



Striving for a complete view

# Financial Statements

**Listen to Act**

(a company limited by guarantee & not having a share capital)

**31st March 2023**



# Reference & Administrative details

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# Report of the Trustees

## for the year ended 31 March 2023

### Trustees, Executive, Advisors & Bankers

Chair	Christine Vigars
Vice-Chair	Joanna Mark-Richards
Treasurer	Layo Yusuf

Trustee	Abdul Towolawi
Trustee	Chris Doherty
Trustee	Helen Cooke
Trustee	Tania Kerno
Trustee	Patience Wilson

Interim CEO Rikki Garcia (from April 2022 to mid-November 2022)  
CEO Albie Stadtmiller (from mid-November 2022)

#### **Independent Examiner**

A&B Chartered Certified Accountants  
1 Orchard Close  
Essex  
RM15 6HS

#### **Principal Bankers**

Metro Bank  
160-166 Ken. High St  
Kensington  
London  
W8 7RG

#### **Registered office**

One Westminster Office  
37 Chapel Street  
Westminster, London  
NW1 5DP

#### **Solicitors**

Russell-Cooke  
2 Putney Hill  
London  
SW15 6AB

**Company number:** 08548208

**A charitable company approved by the Charity Commissioners**

**Registered number:** 1154777

# Report of the Trustees

## for the year ended 31 March 2023

The Trustees present the report and the independent examined financial statements for the year to 31 March 2023.

## Structure, Governance & Management

### Governing Document

Listen to Act ("The Charity") is a registered charity and is incorporated as a company limited by guarantee and its governing document is its Memorandum and Articles of Association.

### Recruitment and Appointment of the Board of Management

A Board of Trustees provides strategic direction, governance and oversight. The Board of Trustees are appointed following external recruitment. The Chair of the Charity has led the charity to independence and increasing profile across London. Trustees bring a wide range of experience to the Board, from the public, private and charitable sectors, including social work, healthcare management, public sector commissioning, human resources, finance and fundraising. The Charity has a Local Committee which collates and represents the views and needs of any Borough in which the charity holds a Healthwatch contract. There are places on the Board of Trustees for representatives from this Borough. The day to day running of the Charity is undertaken by a staff team.

### Trustee Induction and Training

New Trustees are recruited based on an evaluation of the balance of diverse skills and experience needed to govern Listen to Act. Newly appointed Trustees receive induction packs containing information about Listen to Act, its structure and operations, Board structures, Trustee duties and responsibilities, and our key policies. Training opportunities are shared as are conferences, webinars and seminars to provide context and ensure Trustees can remain current in the rapidly changing context of health and social care. Trustees are encouraged to participate in operational activities wherever feasible to obtain a better appreciation of the Charity's operations. Training is provided to the Board as a need is identified.

## **Public Benefit**

We have referred to the guidance contained in the Charity Commission's general guidance on public benefit when reviewing our aims and objectives and in planning our future activities.

## **Statement of Trustees' Responsibilities**

The Trustees (who are also the directors for the purposes of company law) are responsible for preparing the Report of the Board of Trustees and the financial statements in accordance with applicable law and United Kingdom Accounting Standards (United Kingdom Generally Accepted Accounting Practice).

Company law requires the directors to prepare financial statements for each financial year. Under that law, the trustees have elected to prepare the financial statements in accordance with United Kingdom Generally Accepted Accounting Practice (United Kingdom Accounting Standards and applicable law).

Under company law, the Trustees must not approve the financial statements unless they are satisfied that they give a true and fair view of the state of affairs of the company and the profit or loss of the company 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 of the Charities SORP (FRS 102);
- make judgments and accounting estimates that are reasonable and prudent;
- state whether applicable UK Accounting Standards have been followed, subject to any material departures disclosed and explained in the financial statements;
- prepare the financial statements on the going concern basis unless it is inappropriate to presume that the charitable company will continue in business.

The Trustees are responsible for; keeping adequate accounting records that are sufficient to show and explain the charity's transactions and 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 Companies Act 2006. 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.

In so far as the Trustees are aware:

- there is no relevant audit information of which the charity's independent examiner is unaware; and
- the trustees have taken all steps they ought to have taken to make themselves aware of any relevant audit information and to establish that the independent examiner is aware of that information.

The Trustees are responsible for the maintenance and integrity of the corporate and financial information included on the charitable company's website.

Legislation in the United Kingdom governing the preparation and dissemination of financial statements may differ from legislation in other jurisdictions.

## **Objectives and activities**

The Charity aims to promote public good and the improvement of health and social care services across greater London, by promoting the voice and views of the local community in health and wellbeing matters. The Charity also seeks to advance the education of the public in health and social care.

Our aim is to reach out to everyone in our communities by:

- Operating as a free membership-based charity open to everyone who lives in, or uses health and social care services, in greater London and the Borough of Enfield;
- Collecting the views of local people about their needs for, and experience of, local Health & Social Care services;
- Making these views and experiences known to decision makers, local stakeholders, Healthwatch England and the Care Quality Commission (CQC);
- Writing reports and making recommendations about how those services could be improved;
- Promoting and supporting the involvement of local people in the monitoring, commissioning and provision of local services; and

- Providing information to help people access and make informed choices about services.

# Achievements & Performance

## Listen to Act

Listen to Act's mission is to hear to the experience of young people, patients, residents, and carers and bring about meaningful change in service provision for the communities we serve. Our engagement methodology is geared towards cultivating genuine and open dialogue that leads to realistic and lasting change.

Under the former name of *Healthwatch Central West London* we spent over nine years championing what matters to residents, patients, and carers living in Kensington & Chelsea and Westminster and we now deliver a successful Healthwatch contract in Enfield.

