ages after having to close temporarily to children and young people last year.
- Our team of volunteers have expanded with each of these members bringing lived experience.
- We have formed relationships through our membership of REDCAN (Regional Eating Disorder Charity Alliance Network). The network brings together a group of regional specialist eating disorder third sector organisations that work at grass roots level and geographically reach across the UK (including Scotland and Ireland).
- Social media presence we are now active on Instagram, Facebook and Twitter and these accounts are managed by our Co-ordinator with input from our peer support workers and volunteers.
- In response to the growing number of referrals, we have developed a Steps to Stabilise programme for those on the waiting list which enables us to reach sufferers faster whilst motivated and support with starting the recovery journey whist promoting autonomy. This is based on 2 sessions which focus on keeping safe, preventing further deterioration and stabilising symptoms. This engagement also provides an opportunity for risk to be reviewed more regularly for someone awaiting treatment and enables us to step someone up sooner if there is a deterioration.
- A custom built portal and a new website provider. We have now moved to a paperless system and our portal is used for both record keeping, receiving and triaging referrals recording outcomes and data.
- We have adapted the carers group to offer 1:1 sessions for those who find this more suitable. We asked the local community what they wanted, with feedback being that carers often are at different stages of their loved ones journey and that 1:1 support was more effective.

CHAIRMAN'S STATEMENT AND CO-FOUNDERS REPORT (CONTINUED) FOR THE YEAR ENDED 31 MARCH 2022

Feedback received from Patients

Would you recommend the service to friends or family suffering from an Eating Disorder?

10. Would you recommend the service to friends or family suffering from an Eating Disorder? 26 responses



- 1. Honestly thank you so much for all of my sessions... they were incredibly helpful and I would not be in the position I am today without year help!
- 1. Everything about this service is excellent. PEDS has amazing individuals who do not judge, and this is so important when you are used to being judged. They listen, they know what they are doing and talking about and they opened my eyes so much to things I would never have thought by myself. Substitute food suggestions were fantastic, things I didn't know existed and really amazing ways to tackle binge behaviours. The ongoing support was fantastic just knowing that PEDS was there to help make sense of what had happened with my eating, during the week and helping to get me back on track and helping me to check my thinking as it can be so unrealistic. It helped to hear someone who I trust lay out the facts so that I could see that the way I was viewing things was not actually how it really was. I tend to view things way more negatively than they really are. My perspective definitely shifted. What an amazing service.
- 2. The service has helped me heal from the ED and shown me a new way to manage things in life without using an ED. I have learnt how to manage the ED and see there is more to life than trying to control weight.
- 3. I liked the one-on-one sessions where I could explain how I was feeling and we could discuss specifics of what was going on. I felt like somebody actually listened to my needs and was willing to work WITH me.
- 4. When I got overwhelmed, PEDS would help me form a plan and reach out to the correct people. They helped me get resources from University to help me with food as well as helping me to have better contact from my GP surgery. When I am in panic mode I find it hard to do the simplest of tasks, let alone, reach out to the doctors etc, but PEDS made it so easy because they always helped me start the process.
- 5. The tone of my nurse was not judgemental and it felt reassuring to talk to her. The mechanisms and tools we spoke about are genuinely helpful and I am adding these into my daily routines and seeing positive change. It's nice to have the option to email back if I need more support as well.
- 6. I felt listened and understood. PEDS offered me appointments with qualified nutritionist and nurse. They were going at the same pace as me and offered great advice and support. They had an overview of my situation and helped me to realise that I had an eating disorder and how to get over it!

CHAIRMAN'S STATEMENT AND CO-FOUNDERS REPORT (CONTINUED) FOR THE YEAR ENDED 31 MARCH 2022

Feedback received from other professionals

How could we improve our service

- 1. They are brilliant extra staff would be helpful but we thankful to have them
- 7. There's no room for improvement
- 8. More slots available
- 9. I think it's great, no areas for improvement except expansion?!
- 10. More capacity
- 11. They are an excellent service and would only be improved by expanding which can only be achieved through funding .
- 12. It is truly excellent, timely and helpful responses and important sharing of information
- 13. We have received an excellent service so I don't think there is anything that I can think of to improve it.

