

Company number: 2610559
Charity number: 1011056

SignHealth

Report and financial statements
For the year ended 31 March 2020

**THE DEAF HEALTH
CHARITY
SIGNHEALTH**

S A Y E R | V I N C E N T


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Reference and administrative information

Company number	2610559	
Charity number	1011056	
Registered office and operational address	Falcon Mews 46 Oakmead Road London SW12 9SJ	
Country of registration	England & Wales	
Country of incorporation	United Kingdom	
Trustees	Trustees, who are also directors under company law, who served during the year and up to the date of this report were as follows:	
	Jackie Driver, Chair	
	Emma Ferguson-Coleman, Vice Chair	
	Sara Clare Mitchell	
	Andrew Sims	
	Favaad Iqbal	
	Philip Gerrard	Resigned 23 May 2019
	Christine McPherson	Appointed 23 May 2019
	Mark Perry	Appointed 23 May 2019
	Trudi Collier	Appointed 23 May 2019
	Tania Hudson	Appointed as Trustee & Treasurer 23 May 2019
	Vanessa Longley	Appointed 23 May 2019
Executive Leadership Team	James Watson-O'Neill	Chief Executive
	Mahua Nandi	Director of Finance & Resources
	Christopher Reid	Director of Operations
	Rebecca Mansell	Director of Communications & Fundraising
Bankers	Metro Bank 120 Cheapside London EC2V 7JB	
Solicitors	Trowers and Hamblins 3 Bunhill Road London EC1Y 8YZ	
Auditor	Sayer Vincent LLP Chartered Accountants and Statutory Auditor Invicta House 108-114 Golden Lane London EC1Y 0TL	

Message from the Chair of Trustees, Jackie Driver

This year SignHealth completed our turnaround by delivering a small financial surplus and ending a period in which the charity has lost money over several years. Having delivered a comprehensive governance review, relocated head office, liquidated assets, and streamlined the organisation we began to deliver our Three Year Plan and we have achieved a great deal in Year One and these achievements are detailed in this document.

However, the Covid-19 pandemic hit the UK during the final quarter of the year and I am incredibly proud of how SignHealth has stepped up to support our Deaf community during this crisis.

Raising concerns and campaigning for accessible information

Since early February we have been calling on the government to make public health information about Covid-19 available in British Sign Language and this has slowly led to significant improvements and included SignHealth collaborating with NHS England and NHS Improvement on translation of key information such as the shielding letter sent to more than 2 million people.

We have also supported Lynn Stewart Taylor's #WhereIsTheInterpreter campaign which seeks to highlight the absence of an in-person BSL interpreter at the government's daily press briefings in Downing St, despite interpreters being present in person at similar briefings in Scotland, Wales and Northern Ireland.

Taking action to provide essential information in BSL

In the absence of accessible information from government SignHealth has produced a wealth of resources on Covid-19 including a translation of all the initial government guidance before any other BSL resources were available. Since 3 March, every evening we produce a two-minute summary of that day's government press briefing which is professionally filmed, subtitled and uploaded to social media, providing vital access to health information for Deaf people. These SignHealth videos are shared, aired and republished across the country by local GP surgeries, Citizen's Advice, CCGs, and many other organisations that value making information available to everyone. To date, we have received no funding to provide these videos, but we feel it is an essential service to the Deaf community during this crisis.

Kickstarting BSL Health Access

It quickly became clear that the introduction of PPE, particularly face coverings, and the need for social distancing would place Deaf people at even greater disadvantage, especially in health settings where many appointments have been moved to take place over the phone. So, at SignHealth we acted swiftly to set up BSL Health Access in mid-April which provides on-demand access to qualified BSL Interpreters online 24 hours a day, for use in any health setting free of charge. We knew this service was essential and this has been emphasised by the thousands of calls that the service received in its first few weeks of operation. While we continue to work with colleagues at NHS England and NHS Improvement to see how this service can be publicly funded, SignHealth has taken the bold decision to put £800,000 of the charity's reserves on the line so that the service could begin immediately. We knew that Deaf people could not wait, and I am extremely proud of my Board's decision to unanimously back the proposal to use our charity's reserves in this way.

Altering our services to continue, and even expand, our support for Deaf people

As cases of Covid-19 began to rise and restrictions on travel were introduced it became obvious that instances of domestic abuse would sadly rise as a result of victims being trapped at home with their abusers. A key part of our Three Year Plan at SignHealth is to expand our London-based domestic abuse service across the UK and we were therefore very pleased to receive initial funding from the Home Office to enable us to provide remote support to Deaf people experiencing domestic abuse across England for the first time. We have already received many more referrals for this newly expanded service than expected and it is therefore more important than ever for us to secure sustainable funding for a national Deaf domestic abuse service as soon as possible.

Responding to the health and wellbeing issues our community is facing

We're also doing whatever we can to respond to new issues prompted by the pandemic – for example, we have created new BSL video resources on grief and bereavement, held an online Q&A in partnership with BSL Zone on domestic abuse, created a new Deaf version of the NHS Personalised Wellbeing Plan to support Deaf people to feel more ready to go to hospital and we continue to host a variety of regular online forums, in partnership with the UK Council on Deafness, to bring together deaf organisations from across the UK to identify and work on the key issues facing the community.

SignHealth is a vital organisation – we exist to address the significant health inequality faced by thousands of Deaf people who are so often let down or forgotten by the health system. We also provide unique services, particularly in our psychological therapy and domestic abuse teams – we are the only people who do this work. I am prouder than ever of the incredible staff and volunteers that contribute to SignHealth's work and enable us to deliver on our purpose of improving Deaf people's health and wellbeing.

Jackie Driver, Chair

Trustees' Annual Report

The trustees present their report and the audited financial statements for the year ended 31 March 2020.

Reference and administrative information set out on page 3 forms part of this report. The financial statements comply with current statutory requirements, the memorandum and articles of association and the Statement of Recommended Practice – Accounting and Reporting by Charities: SORP applicable to charities preparing their accounts in accordance with FRS 102.

Objectives and Activities

Vision

A world where there are no barriers to good health and wellbeing for Deaf people.

Purpose

To improve the health and wellbeing of Deaf¹ people.

Values

Person-centred, involving, enabling, expert, respectful, and influential.

Our focus

SignHealth's work focuses on Deaf people who use sign language: this is where our expertise lies and where we feel we are best able to help. The charity will ensure our work is fully costed and planned.

Objectives

- **Mental Health:** SignHealth will consolidate its position and look to grow its existing services to meet the needs of more Deaf people.
- **Social Change:** SignHealth will campaign and lobby on a variety of fronts to remove the barriers and obstacles Deaf people face in relation to health issues and access to services.
- **Children and Young People:** SignHealth will extend its existing work with Deaf children and young people and look at developing new services for them and with them that prevent health problems from starting or address them before they become more serious.
- **Partnership:** SignHealth will work with established experts in the field of heart disease and continue to work effectively with a diverse range of other Deaf charities.

¹ "Deaf" with an uppercase "D" is used to indicate that SignHealth's focus will continue to be to work with Deaf people who use British Sign Language and it signals our respect for Deaf people and Deaf culture

The trustees review the objectives and activities of the charity each year. This report looks at what the charity has achieved and the outcomes of its work in the reporting period. The trustees report the success of each key activity and the benefits the charity has brought to those groups of people that it is set up to support. The review also helps the trustees ensure the charity's objectives and activities remained focused on its stated purpose.

The trustees have referred to the guidance contained in the Charity Commission's general guidance on public benefit when reviewing the charity's objectives and activities, and in planning its future activities. In particular, the trustees consider how planned activities will contribute to the objectives and activities that have been set.

Achievements and performance

Residential services

SignHealth residential services offer registered care for 30 Deaf people with enduring mental health concerns and complex needs in five locations around the country. We also have supported housing provision in London, which provides daily support for five Deaf people. Staff receive ongoing training and support, and continuous risk assessments are undertaken to support residents. All of our flats were full at the end of 2019/20, with only one vacancy being held between August and December during the year, which was in line with our target of having no more than one vacancy at any one time.

During 2019/20 two of our services, Bowfell Road and Claridge Road (both in Manchester), received another Good rating from the Care Quality Commission, maintaining our Good rating across all five of our registered services.