We're an organisation that is changing, adapting, and seeking to have a greater impact for more people across a wider geographical area. We are moving to a more commercial approach, diversifying our income, reducing our reliance on public sector procurement, and growing our range of patient and public engagement services. We recently secured contracts from local health services focusing on physical and mental health needs. This will culminate in a cooperative reflection and implementation process with clinicians to provide better health outcomes and an improved experience for those using health services.

The charity has developed its work with young people, especially around their physical and mental health. We involve young people within our work and have projects entirely focused on them. We have a young person who has been involved with our Young Healthwatch for several years and has recently been appointed to our Board of Trustees. We have another young person, who has been a part of our youth work, that is currently volunteering and supporting our youth projects. We have a dedicated Marketing & Communications team, that

supports our website, online platforms, and the broadcasting of our work within the Enfield and central London area. Our newest Enfield staff members have experience in creating digital content. Our Youth Engagement Manager uses online platforms to host meetings and further the youth-focused work. We facilitate groups, offer support and advice, and encourage network collaboration and a peer support element.

## 1. Youth Engagement

Over the last year, Listen to Act has been leading, or co-leading on, three youth-focused engagement projects – these are summarised below:

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### **North West London Schools Research Network**

In partnership with National Institute of Health Research (NIHR) Clinical Research Network North West London, Imperial College London and the NIHR Applied Research Collaboration (ARC) Northwest London, Listen to Act has a key strategic and operational role in creating, managing, and growing a network of schools across Northwest London.

The focus is to improve the health and wellbeing of students through inclusive and relevant health research where students and staff can take part in and influence the work that is done. Over the last year, Listen to Act has facilitated the recruitment of 20 new schools, which has now reached 60 schools from eight boroughs. We've held ten one on one conversations with staff and students to provide a clearer picture of what life is like in school, exploring how the network can be shaped to assist them. Through participation in research and engagement activities, 2,385 young people have been involved.

Listen to Act has also attended three community events across the region to promote the network and to capture more insights from local people and their health priorities. We have taken a leading role in creating two network newsletters and have created a steering group for the network. The steering group brings students and staff together and provides opportunities for



participants to influence future research, discuss the feasibility of current research, and to gather a strategic steer on what the barriers are for involvement. It also provides an opportunity for members to share learning and to create a sense of community in the network. To date, we have ten members in the group and have had two meetings which have generated some invaluable insights for the network.

Listen to Act is currently finalising a report of our findings from the last 1 year/18 months in relation to our community engagement activities from this project.

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## **Applied Research Collaboration Outreach Alliance: young people's open minds in North West London**

In partnership with the NIHR Applied Research Collaboration Northwest London, NIHR Clinical Research Network Northwest London and Imperial College London, Listen to Act has established and consolidated a strong advisory group of young people representing all eight North West London boroughs. The primary aims of the advisory group is to inform and advise on research that is being conducted, to plug gaps in knowledge of young people's mental health in the region, and to gather the priorities of young people in relation to health and wellbeing.

Over the last year, Listen to Act has held five workshops with the advisory group with an average of seven young people attending (all of these young people were recruited by Listen to Act and continue to be managed by us). During these workshops, the young people advised on and heavily influenced three key pieces of research that are central to the project. In some cases, the young people have been given authorship status on these pieces of research. The young people have also created a new name for the entire project and took part in two training events. The aim was to upskill them with the tools and confidence to speak with young people and policymakers about health matters.

The volunteers have also contributed to a newsletter that has gone out to policymakers in the region, advised on the online presence of the project, and written content on their experiences in the form of blogs. The volunteers are currently working on a promotional short film where they share their own personal stories and discuss the aims and importance of the advisory group's

work. The young people have presented at two meetings with key stakeholders and policymakers and have contributed their own priorities for health and wellbeing in line with the project's core aims. They have also helped to collate seminal reports from the region on young people's mental health.

An advisory group member will be part of a youth panel to discuss engaging with young people as part of Imperial College London's 'Engagement Day 2023'.

Listen to Act has received praise for our involvement in this project from the Clinical Lead who said our expertise in engaging with young people has been 'instrumental'.

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## **Creating a peer support group for young people with Type 1 Diabetes at St Mary's Hospital**

Listen to Act was commissioned to support the Children and Young People's Diabetes Care Team at St Mary's Hospital to establish and maintain contact with 10/15 of the 150 young people who are within the hospital's care but are proving to be hard to reach.

Our proposal involved creating a peer support group that would offer a safe space for the young people to share and learn from each other and to create a set of recommendations for the service's staff to adapt the service in line with the young people's interests and needs. The peer support group will also serve as a vehicle to provide support and guidance to the young people who are not part of the group.

Throughout the process we have been seeking expert counsel from Diabetes UK and working closely with a volunteer with lived experience.

Since the project commenced, we have had one on one conversations with 12 of the 18 young people to build trust and rapport with them, and to generate an initial steer on their experience of the service and what would make it better for them. We have held two workshops so far for the peer support group workshop. The first focused on creating familiarity between the young people and building their shared guiding principles as the first step in creating a sustainable peer support group. The second workshop focused on learning about how the young

people manage their condition, discussed challenges they face and potential strategies that would make their lives easier. Our next workshop will be in January where we will build towards a launch in February where the findings will be presented to clinical staff.

Throughout the process we have been seeking expert counsel from Diabetes UK and working closely with a volunteer with lived experience. This has been invaluable in shaping our approach and activities.

## 2. Mental Health Lived Experience

What does great mental health provision look like in Westminster and Kensington & Chelsea? This was the question that we posed during January 2021 – March 2023 as part of our lived engagement project.