The Year Ahead

- Establish potential partnerships with colleagues within REDCAN.
- Strengthen relationships with our NHS colleagues and partners.
- Strengthen relationships and opportunities with the Lottery Fund and other potential funders.
- Further strengthen our business plan which looks at our 1,2,3 and 5 year strategy.
- . Focus on the skill sets of our Trustees for example, Fundraising, Marketing, HR, Accounts and Clinical.
- Training and Education to further expand this following review of the Cambridgeshire pilot.
- Website to focus on a page to include frequently asked questions (FAQs) to enable a catalogue of support for sufferers and loved ones which is updated weekly.
- · To increase our administration support.
- To continue to evaluate the effectiveness of hybrid working which includes a mixture of remote and face to face patient contact.
- . To continue to pursue the funds for our own office / building .

Our Supporters

- Co-Op
- Tesco
- · CPFT Staff wellbeing hub
- Queens College Cambridge University
- Kings College Cambridge University
- Waitrose

Training

In addition to mandatory training, our staff have also attended:

- Body Image Awareness Training
- Body Image Train the trainer
- ARFID
- · Personality Disorders
- · CBTT

CHAIRMAN'S STATEMENT AND CO-FOUNDERS REPORT (CONTINUED)

FOR THE YEAR ENDED 31 MARCH 2022

What Have We Learnt?

- Digital app we trialled this for a short period of time and decided to pause the development of this until we are in a position to invest the time and capacity into building a robust piece of technology which can enhance the patient experience.
- The importance of a programme for sufferers on a waiting list our 1-2 session Steps to Stabilise programme has been set up by our eating disorder nutritionist in collaboration with our Nurses and is there to facilitate someone receiving help quicker.
- The value of external supervision with another eating disorder charity.
- The importance of individual screening by a clinician prior to inviting someone onto the binge eating disorder programme.
- The effectiveness of a custom built portal.

With special thanks to:

- Our Board of Trustees.
- Our volunteers who are involved in a number of ways including our social media, writing blogs, our weekly support group and fundraising.
- Our Patron Michelle Collins who despite a busy work schedule has always made the time to support PEDS through meeting with our sufferers, filming and making social media posts to raise awareness and increase understanding of eating disorders.

M Scott

M Suff

Service director and Co-Founder

TRUSTEES' REPORT

FOR THE YEAR ENDED 31 MARCH 2022

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

The financial statements have been prepared in accordance with the accounting policies set out in note 1 to the financial statements and comply with the charity's trust deed, the Charities Act 2011 and "Accounting and Reporting by Charities: Statement of Recommended Practice applicable to charities preparing their accounts in accordance with the Financial Reporting Standard applicable in the UK and Republic of Ireland (FRS 102)" (effective 1 January 2019).

Objectives and activities

The trustees have paid due regard to guidance issued by the Charity Commission in deciding what activities the charity should undertake.

The service objectives of the charity are 'to relieve the sickness and distress of persons with or affected by eating disorders, to preserve and protect good health and to advance education for the public benefit by:

Providing education, support and early intervention to those experiencing an eating disorder and their families/ carers to provide a service that is accessible to all regardless of age, gender, race, ethnicity, disability;

To increase awareness and understanding of eating disorders amongst both the public and professionals and provide an early intervention service that can be accessed via self referrals, gp's, third sector organisations, community mental health teams, child & adolescent mental health services and inpatient hospitals;

To enable multi agency working between services, signposting, enabling joint working and collaboration to facilitate a seamless service across all teams;

To help individuals manage their physical and psychological symptoms to enable them to achieve maximum quality of life.

Individual work is based upon assessment of need and is client focused, delivered by trained nurses (mental Health and Paediatric) who have over 20 years experience working with eating disorders both in the community and inpatient units. Supervision is delivered by eating disorder colleagues who provide regular input and advice. Professionals delivering individual/family work on behalf of the charity have been DBS checked.