Residents in SignHealth services are supported by highly trained staff who are Deaf themselves or fluent BSL users and our staff liaise closely with community mental health professionals. All the residents are encouraged to achieve their individual potential and the support we offer is tailored to the requirements of each and every person.

Outreach

We offer additional support to Deaf people through our Outreach schemes in London, Manchester and Birmingham. These services support Deaf people in the community with their day-to-day activities. Outreach workers help Deaf people who need additional support to lead independent lives by giving support with difficult tasks at home and elsewhere. We develop a personalised plan with each client, after carefully looking at their needs.

The Outreach teams also work with the residential services when a tenant is ready to move into community accommodation so that each resident is well supported throughout their move. Outreach services supported Deaf people across the year to lead independent lives by giving support in difficult tasks at home and elsewhere.

Advocacy

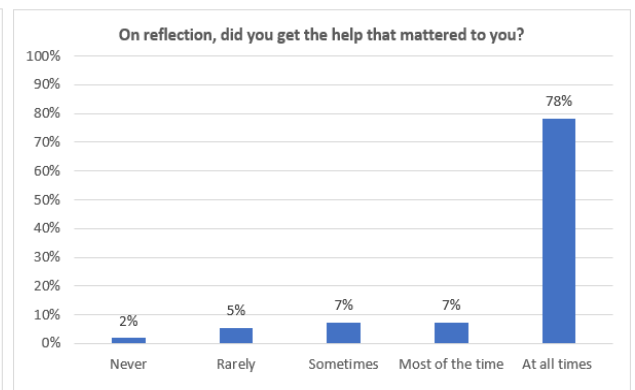
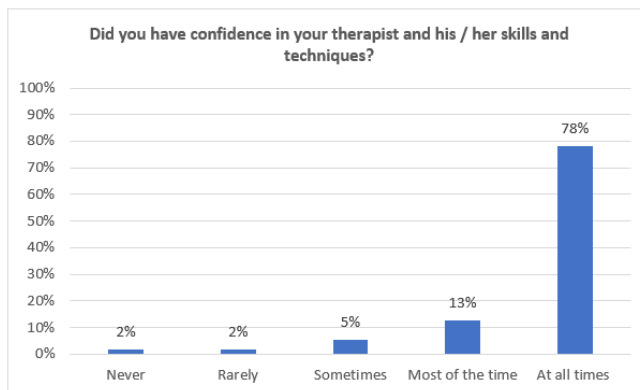
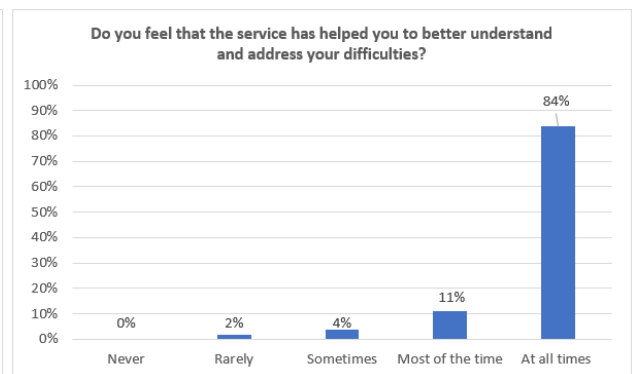
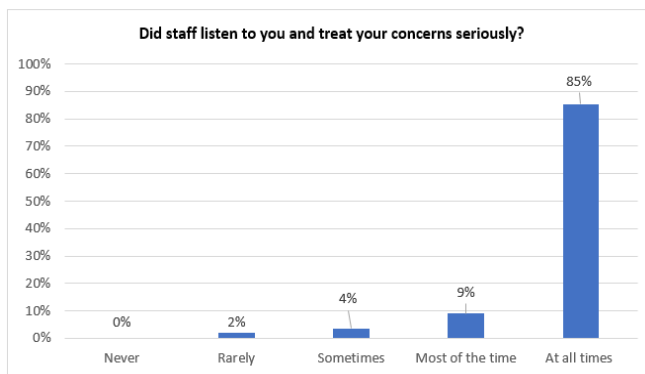
Our Advocacy service works with Deaf people in health and social care settings to make sure they are treated fairly and receive what they are entitled to. Advocates work to help people understand complicated situations, explain their rights and make sure their views and opinions are properly heard. The team delivered 1,245 advocacy sessions across the year, which is a 5% increase over the year before. This service is delivered by trained advocates who offer a specialist service in BSL.

Psychological Therapy

SignHealth's Therapy Service is for Deaf people who are feeling stressed, low in mood, depressed, anxious or worried. Deaf people are referred to a BSL-fluent therapist, often Deaf themselves, who will listen and provide advice and support. Sessions take place face-to-face, either in person or online, and everything is confidential. Deaf clients can have a one-on-one conversation in their own language and culture, without the need for an interpreter, and this therapy is highly effective, producing excellent results.

The team received 401 referrals across the year (compared to 404 in 2018/19) and carried out 3,845 sessions (compared to 3,316 in 2018/19), ensuring that Deaf people received therapy directly in BSL. In 2019/20 the service achieved outstanding recovery results with 60.8% of Deaf patients achieving recovery, compared to a national NHS target of 50%.

Our Patient Experience Feedback Questionnaire Results were also very positive, with some examples given below;



Domestic Abuse

SignHealth's Domestic Abuse service is the UK's only Deaf-led service to help Deaf women, men, and children who experience domestic abuse. Deaf people are twice as likely to experience domestic abuse than hearing people.

We provide practical and emotional support to Deaf people who are experiencing domestic abuse, and to those who have survived it. The team help people to make choices and to stay safe. This year we have seen an increase in demand for our healthy relationship courses. In 2019/20 the service received 91 new referrals in the year and supported 71 adults and 241 young people in workshops. The team also ensured information on staying safe and awareness of domestic abuse was offered to people across all of the areas we work in.

Our Three-Year Plan

This year (2019/20) was the first year of our new Three-Year Plan and we have made excellent progress with the milestones and targets that were agreed across all three of our priority areas. As would be expected in the first year of a three-year plan, many of these milestones related to development of proposals or preparation work for launching new services, partnerships or areas of work, with the implementation of these coming in the final two years of the plan. Our key achievements and successes in 2019/20 are highlighted below.

Growing Our Services

Social Care

We have conducted an in-depth analysis of the market and future trends relating to our care homes service offer, using this to develop a strategic plan for growth of our care homes portfolio. This included carrying out a consultation with clinicians from Deaf MH Inpatient Units about need, which in turn has informed the development of our new Inpatient to Community proposals. We have also been working with Leeds CCG and NHS England and NHS Improvement to develop a new service in Leeds, to provide supported living for Deaf individuals being discharged from inpatient NHS units. The implementation of this new service will be carried forward into 2020/21.

We have also developed new Service Specifications and a Quality Assurance Framework for our care homes and outreach services. Using this new Quality Assurance Framework, all our social care services have had a Quality Assurance Review undertaken in 2019/20. Improvements identified through these reviews have been incorporated into service specific action plans which are monitored on an ongoing basis. Building on this work, we have also started to develop QA frameworks for our Therapies and Domestic Abuse services.

We have confirmed a cyclical maintenance and upgrade schedule for our Care Homes to maintain premium accommodation. A capital improvements programme to capture future improvements has been developed with care managers and work has been carried out with Finance and Landlords to confirm and agree capital budgets for 2020/21.

Domestic Abuse

We have developed a comprehensive, evidenced and costed plan to expand our Domestic Abuse service across the UK, which was agreed by the Board of Trustees at their November 2019 meeting. We are now pursuing funding opportunities to enable us to implement this plan in 2020/21.

Therapies

We have been working with NHS England and NHS Improvement to pursue national commissioning arrangements for our psychological therapies service. Although it now looks like the national tender process will be delayed further into 2020/21 due to COVID-19, we have made significant progress in developing our case and proposals. If successful, this would lead to a redesign of the staffing and structure of our service and introduce a range of new roles to the team, including more group work and preventative work. We have already achieved funding for a Community Engagement Officer to undertake promotion and preventative work.

We have continued to increase the take up of online therapy throughout 2019/20 and have completed the development of new CCBT products on Depression and Anxiety. A marketing and

pricing plan for these modules has also been completed with plans for the development of further new modules in 2020/21.