In December 2020, Central & North West London NHS Foundation Trust commissioned *Healthwatch Central West London* to begin the Voice Exchange project. We wanted to listen to people with lived experience of mental health services across the two boroughs. The project ran for nine months, and the aim was to discover what underlying fundamental principles will be needed for future mental health provision. We found that existing services often do not work for the people who need them, or for the people working within the provision. Now is always the time to listen and really hear these views, openly and without defensiveness. Together, we build future services with these voices in mind.

### Whom we listened to

- Eight people in our Citizen's Panel and four people in our Deliberation Group.
- Six people during one-to-one interviews.
- Members of the Oremi Council at two focus groups.
- Seventeen attendees at our virtual drop-in sessions.

## What we found

Five key themes emerged from this project. It's vital for anyone involved in the care of people affected by mental health issues to be **compassionate**, with everyone, every time. **Accountability** was a paramount concern for many people we spoke with during this project. Understanding who is responsible for the delivery and quality of services is vital for not only people using those services, but for those delivering them. The desire for high quality communication and **engagement** was expressed repeatedly during the project. **Continuity** and consistency during every stage of an experience is key to supporting people, especially when admitted to an inpatient ward. People felt it was important to communicate in a **humane** way at all times. Talking with patients, not at them, was critical to ensuring this happened.

## Recommendations

There are four primary recommendations for next steps.

- Training and support for staff needs to empower them to deliver the very best services, in whatever form they may take.
- Lived experience involvement needs to be embedded across all areas of work delivered by Central and North West London NHS Foundation Trust.
- Only by working together and taking a community-wide approach, can things improve for everyone.
- The people we heard from want meaningful interaction to continue – keep listening!

## Where next?

These recommendations were brought to life by Central & North West London NHS Foundation Trust and Listen to Act to host reflective sessions internally with staff in early 2022 onwards. Quarterly Voice Exchange Summits were also planned. These Summits brought together everyone who had been a part of the Voice Exchange, encouraging participants to keep listening and learning. Together, we hope to transform the experiences of those who use mental health services in the future. We hope to define the underlying fundamental principles

that future mental health services will need. We will, quite simply, continue exchanging voices.

## 3. Patient Participation Groups (PPGs), Westminster

### **One Size Does Not Fit All: A guide to running effective GP Practice patient engagement**

Whilst still *Healthwatch Central West London*, the charity was commissioned by the Central London Integrated Care Board to put together a series of practical Guides, to support GP practices to initiate or revitalise their Patient Participation Groups (PPGs). Over two years, the charity did research on how best to create a PPG. These resulted in a set of four Guides that help GP practices meet their contractual obligation of having a PPG in place. The context for this commissioning, were patient frustrations having been strongly expressed about services provided by Primary Care, especially the ability to set up appointments.

All GP Practices are contractually required to maintain channels for active engagement with their patients and to take their views into consideration. Historically this has been delivered through practice-aligned PPG's. The best PPGs are active, two-way channels, enabling patients to not only share their views and proposals with practices, but to build understanding of the complex issues that impact delivery and change. However, many Westminster patients are not aware that their practice provides this forum for them. The presence of PPGs across Westminster GP Practices is inconsistent and is impacting the effectiveness of the Westminster patient forum.

When beginning this work, we were aware of other developments that impact how patients and residents are able to share their views and experiences as the health system changes. These include:

- The development of the NHS Integrated Care System at North West London level. The provider of Health & Care has distanced some forums (for example the Primary Care Commissioning Committee) and may give the impression that these forums are too remote to understand the experiences of a patient of a GP practice in Pimlico.
- The organisation and development of Primary Care is now led by PCNs (typically consisting of 5 to 10 practices), who provide many services and growing numbers of patient facing professionals. However, patient engagement is still an obligation at practice level.

As elements of health provision move away from institutions like hospitals and GP practices and into community settings and organisations, there is an increasing recognition that community groups should be the focus of patient engagement. These groups can be defined by ethnicity, faith, gender, medical conditions and status, and neighbourhood. How do PPGs take this into account? These were the types of questions that we attempted to answer. We hope these guides continue to shape and recreate strong channels for bringing the experience and wisdom of patients and residents into the development of delivery of Primary Care in Westminster.

These guides are for everyone who is interested in setting up an effective system for delivering strong patient engagement, whether you are a patient, local resident, or GP practice staff. It has been developed to help support GP practices to get involved in patient engagement. The four guides contain everything one needs to know about setting up, running, and maintaining excellent GP practice patient engagement.

The information across all the guides is based on extensive work carried out by Listen to Act. Over the last ten years we have worked with both patients and GP practices to build representative, sustainable, and effective GP practice patient participation in the London boroughs of Westminster, Kensington & Chelsea, Hammersmith & Fulham, and Enfield.

## Healthwatch Enfield

Listen to Act is the hosting charity for Healthwatch Enfield. There is a full complement of staff to support the valuable work within the borough of Enfield. For 12 months they've been listening to local people, patients, and carers about their experience of using Health & Social Care services. It remains our mission to work to ensure that Health & Social Care services work for everyone across Enfield.

We've spent the year expanding our reach, building relationships, and recruiting volunteers to ensure that as many Enfield residents as possible benefit from our service. We've played a key role in keeping local people up to date with reliable information, linking them to sources of help and support, countering misinformation and supporting the continued post-Covid recovery.