The charity provides assessments, advice, signposting and a liaison service and has provided individual and family sessions. PEDS has also increased its outreach and home visit service and has supported service users and their families with eating out via the meal exposure work. The charity has worked with a number of professionals (GP's, paediatric wards, schools, Child and Adolescent Mental Health Services (CAMHS), Community Mental Health Teams (CMHT'S), CPFT's PRISM, IAPT and ARC primary care services. PEDS also works with Specialist Eating Disorder Inpatient Units and other voluntary Sector Organisations. PEDS has provided training to a number of schools and GPs across the country and the service has been recognised by Pride of Peterborough Awards, with one of the Founders being shortlisted as a finalist since its inception. Testimonials and service user feedback has been detailed on page 7.

The charity provides help and support to adults across Cambridgeshire. Over recent years, PEDS has provided virtual support to individuals outside of the UK via our university contracts.

Financial review

It is the policy of the charity that unrestricted funds which have not been designated for a specific use should be maintained at a level equivalent to between three and six month's expenditure. The trustees consider that reserves at this level will ensure that, in the event of a significant drop in funding, they will be able to continue the charity's current activities while consideration is given to ways in which additional funds may be raised. This level of reserves has been maintained throughout the year.

The Trustees have assessed the major risks to which the Charity is exposed, in particular those related to the operations and finances of the Charity, and are satisfied that systems are in place to mitigate their exposure to the major risks. The Trustees will continue to monitor and review the risks as they deem appropriate.

TRUSTEES' REPORT (CONTINUED) FOR THE YEAR ENDED 31 MARCH 2022

Structure, governance and management

Personalised Eating Disorder Support (PEDS) is a charitable incorporated organisation which was registered on 8 April 2014. The governing document was adopted on 8 April 2014. Prior to this, since 2013 we provided services as an affiliate of the established Luton/Bedford eating disorder charity CARALINE.

The trustees who served during the year and up to the date of signature of the financial statements were:R Ferris(Appointed 3 May 2022)H Walker(Appointed 22 February 2022)L Probert(Appointed 13 December 2021)S BrownP PatelA Goode(Appointed 1 November 2022)M Ward(Appointed 13 December 2021)

The Trustees are appointed and serve in accordance with the Trust Deed. Training is given to new Trustees as necessary.

Although there are regular Committee meetings the day-to-day administration of the Charity is delegated to Mandy Scott (Service Director) and Sue Rattle (Treasurer).

None of the trustees has any beneficial interest in the company. All of the trustees are members of the company and guarantee to contribute £1 in the event of a winding up.

The trustees' report was approved by the Board of Trustees.

S Brown

Trustee

Date: 30/1/2023

STATEMENT OF TRUSTEES' RESPONSIBILITIES FOR THE YEAR ENDED 31 MARCH 2022

The trustees are responsible for preparing the Trustees' Report and the financial statements in accordance with applicable law and United Kingdom Accounting Standards (United Kingdom Generally Accepted Accounting Practice).

The law applicable to charities in England and Wales requires the trustees 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 incoming resources and application of resources of the charity for that year.

In preparing these financial statements, the trustees are required to:

- select suitable accounting policies and then apply them consistently;

- observe the methods and principles in the Charities SORP;

- 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 operation.

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

INDEPENDENT EXAMINER'S REPORT

TO THE TRUSTEES OF PERSONALISED EATING DISORDER SUPPORT

I report to the trustees on my examination of the financial statements of Personalised Eating Disorder Support (the charity) for the year ended 31 March 2022.

Responsibilities and basis of report

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

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

Independent examiner's statement

Your attention is drawn to the fact that the charity has prepared financial statements in accordance with Accounting and Reporting by Charities preparing their accounts in accordance with the Financial Reporting Standard applicable in the UK and Republic of Ireland (FRS 102) in preference to the Accounting and Reporting by Charities: Statement of Recommended Practice issued on 1 April 2005 which is referred to in the extant regulations but has now been withdrawn.