New Services

We have developed a new national programme, in partnership with the National Deaf Children's Society NDCS, Deaf CAMHS, Sense, XenZone and others, to support young Deaf people's mental health, with SignHealth delivering a new therapy/counselling service for young BSL users. The programme was agreed by all partners in October 2019 with the SignHealth Board of Trustees approving it in November 2019. We are now pursuing funding to ensure this vital programme is available to support young Deaf people's mental health in the recovery from Covid-19.

Developing Our Profile

A major achievement in 2019/20 has been the development and launch of a new SignHealth website (www.signhealth.org.uk). Our new website is simpler, easier to navigate and contains much more high impact and dynamic content than before. We have increased the BSL content with new service details, registration instructions, short films and an excellent health video library. We have improved the contact information on the site for our offices and teams including a mobile number that people can use to video call us to make contact in BSL. The new site has, wherever possible, simplified referral processes. It's now simple and straightforward to refer a Deaf patient or client to one of our services, and for a Deaf person to refer themselves.

Working with National Voices we have developed a new and effective approach to user-involvement and participation with the Deaf community and users/potential users of health services. This will help to drive SignHealth's future with a framework now in place for holding user led forum meetings in London, Manchester and Birmingham in 2020/21. Linked with this we have also conducted a Stakeholder Analysis, which will be used in the future to develop relationships with potential partners in service delivery and influencing work, including mainstream health organisations. As part of raising our profile we were the main sponsor of the 2019 UK Council on Deafness conference focused on Health and Social Care.

We have also provided media training for a cohort of Deaf staff (including all the Executive Leadership Team) and trustees who will now be spokespeople for SignHealth and our work.

We have also seen large increases in the number of monthly visitors to our website from 7,640 in April 2019 to 20,422 in March 2020 and the number of new followers per month on Twitter from 51 in April 2019 to 134 in March 2020.

Strengthening Our Organisation

We have developed a Reward and Recognition Strategy and staffing structure that effectively supports the delivery of our objectives and clarifies fair salaries across all levels in the organisation. We carried out a comprehensive review of all salaries across the organisation, with recommendations which provide a structure and recommendations on pay and process for regular review approved by the Board of Trustees in November 2019. These new salaries were implemented from 1 April 2020.

We have worked with Adapta to undertake a review of our contact and case management processes, assisting in developing a systems specification for a CRM system or systems to underpin our work. Detailed scoping meetings were held with ELT and the fundraising/communications team,

as well as a further workshop with the wider services team. Following this work, it was agreed to focus on Fundraising/Communications and Social Care services. We have completed a competitive tender process and are proceeding with Donorfy for fundraising/communications, with our preferred supplier for Social Care services being Person Centred Software. Implementation of both systems will happen in 2020/21.

We have increased staff usage and familiarity with Office 365 and are exploring formal Office 365 training as part of our learning and development plan for 2020/21. We have also migrated all shared documents, except care home documents, to Office 365 in 2019/20, with plans for care home documents to be migrated in early 2020/21. We also launched Workplace (internal Facebook) as an internal communication channel to replace the staff Facebook page.

We have agreed proposals to resource the cyclical upgrading and renewal of all software, hardware and office equipment across the whole of SignHealth. A renewal budget is now included in ongoing costs. We have moved almost exclusively to cloud-based subscription services, which reduce the need to invest in expensive IT, therefore the budget is limited to renewing laptops and mobile devices as they become out of date.

A consistent internal process to developing, authorising and managing projects which enables better decision-making and longer-term pipeline planning and is in line with the existing scheme of delegation has been agreed by the Executive Leadership Team.

We have continued to invest in our staff and have been working to develop and introduce an accessible Leadership Development Programme which supports progress through the organisation and succession planning. We have piloted various programmes over the last 2 years and are now developing an in-house programme, based on use of the Insights Discovery profile. Specific proposals for the programme will be incorporated into the developing L&D strategy, to be reported to the Board in 2020/21.

We have explored adoption of Level 2 of the Disability Confident Scheme. We are currently compliant with Level 1 of Disability Confident but have reviewed this to ensure our processes are as accessible as possible. As might be expected, our processes are currently heavily geared towards deafness and use of BSL. We have also reviewed compliance with the BDA's BSL Charter. We will continue to review and incorporate this into our work on organisational values and behaviours, as part of our 'BSL Proud' work.

We have also undertaken work to confirm a consistent approach to costing and pricing across social care, which provides a clear and confirmed pricing policy, with contracts in place for all clients and regular fee reviews scheduled. This has also included work on understanding the staffing model for residential care in order to inform this costing model.

Beneficiaries of our services

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. In particular, the trustees continue to consider how planned activities will contribute to the aims and objectives they have set.

The charity carries out a wide range of activities in pursuance of its charitable aims. The trustees consider that these activities provide direct benefit to the Deaf people who use our support services, to Deaf people in the wider community as a whole, and to the health professionals who provide care to Deaf people and their families.

The trustees have concluded that there is no detriment or harm arising from its aims and objectives.

We would like to extend our sincere appreciation to everyone who has supported SignHealth during the year. The extremely kind and generous contributions have significantly helped to improve the lives of the people we serve, for which we are incredibly grateful.

We would especially like to thank all the organisations who have supported us, including the following:

Bien Venue Ltd	Surrey Community Fund
Team 9 Wave 4 UFA NCS	The Warwickshire Masonic Charitable Trust
Redsky IT	BBC Children in Need Appeal
Banchory Stonehaven Athletics	London Councils
The Childwick Trust	The Mordaunt Foundation
BNO Bi-Annual Golf Weekend	The Clothworkers' Foundation
Waitrose Balham	Kent Community Foundation
TK Maxx Balham	The Rayne Foundation
University of Keele	Sussex Police and Crime Commis
The Turquoise Holiday Company	Guild of Freeman City London
Mr Premkumar Sivadasan	The Shanly Foundation
Give A Car	Department for Culture Media & Sport
Mrs Barbara Prideaux-Brune	Ovingdean Hall Foundation
St Josephs Furniture Market	Boshier-Hinton Foundation
The Ardwick Trust	Sutton Coldfield Municipal Charities
ABC Supper Club Leeds	Ovingdean Hall Foundation
BBC Studios Production London	City Bridge Trust
Miss H L Boyes	Enterprise RAC UK Ltd
Southampton University	CC WORKS
Charter Court Financial Services	Solace (Ascent)
St George Abadan Lodge Masons	The Hospital Saturday Fund
Deaf Church London	NHS England
University of Wolverhampton	People's Postcode Lottery
Mr Alex Lumsden	Drapers Trust
Hamilton Wallace Trust	Cura Financial Services
Home Office	Alton Towers Resort
The Rhododendron Trust	Marcel Hirshman Ltd for his generous time producing the Two Deaf Foot Press Release
Kent Police Crime Commissioner	

We would also like to say a huge thank you to all the wonderful schools and groups that have supported SignHealth by taking part in our annual fundraising event, sign2sing

(www.sign2sing.org.uk) in 2019. The event raised over £34,000 for our work with Deaf adults and children, and involved approximately 50,000 school children, firemen, brownies, Lord Mayors, journalists, parents, teachers, office workers and choirs across the country signing and singing a variety of songs from our website.

In April 2019 five amazing individuals ran the London Marathon for SignHealth, raising nearly £5,000. Our heartfelt thanks to Melody Pilgrim, Carol Gemmell, Cheryl Dodson, Nick Kane and David Lyons White for all the training, dedication and fantastic fundraising. A very special mention goes to the 2020 London Marathon runners who have so far raised over £4,000 in 2019-20: thanks to Nancy Weatherson, Jessica Maryan-Ball, Alice O'Dell, Jane Newman, Ben Selfe and Eleanor Begbie.

A very special mention goes to the "Two Deaf Foot" team, Mark Hodgson, Daniel Dorney and Christopher Potts who raised an amazing £30,227 for SignHealth from their epic walk from John O'Groats to Lands End between 5 June and 4 August 2019! This donation has been placed in a new designated fund called The SignHealth Two Deaf Foot Fund and will be managed by the Two Deaf Foot Fund Committee which includes Mark Hodgson, Daniel Dorney and three of our trustees.