We remain committed to ensuring that we hear from as many different people and communities as possible. Much of our work continues to involve connecting with groups we haven't spoken to before and ensuring that everyone can help shape local services for the better. The Health & Social Care sector in which we operate continues to face many challenges, not least around funding and the increasing demands for services. We've continued to strengthen our working relationships with those who design, purchase, and deliver Health & Social Care services, the Voluntary & Community Sector and the wider public, through a range of programmes and events.

A key component of delivering the service is our work with volunteers. Our volunteers come from a wide range of backgrounds and bring a diverse range of skills and knowledge. They add considerably to the breadth and depth of our work, and we would like to take this opportunity to thank them for their contributions. To support our volunteers, we provide induction training and mentoring, combined with a wide range of volunteering opportunities.

Our local committee work on a voluntary basis to provide direction, oversight, and scrutiny to our activities. Our committee ensures that decisions about

priority areas of work reflect the concerns and interests of our diverse local community. This was another exceptionally busy year for Healthwatch Enfield. We met the challenge to ensure local patient voices were heard throughout the recent period of rising costs, strikes, and increased pressure on health services.

We responded to urgent issues and initiated and delivered exciting new projects. We're confident that we can build on this experience to develop our work as we move into the year ahead. We believe that Healthwatch Enfield is seen as a valued, respected, critical friend within the Health & Social Care arena.

**In this year we have undertaken a range of specific projects arising from the concerns of our members and the priorities of commissioners:**

**London Ambulance Service** – We were commissioned by the London Ambulance Service to engage with local residents to find out what they think of their services. This will inform their 5-year plan.

**Dental report** – Due to the number of calls we were receiving and feedback from the public about accessing NHS dental care in Enfield, we conducted a review of which dentists in Enfield were registering NHS dental patients, and the impact this is having on the community.

**Enter & View programme** – One of our statutory duties, as a Healthwatch is to enter and view premises where health and social care services are funded by the public purse. i.e., the NHS or local government. These could be Care Homes, GP practices, hospital wards, etc. Our visits are more patient led; we only look at five key areas:

- Their physical and mental health care – do residents and their relatives feel they are well looked after?
- Their personal choice and control – do the residents care/support plan reflect the needs, abilities and wishes of the resident including end-of-life care?



- Information, communication & relationships – what written information is provided to resident and relatives?
  - Their environment – is the facility pleasant, clean, comfortable, and safe?
  - And the staff & management – how well is it managed?
- 

This year so far, we have visited the following care homes:  
Bridgewood House, Nairn House, and Eliza House.

**Annual Report** – Our Annual Report was published in July 2023 and showcases the work we have completed over the year. From discussing how well NHS 111 services are working for local people, to exploring the health and social care priorities of residents in Edmonton, and developing recommendations to improve dental care in the borough.

**GP Access** – As part of our GP access project we decided to provide a GP guide for local residents that explains how to register with a GP, the different roles and responsibilities at a surgery, patients' rights, and how to get additional support if needed. These booklets will be distributed to community areas in the borough.

**Care Quality Commission (CQC) Digital Exclusion project**

We were commissioned to find out if local residents are digitally excluded from feeding back to the CQC. We spoke to a number of residents, held with people with learning difficulties, mental health conditions, and those who have English as a second language, to name a few.

**Healthy Hearts project** – We have been commissioned by North Central London Integrated Care Board to inform local residents about how to reduce high blood pressure. We recruited and provided training and support to Community Connectors to inform their communities about healthy eating habits, causes of high blood pressure, and to take blood pressure readings.

**NCL ICB Ophthalmology Project** – We were commissioned to collect the views about the proposed changes to Ophthalmology services. We gathered feedback and ideas on how the potential impact could be mitigated, with a particular focus on travel and transport, accessibility, communications, and support for patients with vulnerabilities and or their carers. We did this by visiting local ophthalmology clinics where patients may be impacted by the proposal, held focus groups with the harder to reach communities and produce a report of our findings with a number of recommendations we think would make it easier for resident to travel to the new hospital site, if the proposal was agreed.

**London Borough of Enfield** – The Adult Social Care Department Invited us to collect feedback from residents about what it's like to use their integrated hospital discharge and equipment services. We developed a survey to collect this information to identify any gaps in the services, good practice, and the best ways of communicating with service users.

The work we have been able to complete over the last 12 months will feed into our priority areas for next year. For example, we will be able to delve further into the barriers faced by local residents accessing GP and NHS dental services and look into the different ways residents can access services and provide them with this information. The impact of our GP guide is to better inform residents of their rights and the different services available to them.

Our work with the London ambulance service gave local residents a chance to feedback on the LAS and have an influence on their 5-year strategy plan. Our Enter & View programme gives local residents an unbiased review of care and nursing homes in the borough of Enfield. We also make recommendations based on our visits on how and home can improve their overall environment for residents based at these facilities. The reports created from our visits are disseminated to our local adult social care department, safeguarding teams, local hospitals, the CQC and other agencies so they have a better understanding of the facility and where we think improvements can be made or where best practice has been demonstrated. Our reports give residents and local organisations making decisions about care service a patient led view of the care

& nursing home services in the borough.

Essentially, all of the projects we have undertaken and other services we provide in the borough are to inform, improve and influence better health and care services for local residents in Enfield.

All of the reports mentioned can be found on the **Healthwatch Enfield website:**  
<https://www.healthwatchenfield.co.uk/news-and-reports>

## Marketing & Communications

Marketing and Communications are key to our continued growth and viability as a charity. The organisation has a dedicated team to support the work as a whole.

When it comes to community engagement and attracting new collaborations/partnerships, investment in marketing, communications, and design plays a pivotal role in building trust and demonstrating where our approach is different and adds value. Planning and budgeting for this work each year is key to our sustainability and growth as a charity.