I understand that this has been done in order for financial statements to provide a true and fair view in accordance with Generally Accepted Accounting Practice effective for reporting periods beginning on or after 1 January 2015.

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

- 1 accounting records were not kept in respect of the charity as required by section 130 of the 2011 Act; or
- 2 the financial statements do not accord with those records; or
- 3 the financial statements do not comply with the applicable requirements concerning the form and content of accounts set out in the Charities (Accounts and Reports) Regulations 2008 other than any requirement that the accounts give a true and fair view which is not a matter considered as part of an independent examination.

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

Kerry Hilliard ACA FCCA CTA

Institute of Chartered Accountants in England and Wales

Stephenson Smart & Co 36 Tyndall Court Commerce Road Lynchwood Peterborough PE2 6LR

Dated 30 Jamay 2023

STATEMENT OF FINANCIAL ACTIVITIES INCLUDING INCOME AND EXPENDITURE ACCOUNT

FOR THE YEAR ENDED 31 MARCH 2022

		Unrestricted funds	Restricted funds	Total Ur	nrestricted funds	Restricted funds	Total
		2022	2022	2022	2021	2021	2021
	Notes	£	£	£	£	£	£
Income from:							
Donations and legacies	3	14,040	-	14,040	6,530		6,530
Charitable activities	4	-	159,439	159,439		110,911	110,911
Total income		14,040	159,439	173,479	6,530	110,911	117,441
Expenditure on: Charitable activities	5	10,355	123,689	134,044	6,459	74,367	80,826
Net incoming resource before transfers	es	3,685	35,750	39,435	71	36,544	36,615
Gross transfers betweer funds	ı	7,442	(7,442)	*	-		
Net income for the yea Net movement in funds		11,127	28,308	39,435	71	36,544	36,615
Fund balances at 1 April	2021	16,806	52,194	69,000	16,735	15,650	32,385
Fund balances at 31 M 2022	arch	27,933	80,502	108,435	16,806	52,194	69,000

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

All income and expenditure derive from continuing activities.

BALANCE SHEET

AS AT 31 MARCH 2022

		2022		2021		
	Notes	£	£	£	£	
Fixed assets						
Intangible assets	9		5,000		-	
Tangible assets	10		1,628		-	
-						
			6,628			
Current assets						
Cash at bank and in hand		115,032		69,445		
Creditors: amounts falling due within	11	(13,225)		(445)		
one year	11	(15,225)				
Net current assets			101,807		69,000	
Her out one usocio						
Total assets less current liabilities			108,435		69,000	
Income funds						
Restricted funds	13		80,502		52,194	
Unrestricted funds			27,933		16,806	
			108,435		69,000	

The financial statements were approved by the Trustees on 18 JAN 2023

S Brown

Trustee

NOTES TO THE FINANCIAL STATEMENTS

FOR THE YEAR ENDED 31 MARCH 2022

1 Accounting policies

Charity information

Personalised Eating Disorder Support is a charitable incorporated organisation.

1.1 Accounting convention

The financial statements have been prepared in accordance with the charity's governing document, the Charities Act 2011 and the Charities SORP "Accounting and Reporting by Charities: Statement of Recommended Practice applicable to charities preparing their accounts in accordance with the Financial Reporting Standard applicable in the UK and Republic of Ireland (FRS 102)" (effective 1 January 2019). The charity is a Public Benefit Entity as defined by FRS 102.

The charity has taken advantage of the provisions in the SORP for charities not to prepare a Statement of Cash Flows.

The financial statements have departed from the Charities (Accounts and Reports) Regulations 2008 only to the extent required to provide a true and fair view. This departure has involved following the Statement of Recommended Practice for charities applying FRS 102 rather than the version of the Statement of Recommended Practice which is referred to in the Regulations but which has since been withdrawn.

The financial statements are prepared in sterling, which is the functional currency of the charity. Monetary amounts in these financial statements are rounded to the nearest \pounds .

The financial statements have been prepared under the historical cost convention. The principal accounting policies adopted are set out below.