In addition, we received a record number of donations from individuals and community groups during 2019-20 for which we are very grateful. Thanks to everyone who organised balls, took part in challenge events and much more.

As in previous years, much of the support we have received over the year has been towards our award-winning Domestic Abuse Service run by Deaf people for Deaf people affected by domestic abuse. Our service helps to improve awareness, resilience and independence and is achieving some great results: 100% of survivors declared they were more aware of their rights, had better access to services, were better able to make safe choices, and felt more confident. It relies entirely upon voluntary contributions and grants to operate and the Trustees extend their thanks and appreciation to these donors for the support they have given throughout the year. The service particularly benefited in the year from a grant of £148,444 from the London Councils Grant Committee to support our work in London, £48,774 from the Department of Culture, Media and Sport to extend our work to Deaf women and girls in Greater Manchester, and £125,000 from the Home Office.

As always, a massive thank you to each and every one of you, we couldn't do the work we do without you.

Financial Review

SignHealth made an overall surplus of £23,407 in the year to 31 March 2020, against a budgeted surplus of £13,825. In the prior year, SignHealth made an operating surplus of £213,788 but an overall loss of £384,212. This year's surplus represents only 0.5% of turnover, and so is a surplus by the slimmest of margins. However, the Board of Trustees deliberately set a break-even budget for the year as we held significant cash reserves as a result of selling a large property that had been the centre of the charity's activities in previous years.

After several years of transition, SignHealth's income and expenditure profile remained reasonably stable in comparison with the prior year. Income reduced by £177,876, or 3.9%, in comparison with the year ended 31 March 2019. The difference was in part due to the sale of InterpreterNow Ltd, which generated some residual income in the prior year, and in part due to lower receipt of grant income in the 2019-20 year. Expenditure rose very slightly by £5,350, or 0.1%.

SignHealth set another break-even budget for the 2020-21 year. However, the current coronavirus pandemic causes considerable financial stress to the charity, as it does to many. SignHealth's services are all considered essential and the charity is therefore continuing to operate. We are however experiencing additional cost pressures on staff costs in managing sickness absence over that budgeted, and in expenditure on PPE and supporting social distancing measures. The charity is therefore forecasting losses for the year at this point in time.

Over the last few years the charity has simplified its structure and operation, and has managed to sell assets that had fallen into disuse. As a result, SignHealth ended the financial year holding over £3million in cash, and the charity is in a strong position to manage through the current crisis. We are managing to maintain our ongoing relationships with customers and suppliers, and debtors and creditors both decreased over the year. At 31 March 2020 debtor days stood at 27 days (2019: 26 days) and creditor days at 8 days (2019: 17 days).

Trustees have designated £800,000 of proceeds from the sale of Old Church to support innovation, in line with the charity's agreed reserves policy. After the year end, the Board of Trustees agreed to spend from this fund towards the establishment of BSL Health Access, providing on-demand BSL interpreting for deaf people in the healthcare system through the coronavirus pandemic.

In March 2020, the Board of Trustees approved a new investment policy for the charity and appointed Rathbones as the charity's investment managers. The charity has transferred £1.5million after the year end to be invested.

Principal risks and uncertainties

SignHealth's approach to Risk Management centres on identifying, measuring, monitoring and controlling the key risks relating to all its services and operations. Our approach has always been strongly informed by guidance provided by the Charity Commission, including its overarching definition of Risk:

"the uncertainty surrounding events and their outcomes that may have a significant impact, either enhancing or inhibiting any area of a charity's operations".

Overall Risk Profiles are calculated using the Commission's "xy+y" formula (x = likelihood and y = impact) giving additional weighting to the impact of risks being realised.

Overall responsibility and accountability for risk lies with the Board of Trustees. Since April 2018 this has been supported by a formally constituted sub-committee of the Board of Trustees, the Audit & Risk Committee.

The Audit & Risk Committee is responsible for ensuring a robust assurance framework is in place, along with appropriate and functioning processes and systems and processes to support it. The Committee Chair reports to the Board of Trustees on a regular basis through verbal reports at each Board Meeting and an Annual Report in the third quarter of each financial year. It should be noted that the Audit & Risk Committee does not have delegated responsibility to review the financial performance of the organisation.

Responsibility for identifying risk lies with the Executive Leadership Team (ELT), who consider existing risks and identify new ones. The ELT formally updates the organisational Risk Register and its associated Action log quarterly, in advance of Audit & Risk Committee and Board of Trustee Meetings.

Members of the Executive Leadership Team take specific responsibility for risk within each area of risk that has been identified. They play an important role in identifying and understanding risks that arise and are responsible for ensuring that appropriate controls are in place to ensure these risks are being managed and mitigated.

In October 2019 the Audit and Risk Committee held a workshop to review our risk management framework, agreeing that our current process is sound and fit for purpose. An updated risk register that incorporates the risks associated with our Three-Year Plan has also been developed in 2019/20, which was approved by the Board of Trustees in March 2020.

SignHealth's current Risk Register focuses on the following Risk Areas:

- Safeguarding
- Quality/Regulatory Breach
- Staff
- Financial Management
- Business Continuity
- The Deaf Community
- Policy

Of these risk areas, we have identified our top three risks (based on risk profile scores) as;

Safeguarding

This risk covers both potential poor practice leading to a safeguarding incident which could result in the death of a client or significant harm to a client, reputational loss or financial loss to the organisation and/or individual clients and also an increased risk if we grow our services to include providing more services to children and/or young people. We actively manage this risk in a variety of ways including having a comprehensive Safeguarding policy and procedure which is reviewed and

approved by the Board each year. We also now have a separate Child Protection policy and procedure which is similarly reviewed and approved every year. We maintain an incident log which is regularly reviewed by the Executive Leadership Team, with all significant issues reported directly to the CEO and on to the Chair of the Board of Trustees. We undertake training for staff and trustees, including in relation to the handling/management of clients' finances and undertake a full investigation of all incidents, with learning from every incident being captured and disseminated. Learning from recent investigations relating to alleged safeguarding incidents have been incorporated in to updated policies, procedures and practice, particularly in terms of the safety of clients and staff when interacting with third parties. We also undertake Quality Assurance Audits.

Staff

As a Deaf-led organisation, it is vital that SignHealth recruits a large proportion of staff that have lived experience of being Deaf People. We are therefore recruiting from a small pool of potential candidates. Our best candidates will also have different prior experiences and skills to those in a non Deaf-led organisation. This can also lead to risks around Hearing and Deaf staff not understanding each other, leading to poor teamwork, low staff morale and increased incidents. Deaf staff may also not understand and follow organisational policies and procedures that are delivered via 'hearing' methods, leading to lack of career progression and increased incidents. We may not be able to find enough appropriately trained and experienced Deaf staff to meet our needs, in the right locations or at all, leading to understaffing and loss of quality.

This risk is managed in a number of ways. We ensure that all policies, procedures and training are as clear and accessible as possible to everyone, regardless of background or experience. We have also invested time in assessing the accessibility of our training and policies for our diverse workforce, including the development of a number of BSL videos. This has also led SignHealth to adopt a different approach to learning and development than peer organisations. We have also used different methods and approaches to communication and training, that are shown to be more effective for a diverse staff group and particularly for Deaf staff. We have also started to investigate the impact of 'language deprivation' on the lived experience of Deaf staff. We are continually reviewing and improving the staff 'offer', particularly for Deaf staff, so that people value working at SignHealth because of its culture, its terms & conditions, and the opportunities for personal and professional development it provides.

Financial Management

As with many charities, one of our top risks is around poor financial management and understanding which can lead to diminished quality of service, inefficiencies, fraud, unnecessary reduction in cash reduction and/or free reserves and/or under investment in future development, investment and sustainability. There is also a risk to our reputation with funders, as they will have less faith in our future bids/tenders if we have needed to give grant money back in the past due to poor management.

In response to this risk we have introduced a number of controls including robust financial controls and monitoring and renewed processes and resourcing around credit control and debt management. We also have a performance management framework that aligns financial and non-financial data, which produces regular understandable and accurate reports for Managers and Trustees. We have also spent time documenting new procedures and ensuring all relevant people are aware of their

responsibilities and ensuring a properly structured and competent Finance Team, together with a clear segregation of duties.