By investing time and some funds into marketing activities in our first year of operation as Listen to Act we have been able to establish a brand to evolve and utilise the power of digital communications to reach and bring together residents, decision makers, and community leaders.

### Marketing and Communications Expenditure

Digital Marketing	£3727
Internal Communications	£2285
Print and Design	£1901
Social Media	£496
Branding	£308
Advertising	£36
<b>Total</b>	<b>£8753</b>

# Financial Review

The results for the year ended 31 March 2023 are set out in the Statement of Financial Activities on page 16. The assets and liabilities of the charity as of 31 March 2023 are given in the Balance Sheet on page 17.

The financial statements should be read in conjunction with their related notes which appear on pages 19 to 28.

## Principal Funding Sources

The main source of funding for the Charity is the contract with the borough of Enfield to deliver the local Healthwatch service. In 2022 – 2023 the total contract sum was £144,973 (2021 – 2022: £120,811). In addition, the Charity provided further services to other funders in the Health & Social Care sector and income from this source in 2022 – 2023 was £288,091 (2021 – 2022: £456,873).

## Reserves

The Charity has reserves of £431,496 (31 March 2022: £483,844) of which unrestricted reserves were £431,496 (31 March 2022: £428,527). Restricted reserves were £0 (31 March 2022: £55,317). These reserves are expected to be utilised in support of the contracts to which they relate.

The Board keeps the level of reserves under regular review to ensure that it is adequate and appropriate to meet the requirements of the organisation. The Trustees have agreed a reserve policy, the focus of which is to ensure that the Charity could meet all its commitments in the event that the core contract from the local authority were cancelled and the Charity were to be wound up. The Trustees have estimated that this would be £150,000. The remaining reserves have been designated, as per the Reserves Policy, to support the development of charitable activities across the Boroughs where work is commissioned and associated London regions. This includes a focus on our offer to support the voice of young people up to 25 years and sustaining the Charity through the likely re-tendering of Healthwatch contract with the associated risks of re-tendering. In line with this reserves policy, following the loss of a core Healthwatch contract in July 2022 the Board agreed to draw on reserves in the

short-term to support the staffing needed for current charitable activities, and develop a sustainable offer for the future.

## **Planning for future years**

Listen to Act continues to focus on our core priorities of signposting, capturing the views and experiences of service users and patients, and feeding back to our local communities, service providers and commissioners.

During 2022 – 2023, we continued our investment in operational systems, procedures, and staff to support our development as an independent organisation and provide the framework for future programmes. Following the loss during the year of key Local Authority funding the Board has agreed on a strategic plan to diversify income streams and concentrate resources on key deliverables which reflect the priorities of our members and funders. We also have monitoring procedures in place, so that the Board has increased oversight over our delivery activities and is able to chart impact. Unfortunately, shortly after the end of the financial year, the charity was the victim of cyber fraud and in response the trustees have instituted a thorough review of cyber security and financial controls.

We recognise the financial pressures that the commissioners of our services face and will work closely with them to address their requirements and maximise efficiency whilst continuing to provide the high-quality services that we have become recognised for.

We recognise our reliance on the core local Healthwatch contract in Enfield. The development of a more commercial approach, identifying key products and services we can provide that are in line with our charitable objectives and generate unrestricted income from is a core part of our future planning. In addition, retention, and the securing of additional Healthwatch anchor contracts remains a key part of our strategy for 2023 – 2024 onwards. Listen to Act has successfully provided Healthwatch Services for the London Borough of Enfield since June 2021.

The Charity was successful at securing additional income through the financial year which has enabled us to invest in further product/service development. However we recognise that in the current funding environment it may be difficult to increase this sufficiently to meet the fundraising target and that it may be

necessary to draw further on reserves. In the short-term, Listen to Act is concentrating on the key priorities of work with young people and capturing the voice of mental health service users and amplifying the voice of patients in primary care through patient participation groups.

## **Independent examiner's report to the trustees of Healthwatch Central West London (HWCWL) Charitable Company**

I report on the accounts of the company charity for the year ended 31 March 2023, which are set out on pages 14 to 24.

### **Respective responsibilities of trustees and examiner**

The trustees, who are also the directors of the company for the purposes of company law, are responsible for the preparation of the accounts. The trustees consider that an audit is not required for this year under s. 144 (2) of the Charities Act 2011 (the 2011 Act) and that an independent examination is needed. The charity's gross income exceeded £250,000 and I am qualified to undertake the examination by being a qualified member of ACCA.

Having satisfied myself that the company charity is not subject to audit under company law and is eligible for independent examination, it is my responsibility to:

- examine the accounts under s. 144 of the 2011 Act;
- follow the procedures laid down in the Directions given by the Charity Commission under s. 152 (5) of the 2011 Act; and
- to state whether particular matters have come to my attention.

### **Basis of independent examiner's report**

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

## Independent examiner's statement

In connection with my examination, no matter has come to my attention:

(1) which gives me reasonable cause to believe that in any material respect the requirements:

- to keep accounting records in accordance with s. 386 of the Companies Act 2006; and
- to prepare accounts which accord with the accounting records, comply with the accounting requirements of s. 396 of the Companies Act 2006 and with the methods and principles of the Statement of Recommended Practice: Accounting and Reporting by Charities have not been met; or

(2) to which, in my opinion, attention should be drawn in order to enable a proper understanding of the accounts to be reached.

Signed: .....  ..... Date: ..... 12/21/2023  
4EAD5E6B7B4842E...