1.2 Going concern

At the time of approving the financial statements, the trustees have a reasonable expectation that the charity has adequate resources to continue in operational existence for the foreseeable future. Thus the trustees continue to adopt the going concern basis of accounting in preparing the financial statements.

1.3 Charitable funds

Unrestricted funds are available for use at the discretion of the trustees in furtherance of their charitable objectives.

Restricted funds are subject to specific conditions by donors as to how they may be used. The purposes and uses of the restricted funds are set out in the notes to the financial statements.

1.4 Income

Income is recognised when the charity is legally entitled to it after any performance conditions have been met, the amounts can be measured reliably, and it is probable that income will be received.

Cash donations are recognised on receipt. Other donations are recognised once the charity has been notified of the donation, unless performance conditions require deferral of the amount. Income tax recoverable in relation to donations received under Gift Aid or deeds of covenant is recognised at the time of the donation.

No amounts are included in the financial statements for services donated by volunteers.

Grant income is recognised according to the terms of each individual agreement.

NOTES TO THE FINANCIAL STATEMENTS (CONTINUED)

FOR THE YEAR ENDED 31 MARCH 2022

1 Accounting policies

1.5 Expenditure

Expenditure is recognised once there is a legal or constructive obligation to transfer economic benefit to a third party, it is probable that a transfer of economic benefits will be required in settlement, and the amount of the obligation can be measured reliably.

Expenditure is classified by activity. The costs of each activity are made up of the total of direct costs and shared costs, including support costs involved in undertaking each activity. Direct costs attributable to a single activity are allocated directly to that activity. Shared costs which contribute to more than one activity and support costs which are not attributable to a single activity are apportioned between those activities on a basis consistent with the use of resources. Central staff costs are allocated on the basis of time spent, and depreciation charges are allocated on the portion of the asset's use.

1.6 Intangible fixed assets other than goodwill

Intangible assets acquired separately from a business are recognised at cost and are subsequently measured at cost less accumulated amortisation and accumulated impairment losses.

Amortisation is recognised so as to write off the cost or valuation of assets less their residual values over their useful lives on the following bases:

Website

10 years straight line

1.7 Tangible fixed assets

Tangible fixed assets are initially measured at cost and subsequently measured at cost or valuation, net of depreciation and any impairment losses.

Depreciation is recognised so as to write off the cost or valuation of assets less their residual values over their useful lives on the following bases:

IT equipment

3 years straight line

The gain or loss arising on the disposal of an asset is determined as the difference between the sale proceeds and the carrying value of the asset, and is recognised in the statement of financial activities.

1.8 Impairment of fixed assets

At each reporting end date, the charity reviews the carrying amounts of its tangible and intangible assets to determine whether there is any indication that those assets have suffered an impairment loss. If any such indication exists, the recoverable amount of the asset is estimated in order to determine the extent of the impairment loss (if any).

1.9 Cash and cash equivalents

Cash and cash equivalents include cash in hand, deposits held at call with banks, other short-term liquid investments with original maturities of three months or less, and bank overdrafts. Bank overdrafts are shown within borrowings in current liabilities.

(Continued)

NOTES TO THE FINANCIAL STATEMENTS (CONTINUED)

FOR THE YEAR ENDED 31 MARCH 2022

1 Accounting policies

1.10 Financial instruments

The charity has elected to apply the provisions of Section 11 'Basic Financial Instruments' and Section 12 'Other Financial Instruments Issues' of FRS 102 to all of its financial instruments.

Financial instruments are recognised in the charity's balance sheet when the charity becomes party to the contractual provisions of the instrument.

Financial assets and liabilities are offset, with the net amounts presented in the financial statements, when there is a legally enforceable right to set off the recognised amounts and there is an intention to settle on a net basis or to realise the asset and settle the liability simultaneously.

Basic financial assets

Basic financial assets, which include debtors and cash and bank balances, are initially measured at transaction price including transaction costs and are subsequently carried at amortised cost using the effective interest method unless the arrangement constitutes a financing transaction, where the transaction is measured at the present value of the future receipts discounted at a market rate of interest. Financial assets classified as receivable within one year are not amortised.