Reserves policy

The Trustees have reviewed and updated the charity's reserves policy, to more explicitly articulate the links between the policy and the charity's key risks and strategic objectives.

In doing so, SignHealth differentiates between short, medium and long-term risks as follows:

1. **Short term:** meeting working capital requirements and mitigating unbudgeted, in-year financial risks. In SignHealth's case, examples might be to manage the cash flow implications of seasonal variations in activity, managing the impact of an empty flat in a residential property, or paying for interim cover for key personnel.

Reserves held to mitigate these short-term risks must be held as cash or short-term deposits to allow immediate access as needed.

2. **Medium term:** mitigating the financial impact of changes foreseen over the next 1-3 year planning cycle, allowing sufficient time for the charity to develop to meet these challenges whilst minimising the impact of any required changes. Examples would include managing the foreseeable impact of changes in public sector funding or benefits policy.

Reserves held to mitigate these medium-term risks can be held as long-term cash deposits, or in investment funds, as their drawdown can be planned over a longer period of time.

3. **Long term:** ensuring the charity can invest in planned renewal of infrastructure and intellectual property, so that its assets do not become outdated over time. This would include investment in property, IT and digital assets, and in professional development of staff.

Reserves held to mitigate these long-term risks would be designated by the board of trustees, against an agreed investment plan. Trustees will expect the charity to build these reserves back up over time, in order to support ongoing investment.

4. **Supporting innovation:** having funds available to identify and act on opportunities to branch out into new activities that will achieve its charitable objectives, whilst minimising risk and impact on the charity's existing activities. This would include research and development of new services and policy areas.

Reserves held to support innovation will be designated by the Board of Trustees against a clear investment plan. These funds would be held to support explicitly high-risk activity, and as such there is less requirement of a financial return.

The Board of Trustees will review the level of reserves set against each risk category, regularly as part of the annual budgeting cycle, and immediately in the event of a significant change in the charity's activities, size or risk profile.

Based on SignHealth's current size and scope of activities, the Trustees consider that one month's operating expenditure is sufficient to cover short-term risks (2020-21: £400K), and a further five

months' operating expenditure is sufficient to mitigate medium term risks (2020-21: £2.0million). SignHealth therefore aims to hold a minimum of six months' operating expenditure (2020-21: £2.4million).

At 31 March 2020, SignHealth's total unrestricted funds were £3,470,168, which equates to eight months' operating expenditure. SignHealth's general funds, excluding designated funds, were £2,490,511.

Going Concern

The Trustees consider that there are no material uncertainties about the charitable company's ability to continue as a going concern. They have approved a break-even budget for 2019-20 and have reviewed the projected cash flow to July 2021. They are confident that, with appropriate budgetary controls and even in the current difficult economic climate, SignHealth will continue in operation and that it is appropriate to prepare these financial statements on a going concern basis.

Plans for the future

As mentioned in the achievements and performance section, 2019/20 was the first year of our new Three-Year Plan, which was primarily focussed around the development of proposals and preparation work for launching new services, partnerships or areas of work. Next year (2020/21) is the second year of this plan and represents a year of consolidation and implementation. Our work will continue to focus on the three key objectives in our Three-Year Plan (copied below) in order to make progress towards achieving our purpose of improving Deaf people's health and wellbeing.

Work has recently been undertaken to review the Year Two milestones agreed by the Board of Trustees in March 2020, in light of the impact of COVID-19. At this point we are currently predicting that only one milestone will not be delivered in 2020/21 and this is due to the current challenges at an external partner and not related to capacity at SignHealth. All other milestones are still predicted to be delivered in 2020/21, although there is likely to be some slippage on delivery dates within the year for many of these. The likely impact of COVID-19 will continue to be monitored throughout 2020/21, with regular updates being presented to the Board on the latest position.

Growth – we will grow SignHealth's services to reach more Deaf people

- There will be more care home places in SignHealth services, supporting more Deaf people to get support in BSL for their mental health
- More Deaf people, including young people, will have access to psychological therapy in BSL
- Deaf people across the UK will be able to access domestic abuse services in BSL

Profile – we will increase SignHealth's profile with key audiences

- We will have developed our profile with three key groups: Sources of income and referrals; People with power or influence; and Deaf people.
- The views of Deaf people who have used health services, including our own, will drive the future of SignHealth.
- More research into Deaf people's health will be underway, and its results used to inform SignHealth's future.

Strength – we will continue to strengthen our organisation

- SignHealth will be a BSL Proud organisation.
- Staff will be employed within a clear salary structure.
- SignHealth staff will be supported to become even better leaders.
- IT and buildings at SignHealth will be regularly invested in and updated.

Specific milestones for 2020/21

The following milestones were agreed by the Board of Trustees in March 2020. However, it should be noted that it may be necessary to amend some milestones or timescales in response to the current COVID-19 pandemic. Work is being undertaken at the time of writing to review these.

Growing Our Services

- Person-centred services - Increase ways in which each of our service types relate to each other and develop a programme to cross-sell/refer and provide a unified menu of options for existing clients.
- Increase the Care Home portfolio through the purchase of at least one existing care home or by merging with an existing provider.
- Begin to deliver the national availability of our Domestic Abuse Service building on success/learning from Year 1 pilots
- Complete the restructure of the Therapies team and remain on track to ramp up provision to the target four-fold client increase
- Further development and marketing of CCBT modules
- Continue the take up of Online therapies
- Delivery of SHOUT
- Therapy/counselling for young BSL users established and growing.
- Building on the stability of existing services, begin to develop new products aimed at larger numbers of Deaf people, in partnership with other Health or Deaf organisations
- Developing and embedding an organisational approach to suicide awareness and prevention

Developing Our Profile

- Commission new Deaf health research, building on the success of Sick Of It
- To launch a new schools fundraising campaign in place of Sign2Sing
- To develop a proactive, organisation-wide campaign/marketing plan for all SignHealth's services
- Hosting user-led events to shape the future of SignHealth's work
- To work with the Head of Social Care and Service Managers to establish an effective way to collect outcomes and outputs as well as case studies on a quarterly basis to ensure we receive and communicate the impact of our users
- Establish local and corporate Networks
- To be seen as the leading Health organisation for Deaf people and showcasing our expertise - Hosting a roundtable event, inviting Deaf clinicians and health professionals for example to showcase our work/research in mental health

Strengthening Our Organisation

- Establish a 'BSL Proud' approach in relation to internal process, policy and procedure
- Update the Leadership Development Programme based on learning in year one - continue implementation
- Research a combined CRM system that brings all of our contacts into one place
- Implement new technological systems and processes, and provide staff with training to use them to best advantage
- Develop a longer-term business model for the organisation as a whole which is sustainable commercially and understands the shifting needs and identity of the Deaf community.

Structure, governance and management

The organisation is a private company limited by guarantee, incorporated on 14 May 1991 and registered as a charity on 13 May 1992.

Charitable objects

The relief of Deaf and hearing-impaired persons in particular by, but without limitation, the provision of residential services and of other such services, activities and facilities as the charity shall from time to time deem fit.

Governance

SignHealth is a company limited by guarantee, with registration number 02610559, and a registered charity with number 1011056. The company was established under a Memorandum of Association, which created the objects and powers of the charitable company and is governed by its Articles of Association. All Trustees give their time voluntarily and receive no benefits from the charity. Any expenses reclaimed from the charity are set out in note 8 to the accounts.

The Memorandum and Articles of Association were reviewed and updated in November 2017.

The Board of Trustees appointed five new Trustees in May 2019 following a comprehensive recruitment process. An Appointment Brief was developed and advertised in a variety of appropriate environments, as well as to the professional networks of Trustees and Senior Management.

These new appointments returned the membership of the Board to ten Trustees, the maximum permitted by SignHealth's Memorandum and Articles of Association. In line with SignHealth's ambitions to be a Deaf-led organisation, the newly formed Board of Trustees is made up of six Deaf and four hearing Trustees.

None of the Directors has any beneficial interest in the Company. All Directors agree to contribute £1 in the event of a winding up. Related party transactions are detailed in note 10 of the accounts.