A. Altaye FCCA, MSc.

Relevant Professional Body: ACCA, Address 1 Orchard Close, Essex, RM15 6HS



# Healthwatch Central West London

Statement of financial activities for the year ended 31 March 2023 (including an Income and Expenditure Account)

	Note	Unrestricted funds £	Restricted income funds £	Total 2023	Total 2022 £
<b>Income</b>					
<b>Income and endowments from:</b>					
Charitable activities	2	433,178	-	433,178	577,864
Other		-	-	-	-
<b>Total</b>		<b>433,178</b>	<b>-</b>	<b>433,178</b>	<b>577,864</b>
<b>Expenditure</b>					
<b>Expenditure on:</b>					
Charitable activities	3a	485,527	-	485,526	544,896
Other		-	-	-	-
<b>Total</b>		<b>485,527</b>	<b>-</b>	<b>485,526</b>	<b>544,896</b>
<b>Net income/(expenditure)</b>		(52,348)	-	- 52,348	32,968
<b>Net movement in funds</b>		(52,348)	-	- 52,348	32,968
<b>Reconciliation of funds:</b>					
Balances brought forward	8&9	483,844		483,844	483,844
<b>Balances carried forward</b>		<b>431,496</b>	<b>-</b>	<b>483,844</b>	<b>483,844</b>

All amounts relate to continuing activities of Healthwatch Central West London. Healthwatch Central West London has no recognised gains or losses other than those dealt with above.

The following pages form part of these financial statements.

# Healthwatch Central West London

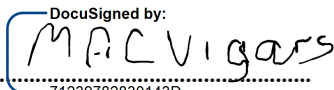
Balance sheet as at 31 March 2023

	Note	2023	2022
		£	£
<b>Fixed assets</b>			
Intangible assets		-	-
Tangible assets	5	8,190	12,715
Heritage assets		-	-
Investments		-	-
<b>Total fixed assets</b>		8,190	12,715
<b>Current assets</b>			
Prepayment	6	-	-
Debtors & Prepayments	6	58,175	54,196
Inter Company Account-Hestia		-	-
Cash at bank and in hand		402,888	477,344
<b>Total current assets</b>		461,063	531,540
<b>Creditors: amounts falling due within one year</b>	7	37,757	28,411
Deferred Grant		-	32,000
<b>Net current assets/(liabilities)</b>		423,306	471,129
<b>Total assets less current liabilities</b>		431,496	483,844
<b>Total net assets or liabilities</b>		431,496	483,844
<b>Represented by:</b>			
Designated reserves	8,9	431,496	428,527
Restricted funds	8,9	-	55,317
<b>Total funds</b>		431,496	483,844

These financial statements have been prepared in accordance with the special provisions for small companies under part 15 of the Companies Act 2006.

The financial statements were approved by the Board of Trustees and authorised for issue on 12th December 2023 and signed on its behalf by:

Christine Vigars  
Chair of the Board of Trustees  
Company Number: 08548208

Signed:  71239782830143D...

Date: 12/21/2023

The notes on pages 17 to 26 form part of these financial statements.

# Healthwatch Central West London

## Statement of cash flows for the year ended 31 March 2023

	Notes	2023		2022
		£		£
Cash Flow from Operating activities				
Cash Flows generated from operating activities	(a)	(74,456)		27,754
Cash inflow (Outflow) from investing activities		-		(5,185)
Change in cash and cash equivalents in the reporting period		(74,456)		22,569
Cash and cash equivalents as at 1 April 2022		477,344		454,775
Cash and cash equivalents as at 1 April 2023		402,888		477,344

(a) Reconciliation of Income/Expenditure to

Net income for the year		(52,348)		32,788
Office equipment Depreciation		4,526		4,239
Office Equipment bought		-		-
Bad debts written off		-		-
Increase/(decrease) in debtors		(3,979)		(9,677)
Increase/(decrease) in creditors		9,345		18,604
Deferred Grant		(32,000)		(18,200)
Cash and cash equivalents as at 1 April 2023		(74,456)		27,754

The following pages form part of these financial statements.

## Notes to the financial statements for the year ended 31 March 2023

### 1. Accounting policies

#### (a) Basis of preparation and assessment of going concern

The financial statements have been prepared under the historical cost convention with items recognised at cost or transaction value unless otherwise stated in the relevant note(s) to these financial statements. The financial statements have been prepared in accordance with the Statement of Recommended Practice: Accounting and Reporting by Charities preparing their accounts in accordance with the Financial Reporting Standard applicable in the UK and Republic of Ireland (FRS102) (effective 1 January 2015) (Charities SORP (FRS 102), the Financial Reporting Standard applicable in the UK and Republic of Ireland (FRS 102) and the Charities Act 2011.

Healthwatch Central West London constitutes a public benefit entity as defined by FRS 102.

The Trustees consider that there are no material uncertainties about Healthwatch Central West London's ability to continue as a going concern.

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

#### (b) Income

Contract income is credited to the Statement of Financial Activities when invoiced unless it relates to a specified future year, in which case, it is deferred.

*Under other creditors we account for income collected on behalf of other organisations as part of an agreement for projects, but is later transferred to the relevant parties.*

#### (c) Expenditure

Expenditure is recognised in the year in which it is incurred. Expenditure includes attributable VAT which cannot be recovered.

Expenditure is allocated to particular activities where costs relate directly to that activity.

Costs classified as "support" represent those costs associated with the governance and administration arrangements of the Charity which relate to the general running of the Charity. Such costs include office running costs, costs recharged for HR, finance, I.T. and facilities' services provided by Hestia as well as external audit fees, legal costs, related Trustee costs and costs associated with compliance with statutory requirements.

**(d) Unrestricted funds**

Unrestricted funds are donations and other income received or generated for charitable purposes.