Basic financial liabilities

Basic financial liabilities, including creditors and bank loans are initially recognised at transaction price unless the arrangement constitutes a financing transaction, where the debt instrument is measured at the present value of the future payments discounted at a market rate of interest. Financial liabilities classified as payable within one year are not amortised.

Debt instruments are subsequently carried at amortised cost, using the effective interest rate method.

Trade creditors are obligations to pay for goods or services that have been acquired in the ordinary course of operations from suppliers. Amounts payable are classified as current liabilities if payment is due within one year or less. If not, they are presented as non-current liabilities. Trade creditors are recognised initially at transaction price and subsequently measured at amortised cost using the effective interest method.

Derecognition of financial liabilities

Financial liabilities are derecognised when the charity's contractual obligations expire or are discharged or cancelled.

1.11 Employee benefits

The cost of any unused holiday entitlement is recognised in the period in which the employee's services are received.

Termination benefits are recognised immediately as an expense when the charity is demonstrably committed to terminate the employment of an employee or to provide termination benefits.

1.12 Retirement benefits

Payments to defined contribution retirement benefit schemes are charged as an expense as they fall due.

(Continued)

NOTES TO THE FINANCIAL STATEMENTS (CONTINUED) FOR THE YEAR ENDED 31 MARCH 2022

2 Critical accounting estimates and judgements

In the application of the charity's accounting policies, the trustees are required to make judgements, estimates and assumptions about the carrying amount of assets and liabilities that are not readily apparent from other sources. The estimates and associated assumptions are based on historical experience and other factors that are considered to be relevant. Actual results may differ from these estimates.

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

3 Donations and legacies

	Unrestricted funds	Unrestricted funds
	2022 £	2021 £
Donations and gifts	14,040	6,530

4 Charitable activities

	Charitable Income 2022 £	Charitable Income 2021 £
Grants received	159,439	110,911

NOTES TO THE FINANCIAL STATEMENTS (CONTINUED) FOR THE YEAR ENDED 31 MARCH 2022

5 Charitable activities

	Charitable activities 2022 £	Charitable activities 2021 £
Staff costs	117,583	66,495
Depreciation and impairment	814	-
Advertising and publicity	1,704	250
Postage and stationery	382	171
Repairs and renewals	199	1,457
Subscriptions and training	1,797	51
Computer costs	3,550	624
Subscriptions	260	924
Meeting expenses	4,712	6,955
Insurance	812	540
Sundries	÷	2,609
	131,813	80,076
Share of support costs (see note 6)	774	133
Share of governance costs (see note 6)	1,457	617
	134,044	80,826
Analysis by fund		
	10.355	6,459
Restricted funds	123,689	74,367
	134,044	80,826
Analysis by fund Unrestricted funds	1,457 134,044 10,355 123,689	6 80,8 6,4 74,3

6 Support costs

Support Costs	Support G	overnan c e costs	2022	Support costs	Governance costs	2021
	£	£	£	£	£	£
Telephone	716	-	716	133	-	133
Bank charges	58	-	58	-	-	-
Accountancy	-	875	875	-	617	617
Payroll fees	-	582	582	-	-	-
	774	1,457	2,231	133	617	750
Analysed between						
Charitable activities	774	1,457	2,231	133	617	750

NOTES TO THE FINANCIAL STATEMENTS (CONTINUED) FOR THE YEAR ENDED 31 MARCH 2022

7 Trustees

None of the trustees (or any persons connected with them) received any remuneration or benefits from the charity during the year.

8 Employees

The average monthly number of employees during the year was:

	2022 Number	2021 Number
	9	8
Employment costs	2022 £	2021 £
Wages and salaries Social security costs Other pension costs	112,539 4,645 399 117,583	63,859 2,636 - 66,495

There were no employees whose annual remuneration was more than £60,000.