The charity is governed by the Board of Trustees who meet with management regularly. Day to day management is delegated to the Chief Executive and the Executive Leadership Team. The Board of Trustees meet regularly and receive reports from the Chief Executive and Executive Leadership Team. The Chair, as representative of the Board, maintains regular contact with the Chief Executive. The Executive Leadership Team are invited to Board Meetings to provide reports on their areas of work. The Trustees provide advice and support to the Executive Leadership Team and other areas of the charity where their expertise is appropriate.

In May 2019 SignHealth's Board of Trustees were very proud to win the Charity Governance Award for Board Diversity and Inclusion. In order to continue to focus on diversity, the Board set up new Trustee Shadow Scheme, described below, targeted at young Deaf people from black, asian and minority ethnic communities.

Leadership and management

SignHealth has an Executive Leadership Team (ELT) with a majority of d/Deaf staff as its members.

During the year, further investment was made in Management and Leadership training with managers across SignHealth and this will continue across the new Three-Year Plan.

The Chief Executive meets with all staff teams regularly throughout the year and has regular quarterly Leadership Exchange meetings with all managers across SignHealth.

We continue to take part in a cross-charity mentoring scheme, run in partnership with Sense, Action on Hearing Loss, NDCS and RNIB.

In 2019/20 we undertook a self-assessment against the Charity Governance Code, which highlighted broad compliance and good practice against the principles whilst also identifying some areas where further work is necessary. The self-assessment was discussed and approved by the Board with the areas of development being formulated into an action plan. Progress against these actions will be reported to every Board meeting in 2020/21.

Fundraising Regulations

Whilst SignHealth engages in public fundraising, it does not use professional fundraisers or commercial participators. The charity nevertheless observes and complies with the relevant fundraising regulations and codes and is a member of the Fundraising Regulator. During the year SignHealth was compliant with these regulations and codes, and the charity received no complaints relating to its fundraising practice (2019: no complaints).

Appointment of Trustees

Vetting and checks of new Trustees was carried out in line with Charity Commission guidance and all new Trustees had induction meetings with the Chief Executive and each of the Directors on the Executive Leadership Team. New Trustees participated in the Board Development Away Day in May 2019, an event aimed at increasing the effectiveness of SignHealth's Board of Trustees and which has now become an annual occurrence.

One of the newly appointed Trustees, Tania Hudson, has taken up the role of Treasurer, with an existing Trustee, Emma Ferguson-Coleman, becoming Vice Chair.

In January 2020, SignHealth launched a Trustee Shadow Scheme with the intention giving young Deaf people the opportunity to shadow our trustees and learn a bit more about what they do and how they work. The intention is that the scheme members will then be able to make an informed decision to apply to become Trustees, either at SignHealth or at other organisations, or not. The 2020 scheme has eight participants and includes the opportunity to attend all Board meetings, have regular conversations with a Trustee mentor and attend other events with their peers. It is hoped that the scheme will run every year, building on the learning received from this first cohort.

Related parties and relationships with other organisations

Both Trustees and key management personnel complete annual declarations of interest. Trustees declare any conflicts of interest at the beginning of each meeting and discuss how the conflict should be managed with regard to agenda items.

Details of related party transactions can be found in note 10 of the financial statements.

Remuneration policy for key management personnel

The Chief Executive's salary is determined by the Board of Trustees, and their review will take account of the past year's achievements, environmental and market conditions, and of sector comparisons.

The pay of senior staff is reviewed annually and can be increased in accordance with average earnings and the level of responsibility required. In view of the charitable nature of the company, the remuneration benchmark is determined through comparative research into charities of a similar size and scope.

Statement of responsibilities of the trustees

The trustees (who are also directors of SignHealth for the purposes of company law) are responsible for preparing the trustees' annual report and the financial statements in accordance with applicable law and United Kingdom Accounting Standards (United Kingdom Generally Accepted Accounting Practice).

Company law 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 charitable company, and of the incoming resources and application of resources, including the income and expenditure, of the charity for that period.

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 UK Accounting Standards and statements of recommended practice 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 charity will continue in operation.

The trustees are responsible for keeping adequate accounting records that disclose with reasonable accuracy at any time the financial position of the charitable company 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 charitable company, 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 charitable company's auditor is unaware
- The trustees have taken all steps that they ought to have taken to make themselves aware of any relevant audit information and to establish that the auditor 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.

The trustees are members of the charity but this entitles them only to voting rights. The trustees have no beneficial interests in the charity.

The charity has taken out indemnity insurance on behalf of the Trustees.

Auditor

Sayer Vincent LLP was re-appointed as the charitable company's auditor during the year and has expressed its willingness to continue in that capacity.

The trustees' annual report has been prepared in accordance with the special provisions applicable to companies subject to the small companies' regime.

The trustees' annual report has been approved by the trustees on 23 July 2020 and signed on their behalf by

A handwritten signature in black ink, appearing to be 'JD', written in a cursive style.

Jackie Driver
Chair of Trustees

Opinion

We have audited the financial statements of SignHealth (the 'charitable company') for the year ended 31 March 2020 which comprise the statement of financial activities, balance sheet, statement of cash flows and notes to the financial statements, including a summary of significant accounting policies. The financial reporting framework that has been applied in their preparation is applicable law and United Kingdom Accounting Standards, including Financial Reporting Standard 102 *The Financial Reporting Standard applicable in the UK and Republic of Ireland* (United Kingdom Generally Accepted Accounting Practice).

In our opinion, the financial statements:

- Give a true and fair view of the state of the charitable company's affairs as at 31 March 2020 and of its incoming resources and application of resources, including its income and expenditure, for the year then ended
- Have been properly prepared in accordance with United Kingdom Generally Accepted Accounting Practice
- Have been prepared in accordance with the requirements of the Companies Act 2006

Basis for opinion

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

Conclusions relating to going concern

We have nothing to report in respect of the following matters in relation to which the ISAs (UK) require us to report to you where:

- The trustees' use of the going concern basis of accounting in the preparation of the financial statements is not appropriate; or
- The trustees have not disclosed in the financial statements any identified material uncertainties that may cast significant doubt about the charitable company's ability to continue to adopt the going concern basis of accounting for a period of at least twelve months from the date when the financial statements are authorised for issue.

Other information

The other information comprises the information included in the trustees' annual report, other than the financial statements and our auditor's report thereon. The trustees are responsible for the other information. Our opinion on the financial statements does not cover the other information and, except

Independent auditor's report

To the members of SignHealth

For the year ended 31 March 2020

to the extent otherwise explicitly stated in our report, we do not express any form of assurance conclusion thereon. In connection with our audit of the financial statements, our responsibility is to read the other information and, in doing so, consider whether the other information is materially inconsistent with the financial statements or our knowledge obtained in the audit or otherwise appears to be materially misstated. If we identify such material inconsistencies or apparent material misstatements, we are required to determine whether there is a material misstatement in the financial statements or a material misstatement of the other information. If, based on the work we have performed, we conclude that there is a material misstatement of this other information, we are required to report that fact.

We have nothing to report in this regard.

Opinions on other matters prescribed by the Companies Act 2006

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

- The information given in the trustees' annual report for the financial year for which the financial statements are prepared is consistent with the financial statements
- The trustees' annual report has been prepared in accordance with applicable legal requirements

Matters on which we are required to report by exception

In the light of the knowledge and understanding of the charitable company and its environment obtained in the course of the audit, we have not identified material misstatements in the trustees' annual report.

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

- Adequate accounting records have not been kept, or returns adequate for our audit have not been received from branches not visited by us; or
- The financial statements are not in agreement with the accounting records and returns; or
- Certain disclosures of trustees' remuneration specified by law are not made; or
- We have not received all the information and explanations we require for our audit; or
- The trustees were not entitled to prepare the financial statements in accordance with the small companies' regime and take advantage of the small companies' exemptions in preparing the trustees' annual report and from the requirement to prepare a strategic report.

Responsibilities of trustees

As explained more fully in the statement of trustees' responsibilities set out in the trustees' annual report, the trustees (who are also the directors of the charitable company for the purposes of company law) are responsible for the preparation of the financial statements and for being satisfied that they give a true and fair view, and for such internal control as the trustees determine is necessary to enable the preparation of financial statements that are free from material misstatement, whether due to fraud or error.