**(e) Restricted funds**

Restricted funds are to be used for specified purposes as laid down by the donor. Expenditure which meets these criteria is charged to the funds.

**(f) Leasing**

Rentals payable under operating leases are taken to the Statement of Financial Activities on a straight-line basis over the lease term.

## Notes to the financial statements for the year ended 31 March 2023

### 2. Income from charitable activities

	Unrestricted	Restricted	2023	2022
			Total	Total
	£	£	£	£
Healthwatch Bi-borough contract	77,500	-	77,500	310,000
Healthwatch Enfield***	144,973		144,973	120,811
Donation	291		291	1,596
CNWL Your Voice Exchange	32,000		32,000	25,200
CLCH Charitable Funds	35,000		35,000	25,000
NIHR	25,000		25,000	20,000
Dignity Champions	3,750		3,750	15,000
Advocacy Project	12,000		12,000	12,000
ARC Project			-	14,875
Homecare Project			-	13,500
NWL E-consult Primary Project			-	8,325
Young People Engagement Project			-	6,825
Enfield PPG Audit	5,081		5,081	2,542
Communities at Interest			-	1,200
Imperial College Student placement	280		280	560
National Voices			-	250
NHS North Central London ICB	11,250		11,250	
Edmonton Partnership	25,000		25,000	
Enfield local connectors(NHS)	14,500		14,500	
Enfield Local Accounts	25,620		25,620	
Focus Groups in Enfield (NHS)	4,148		4,148	
London Ambulance Service	5,000		5,000	
Focus Group- Bangladeshi (Vaccination Insight)	2,562		2,562	
Healthwatch Islington	1,250		1,250	
Running Focus Group (Imperial College Health	1,750		1,750	
Stonecross & West drive Surgery PPG support	500		500	
GIFT AID (HMRC)	653		653	
NWL HW joint Working (YVHSC)	357		357	
NHS Norfolk	979		979	
Other Income (BI)	3734		3,734	
<b>Total Income</b>	<b>433,178</b>		<b>433,178</b>	<b>577,684</b>

In 2022-2023, £433,178 of income from charitable activities was attributed to unrestricted funds and £0 to restricted funds.

\*\*\*In 2022 Healthwatch Central West London was awarded the Healthwatch Enfield contract, which commenced on 1<sup>st</sup> June 2021.

### 3. (a) Analysis of expenditure on charitable activities

Programme of Activity	Activities Undertaken directly	Support Costs	2023	2022
			Total	
	£	£	£	£
Healthwatch Bi-borough contract	47,047	39,326	<b>86,373</b>	329,639
Healthwatch Enfield***	116,792	30,500	<b>147,292</b>	86,063
Donation and BI	9,029	1,278	<b>10,307</b>	1,596
CNWL Your Voice Exchange	29,722	9,978	<b>39,700</b>	25,200
CLCH Charitable Funds	27,805	10,895	<b>38,700</b>	25,000
NIHR	17,361	7,839	<b>25,200</b>	20,000
Dignity Champions	6,104	1,346	<b>7,450</b>	15,000
Advocacy Project	23,333	3,867	<b>27,200</b>	12,000
ARC Project	-	-	-	14,875
Homecare Project	-	-	-	13,500
NWL E-consult Primary Project	-	-	-	8,325
Young People Engagement Project	-	-	-	6,825
Enfield PPG Audit	4,279	1,753	<b>6,032</b>	2,542
Communities at Interest	0	0	<b>0</b>	1,200
Imperial College Student placement	280	0	<b>280</b>	560
National Voices	0	0	<b>0</b>	250
NHS North Central London ICB	8,312	3,638	<b>11,950</b>	-
Edmonton Partnership	18,861	8,036	<b>26,897</b>	-
Enfield Connectors (NHS North Central London CCG)	10,069	4,431	<b>14,500</b>	-
Enfield Local Accounts	17,791	7,829	<b>25,620</b>	-
Focus Groups in Enfield (NHS North Central London CCG)	2,881	1,267	<b>4,148</b>	-
London Ambulance Service	3,472	1,528	<b>5,000</b>	-
Focus Group- Bangladeshi (Vaccination Insight)	1,779	783	<b>2,562</b>	-
Healthwatch Islington	1,118	382	<b>1,500</b>	-
Running Focus Group (Imperial College Health partners)	1,615	535	<b>2,150</b>	-
Stonecross & Westdrive Surgery PPG support	500	0	<b>500</b>	-
GIFT AID (HMRC)	653	0	<b>653</b>	-
NWL HW joint Working (YVHSC)	534	0	<b>534</b>	-
NHS Norfolk	979	0	<b>979</b>	-
	<b>350,316</b>	<b>135,211</b>	<b>485,527</b>	<b>562,575</b>

Expenditure on charitable activities was £485,527 (2021 – 2022: £562,575) of which £485,527 (2021 – 2022: £562,575) was unrestricted and £0 (2021 – 2022: £0) was restricted.

### 3. (b) Analysis of Support Costs for the year ended 31 March 2023

The analysis of support costs is in line with Charity Commission guidance. The allocation of support costs is a proportionate distribution based on contract size. Healthwatch CWL are consistently focused on an efficient back office supporting front line delivery.

The analysis of support costs in the table below is £135,211.