9 Intangible fixed assets

	Website £
Cost	
At 1 April 2021	-
Additions - separately acquired	5,000
At 31 March 2022	5,000
Amortisation and impairment At 1 April 2021 and 31 March 2022	
Carrying amount	
At 31 March 2022	5,000
At 31 March 2021	-

NOTES TO THE FINANCIAL STATEMENTS (CONTINUED) FOR THE YEAR ENDED 31 MARCH 2022

10 Tangible fixed assets

	IT equipment £
Cost Additions	2,442
At 31 March 2022	2,442
Depreciation and impairment Depreciation charged in the year	814
At 31 March 2022	814
Carrying amount At 31 March 2022	1,628

11 Creditors: amounts falling due within one year

		2022	2021
	Notes	£	£
Deferred income	12	12,505	-
Accruals and deferred income		720	445
		13,225	445

12 Deferred income

	2022 £	2021 £
Deferred income	12,505	-

Deferred income is included in the financial statements as follows:

	2022	2021
	£	£
Deferred income is included within:		
Current liabilities	12,505	-
Movements in the year:		
Deferred income at 1 April 2021	_	-
Resources deferred in the year	12,505	-
Deferred income at 31 March 2022	12,505	-

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NOTES TO THE FINANCIAL STATEMENTS (CONTINUED)

FOR THE YEAR ENDED 31 MARCH 2022

13 Restricted funds

The income funds of the charity include restricted funds comprising the following unexpended balances of donations and grants held on trust for specific purposes:

	Balance at 31 March 202 2	80,502	(*	а	r	3	10,001	80,502	
s	Transfers £	(7,442)	ı	I	I	ł	a	(7,442)	
Movement in funds	Resources expended £	(71,681)	(2,000)	(27,198)	(6,970)	(5, 840)	(10,000)	(123,689)	
Move	Incoming resources £	107,431	2,000	27,198	6,970	5,840	10,000	159,439	
	Balance at 1 April 2021 £	52,194	Ϋ́	N.	ı	ii I	ŭ.	52,194	
in funds	Resources expended £	(69,898)	Ţ	(4,469)	ł	1	ŗ	 (74,367)	
Movement in funds	Incoming resources £	106,442	I	4,469	ı	I	1	110,911	
	Balance at 1 April 2020 £	15,650	7	ı	1	1	ł	15,650	
		NHS Cambridge and Peterborough	NHS Lincolnshire	University of Cambridgeshire	Health Education England	Anglia Ruskin University	Main grants???		

NHS Cambridgeshire and Peterborough is a grant to enable the charity to work with service users, carers/families and professionals in the Cambridge and Peterborough area to improve waiting times for those referred to the charity and preventing deterioration and supporting the service user to stabilise and manage their symptoms.

NHS Lincolnshire payment received to enable the charity to provide support and treatment to a patient within the Lincolnshire area.

University of Cambridgeshire is a grant to provide two eating disorder specialist nurses to provide 1:1 eating disorder support to students and training for staff for one day per week.

Health Education England is a grant to cover training costs.

Anglia Ruskin University is a grant to provide two eating disorder specialist nurses to provide 1:1 eating disorder support to students for half a day per week.

National Lottery grant was received to enable the charity to recruit a Business Support Manager/Service Manager to take on the role of overseeing the charity's finances, operations, HR and admin services.

NOTES TO THE FINANCIAL STATEMENTS (CONTINUED)

FOR THE YEAR ENDED 31 MARCH 2022

14	Analysis of net assets b	etween funds Unrestricted funds 2022	Restricted funds 2022	Total 2022	Unrestricted funds 2021	Restricted funds 2021	Total 2021
		£	£	£	£	£	£
	Fund balances at 31 March 2022 are represented by:						
	Intangible fixed assets	5,000	-	5,000	-	1.00	-
	Tangible assets	1,628	-	1,628	-	1000	-
	Current assets/(liabilities)	21,305	80,502	101,807	16,806	52,194	69,000
		27,933	80,502	108,435	16,806	52,194	69,000

15 Related party transactions

There were no disclosable related party transactions during the year (2021 - none).