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

Auditor's responsibilities for the audit of the financial statements

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

As part of an audit in accordance with ISAs (UK), we exercise professional judgment and maintain professional scepticism throughout the audit. We also:

- Identify and assess the risks of material misstatement of the financial statements, whether due to fraud or error, design and perform audit procedures responsive to those risks, and obtain audit evidence that is sufficient and appropriate to provide a basis for our opinion. The risk of not detecting a material misstatement resulting from fraud is higher than for one resulting from error, as fraud may involve collusion, forgery, intentional omissions, misrepresentations, or the override of internal control.
- Obtain an understanding of internal control relevant to the audit in order to design audit procedures that are appropriate in the circumstances, but not for the purpose of expressing an opinion on the effectiveness of the entity's internal control.
- Evaluate the appropriateness of accounting policies used and the reasonableness of accounting estimates and related disclosures made by the trustees.
- Conclude on the appropriateness of the trustees' use of the going concern basis of accounting and, based on the audit evidence obtained, whether a material uncertainty exists related to events or conditions that may cast significant doubt on the entity's ability to continue as a going concern. If we conclude that a material uncertainty exists, we are required to draw attention in our auditor's report to the related disclosures in the financial statements or, if such disclosures are inadequate, to modify our opinion. Our conclusions are based on the audit evidence obtained up to the date of our auditor's report. However, future events or conditions may cause the entity to cease to continue as a going concern.
- Evaluate the overall presentation, structure and content of the financial statements, including the disclosures, and whether the financial statements represent the underlying transactions and events in a manner that achieves fair presentation.

We communicate with those charged with governance regarding, among other matters, the planned scope and timing of the audit and significant audit findings, including any significant deficiencies in internal control that we identify during our audit.

Independent auditor's report

To the members of SignHealth

For the year ended 31 March 2020

Use of our report

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

A handwritten signature in black ink that reads "Sayer Vincent LLP".

Jonathan Orchard (Senior statutory auditor)

24 July 2020

for and on behalf of Sayer Vincent LLP, Statutory Auditor

Invicta House, 108-114 Golden Lane, LONDON, EC1Y 0TL

SignHealth

Statement of financial activities (incorporating an income and expenditure account)

For the year ended 31 March 2020

	Note	Unrestricted £	Restricted £	2020 Total £	Unrestricted £	Restricted £	2019 Total £
Income from:							
Donations and legacies	2	134,402	4,032	138,434	138,951	28,243	167,194
Charitable activities							
Social care	3a	2,946,082	53,428	2,999,510	2,860,939	23,091	2,884,030
Therapies	3b	654,936	64,107	719,043	744,795	142,432	887,227
Domestic abuse	3c	20,017	413,410	433,427	1,690	406,016	407,706
Other charitable activities	3d	62,341	-	62,341	61,188	-	61,188
InterpreterNow (discontinued)	3e	-	-	-	38,853	-	38,853
Fundraising events		25,764	-	25,764	35,751	-	35,751
Investments	4	28,185	-	28,185	66,862	-	66,862
Other income	6	-	-	-	35,769	-	35,769
Total income		3,871,727	534,977	4,406,704	3,984,798	599,782	4,584,580
Expenditure on:							
Raising funds	5a	288,839	-	288,839	260,890	-	260,890
Charitable activities							
Social care		2,791,199	60,179	2,851,378	2,847,990	47,154	2,895,144
Therapies		649,989	64,107	714,096	549,038	139,132	688,170
Domestic abuse		28,234	430,324	458,558	-	424,288	424,288
Other charitable activities		63,271	-	63,271	61,971	-	61,971
InterpreterNow (discontinued)		-	-	-	40,329	-	40,329
Total expenditure		3,821,532	554,610	4,376,142	3,760,218	610,574	4,370,792
Net income/(expenditure) before net losses on revaluation/sale of assets		50,195	(19,633)	30,562	224,580	(10,792)	213,788
Net (losses) on sale/disposal of assets		(7,155)	-	(7,155)	(598,000)	-	(598,000)
Net movement in funds		43,040	(19,633)	23,407	(373,420)	(10,792)	(384,212)
Reconciliation of funds:							
Total funds brought forward		3,427,128	57,234	3,484,362	3,800,548	68,026	3,868,574
Total funds carried forward		3,470,168	37,601	3,507,769	3,427,128	57,234	3,484,362


Interpreter Now Ltd was sold on 30 April 2018 and classified as discontinued activity in the financial statements for the year ended 31 March 2019.

All other activities are continuing. There were no other recognised gains or losses other than those stated above. Movements in funds are disclosed in Note 19 to the financial statements.

As at 31 March 2020

	Note	2020 £	2019 £
Fixed assets:			
Tangible assets	12	149,430	263,476
Investments	14	200	100
		<u>149,630</u>	<u>263,576</u>
Current assets:			
Debtors	15	350,040	496,408
Short term deposits		1,006,443	-
Cash at bank and in hand		2,281,285	3,084,984
		<u>3,637,768</u>	<u>3,581,392</u>
Liabilities:			
Creditors: amounts falling due within one year	16	(279,629)	(360,606)
		<u>3,358,139</u>	<u>3,220,786</u>
Net current assets			
		<u>3,507,769</u>	<u>3,484,362</u>
Total net assets			
		<u><u>3,507,769</u></u>	<u><u>3,484,362</u></u>
Funds:	19		
Restricted income funds		37,601	57,234
Unrestricted income funds:			
Designated funds		979,657	263,476
General funds		2,490,511	3,163,652
		<u>3,470,168</u>	<u>3,427,128</u>
Total unrestricted funds			
		<u>3,507,769</u>	<u>3,484,362</u>
Total funds		<u><u>3,507,769</u></u>	<u><u>3,484,362</u></u>

Approved by the trustees on 23 July 2020 and signed on their behalf by


E Ferguson-Coleman
Trustee

T Hudson
Trustee

Consolidated statement of cash flows

For the year ended 31 March 2020

	Note	2020 £	£	2019 £	£
Cash flows from operating activities					
Net income/(expenditure) for the reporting period (as per the statement of financial activities)		23,407		(384,212)	
Depreciation charges		120,838		108,338	
Losses disposal of fixed assets		7,155		598,000	
Dividends, interest and rent from investments		(28,185)		(66,862)	
Decrease in debtors		146,368		210,483	
(Decrease) in creditors		(80,977)		(75,176)	
Net cash provided by operating activities			188,606		390,571
Cash flows from investing activities:					
Dividends, interest and rents from investments		28,185		66,862	
Proceeds from the sale of fixed assets		260		2,024,000	
Purchase of fixed assets		(14,207)		(85,586)	
Purchase of investments		(100)		-	
Net cash provided by investing activities			14,138		2,005,276
Change in cash and cash equivalents in the year			202,744		2,395,847
Cash and cash equivalents at the beginning of the year			3,084,984		689,137
Cash and cash equivalents at the end of the year			3,287,728		3,084,984

1 Accounting policies

a) Statutory information

SignHealth is a charitable company limited by guarantee and is incorporated in England and Wales.

The registered office address is Falcon Mews, 46 Oakmead Road, London, SW12 9SJ.

b) Basis of preparation

The financial statements have been prepared in accordance with Accounting and Reporting by Charities: Statement of Recommended Practice applicable to charities preparing their accounts in accordance with the Financial Reporting Standard applicable in the UK and Republic of Ireland (FRS 102) – (Charities SORP FRS 102), The Financial Reporting Standard applicable in the UK and Republic of Ireland (FRS 102) and the Companies Act 2006.

Assets and liabilities are initially recognised at historical cost or transaction value unless otherwise stated in the relevant accounting policy or note.

In applying the financial reporting framework, the trustees have made a number of subjective judgements, for example in respect of significant accounting estimates. Estimates and judgements are continually evaluated and are based on historical experience and other factors, including expectations of future events that are believed to be reasonable under the circumstances. The nature of the estimation means the actual outcomes could differ from those estimates. Any significant estimates and judgements affecting these financial statements are detailed within the relevant accounting policy below.

c) Public benefit entity

The charitable company meets the definition of a public benefit entity under FRS 102.

d) Going concern

The trustees consider that there are no material uncertainties about the charitable company's ability to continue as a going concern. In respect of the COVID-19 pandemic ongoing during 2020, the charity expects its fundraising activities to be negatively impacted but has sufficient reserves to meet liabilities as they fall due.