	<b>2022-23</b>	<b>2021-22</b>
Governance Trustee, auditor, annual meeting and annual report	5,972	
Financing costs	41,381	
Facilities management :- office running expenses	40,428	
Human resources:- peninsula and payroll	41,938	
Information Technology:- IT costs, internet, laptops	5,492	
<b>Total support costs</b>	<b>135,211</b>	<b>129,032</b>
Healthwatch Bi- borough contract	39,707	
Healthwatch Enfield***	30,680	
Donation and BI	1,102	
CNWL your voice exchange	10,000	
CLCH charitable funds	10,938	
NIHR	7,812	
Dignity Champions	1,172	
Advocacy Projects	3,750	
Enfield PPG Audit	1,588	
NHS North central London ICB	3,516	
Edmonton Partnership	7,812	
Enfield connectors (NHS North Central London CCG)	4,532	
Enfield Local accounts	8,007	
Focus groups in Enfield (NHS North Central London CCG)	1,296	
London ambulance service	1,563	
Focus groups – Bangladeshi (Vaccination Insight)	799	
Healthwatch Islington	391	
Running Focus Group (Imperial college Heath partners)	547	
	<b>135,211</b>	
	<b>2023</b>	
Governance Trustee, auditor, annual meeting and annual report	5,972	
Financing costs	41,381	
Facilities management:- office running expenses	40,428	
Human resources:- peninsula and payroll	41,938	
Information technology:-It costs, internet, laptops	5,492	
	<b>135,211</b>	



## Notes to the financial statements for the year ended 31 March 2023

### 4. Tangible fixed assets

Tangible fixed assets are measured at cost less accumulative depreciation and any accumulative impairment losses. Depreciation is provided on all tangible fixed assets, other than freehold land, at rates calculated to write off the cost, less estimated residual value, of each asset evenly over its expected useful life, as follows:

#### Plant and machinery over four years

	Freehold land & buildings	Other land & buildings	Plant, office equipment	Music equipment	Total
	£	£	£	£	£
At the beginning of the year 01/04/2022	-	-	21,168	-	21,168
Additions	-	-	-	-	-
Revaluations	-	-	-	-	-
Disposals	-	-	(2,455)	-	(2,455)
Transfers *	-	-	-	-	-
At end of the year 2023	-	-	18,714	-	18,714
5.1 Depreciation and impairments on reducing balance method (RB)					
**Basis	RB	RB	RB	RB	RB
** Rate	25%				
At beginning of the year	-	-	8,454	-	8,454
Disposals	-	-	- 1,109	-	- 1,109
Depreciation	-	-	3,179	-	3,179
Impairment	-	-	-	-	-
At end of the year	-	-	10,524	-	10,524
5.2 Net book value					
Net book value at the beginning of the year 01/04/2022	-	-	10,260	-	10,260
Net book value at the end of the year 31/03/2023	-	-	8,190	-	8,190

## 5. Staff and Trustees

The Charity employs 7.5 (8.4 2021 – 2022) Full Time Equivalent staff directly. Total staff costs of Healthwatch Central West London were £363,336 (including agency staff) and broken down as follows:

	2023	2022
Staff costs:	£	£
Wages and salaries	334,091	324,017
Social security costs	21,639	31,569
Pension costs	7,606	10,968
<b>Total</b>	<b>363,336</b>	<b>366,554</b>

### Notes to the financial statements for the year ended 31 March 2022

Moreover, to wages and salaries, £107,664 of agency staff was paid during the year (2021 – 2022: £46,073).

No employee received total emoluments in excess of £70,000 during the year.

No Trustee received any remuneration for services during the year. No Trustees claimed expenses during the year. No Trustee had any beneficial interest in any contract with either Healthwatch Central West London or Hestia Housing and Support.

Indemnity insurance was arranged on behalf of the Trustees of Healthwatch Central West London for the 12 months commencing 1 April 2022.

The key management personnel of the Charity is comprised of the Trustees and the Director. The total employee benefits of the key management personnel were £83,871 (2021 – 2022: £85,585).

## 6. Debtors amounts due within one year

	2023	2022
	£	£
Grants receivable	39,875	33,405
Debtors and Prepayment	18,499	3,374
	<b>58,374</b>	<b>36,779</b>

## 7. Creditors: amounts falling due within one year

	2023	2022
	£	£
Creditors amounts falling due within one year	37,657	28,411
Deferred Grant Income	-	32,000
Total	37,657	60,411

### Notes to the financial statements for the year ended 31 March 2023

## 8. Unrestricted Fund

### Notes to the financial statements for the year ended 31 March 2023

During the period, our reserve funding was restructured by creating a General Reserve fund which was designated by the Board for undertaking detailed contingency planning in 2022 – 2023 as we transition to the new business model.

These designated funds will meet the costs of future service development provision and in addition, will be applied in the interim to sustain the organisation and ensure we remain a fully functional entity going forward.

## 9. Restricted Funds

Designated Funds	01-Apr-22	Transfer	Income	Expenditure	31-Mar-23
Westminster PPG	9,343	(9,343)			-
West London PPG	45,974	(45,974)			-

After a historical review of the status of restricted reserves, they have now been redesignated to general reserve in unrestricted funds. Restricted reserves comprise those funds used for specified purposes as laid down by the donor.

## Notes to the financial statements for the year ended 31 March 2023

### 10. Analysis of net assets between funds

	Net Current	Total
	Assets	Funds
	£	£
Unrestricted funds	431,496	431,496
	431,496	431,496

### 11. Operating Lease Commitments

The amounts payable by Healthwatch Central West London in respect of operating leases are shown below:

	Operating Lease		Other	
	2023	2022	2022	2021
	£	£	£	£
Amounts due;				
In less than one year	21,319	32,841	-	-
Between one and five years	-	-	-	-
In more than five years	-	-	-	-
			-	
Total	21,319	32,841	-	-

### 12. Capital commitments and capital grants

There were no capital commitments outstanding at the year end, nor any capital grants receivable.



## Contact

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Charity number: 1154777. Company number: 08548208

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