The trustees do not consider that there are any sources of estimation uncertainty at the reporting date that have a significant risk of causing a material adjustment to the carrying amounts of assets and liabilities within the next reporting period.

e) Income

Income is recognised when the charity has entitlement to the funds, any requirements attached to the income have been met, it is probable that the income will be received and that the amount can be measured reliably.

Income from government and other grants, whether 'capital' grants or 'revenue' grants, is recognised when the charity has entitlement to the funds, any conditions attached to the grants are expected to be met, it is probable that the income will be received and the amount can be measured reliably and is not deferred.

For legacies, entitlement is taken as the earlier of the date on which either: the charity is aware that probate has been granted, the estate has been finalised and notification has been made by the executor(s) to the charity that a distribution will be made, or when a distribution is received from the estate. Receipt of a legacy, in whole or in part, is only considered probable when the amount can be measured reliably and the charity has been notified of the executor's intention to make a distribution. Where legacies have been notified to the charity, or the charity is aware of the granting of probate, and the criteria for income recognition have not been met, then the legacy is treated as a contingent asset and disclosed if material.

Income received in advance of the provision of a specified service is deferred until the criteria for income recognition are met.

f) Interest receivable

Interest on funds held on deposit is included when receivable and the amount can be measured reliably by the charity; this is normally upon notification of the interest paid or payable by the bank.

g) Fund accounting

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

Unrestricted funds are donations and other incoming resources received or generated for the charitable purposes.

Designated funds are unrestricted funds earmarked by the trustees for particular purposes.

Notes to the financial statements

For the year ended 31 March 2020

1 Accounting policies (continued)

h) Expenditure and irrecoverable VAT

Expenditure is recognised once there is a legal or constructive obligation to make a payment to a third party, it is probable that settlement will be required and the amount of the obligation can be measured reliably. Expenditure is classified under the following activity headings:

- Costs of raising funds relate to the costs incurred by the charitable company in inducing third parties to make voluntary contributions to it, as well as the cost of any activities with a fundraising purpose
- Expenditure on charitable activities includes the costs of delivering services undertaken to further the purposes of the charity and their associated support costs
- Other expenditure represents those items not falling into any other heading

Irrecoverable VAT is charged as a cost against the activity for which the expenditure was incurred.

i) Allocation of support costs

Resources expended are allocated to the particular activity where the cost relates directly to that activity. The indirect costs of overall direction and administration, comprising the salary and overhead costs of the central function, is apportioned to activities as a proportion of headcount in each service area;

● Raising funds	4% (2019: 2%)
● Social care	76% (2019:79%)
● Therapies	9% (2019:9%)
● Domestic abuse	10% (2019: 9%)
● Other charitable activities	1% (2019: 1%)
● Interpreter Now	0% (2019:0%)

Governance costs are allocated to each of the activities on the following basis which is an estimate, based on staff headcount, of the amount attributable to each activity:

● Raising funds	4% (2019: 2%)
● Social care	76% (2019:79%)
● Therapies	9% (2019:9%)
● Domestic abuse	10% (2019: 9%)
● Other charitable activities	1% (2019: 1%)
● Interpreter Now	0% (2019:0%)

Governance costs are the costs associated with the governance arrangements of the charity. These costs are associated with constitutional and statutory requirements and include any costs associated with the strategic management of the charity's activities.

j) Operating leases

Rental charges are charged on a straight line basis over the term of the lease.

k) Tangible fixed assets

Items of equipment are capitalised where the purchase price exceeds £2,000. Depreciation costs are allocated to activities on the basis of the use of the related assets in those activities. Assets are reviewed for impairment if circumstances indicate their carrying value may exceed their net realisable value and value in use. Major components are treated as a separate asset where they have significantly different patterns of consumption of economic benefits and are depreciated separately over its useful life.

Depreciation is provided at rates calculated to write down the cost of each asset to its estimated residual value over its expected useful life. The depreciation rates in use are as follows:

● Freehold Land and Buildings	50 years
● Leasehold Land and Buildings	Over the period of the lease
● Fixtures, Fittings and Equipment	4 years
● IT Equipment	3 years

l) Listed investments

Investments are a form of basic financial instrument and are initially recognised at their transaction value and subsequently measured at their fair value as at the balance sheet date using the closing quoted market price. Any change in fair value will be recognised in the statement of financial activities. Investment gains and losses, whether realised or unrealised, are combined and shown in the heading "Net gains/(losses) on investments" in the statement of financial activities. The charity does not acquire put options, derivatives or other complex financial instruments.

Notes to the financial statements

For the year ended 31 March 2020

1 Accounting policies (continued)

m) Debtors

Trade and other debtors are recognised at the settlement amount due after any trade discount offered. Prepayments are valued at the amount prepaid net of any trade discounts due.

n) Short term deposits

Short term deposits includes cash balances that are invested in accounts with a maturity date of between 3 and 12 months.

o) Cash at bank and in hand

Cash at bank and cash in hand includes cash and short term highly liquid investments with a short maturity of three months or less from the date of acquisition or opening of the deposit or similar account.

p) Creditors and provisions

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

q) Financial instruments

The charity only has financial assets and financial liabilities of a kind that qualify as basic financial instruments. Basic financial instruments are initially recognised at transaction value and subsequently measured at their settlement value with the exception of bank loans which are subsequently measured at amortised cost using the effective interest method.

r) Pensions

The charitable company operates a defined contribution pension scheme. The assets of the scheme are held separately from those of the charitable company in an independently administered fund. The pension cost charge represents contributions payable under the scheme by the charitable company to the fund. The charitable company has no liability under the scheme other than for the payment of those contributions.

2 Income from donations and legacies

	Unrestricted £	Restricted £	2020 Total £	Unrestricted £	Restricted £	2019 Total £
Gifts	134,402	1,400	135,802	133,951	2,954	136,905
Legacies	-	2,632	2,632	5,000	25,289	30,289
	<u>134,402</u>	<u>4,032</u>	<u>138,434</u>	<u>138,951</u>	<u>28,243</u>	<u>167,194</u>

3 Income from charitable activities

	Unrestricted £	Restricted £	2020 Total £	Unrestricted £	Restricted £	2019 Total £
3a Social care						
Access to work	-	13,428	13,428	-	12,941	12,941
Fees	2,870,857	-	2,870,857	2,786,035	-	2,786,035
Client income	75,225	-	75,225	74,904	-	74,904
Grants receivable	-	40,000	40,000	-	10,150	10,150
Sub-total for Social Care	2,946,082	53,428	2,999,510	2,860,939	23,091	2,884,030
3b Therapies						
Fees	654,936	-	654,936	744,795	-	744,795
Grants receivable	-	64,107	64,107	-	142,432	142,432
Sub-total for Therapies	654,936	64,107	719,043	744,795	142,432	887,227
3c Domestic abuse						
Fees	20,017	-	20,017	1,690	-	1,690
Grants receivable	-	413,410	413,410	-	406,016	406,016
Sub-total for Domestic abuse	20,017	413,410	433,427	1,690	406,016	407,706
3d Other charitable activities						
Fees	62,341	-	62,341	61,188	-	61,188
Sub-total for other charitable activities	62,341	-	62,341	61,188	-	61,188
3e Interpreter Now – discontinued						
Interpreter Now Income	-	-	-	38,853	-	38,853
Sub-total for Interpreter Now	-	-	-	38,853	-	38,853
Total income from charitable activities	3,683,376	530,945	4,214,321	3,707,466	571,539	4,279,004

4 Income from investments

	2020 Total £	2019 Total £
Interest receivable	17,680	2,740
Other rental income	10,505	64,122
	28,185	66,862

All income from investments is unrestricted.

5a Analysis of expenditure (current year)

	Charitable activities								2020 Total £	2019 Total £
	Raising funds £	Social care £	Therapies £	Domestic abuse	Other charitable activities	Interpreter Now discontinued £	Governance costs £	Support costs £		
Staff costs (Note 8)	119,953	1,529,175	325,207	264,433	36,171	-	37,712	627,134	2,939,785	2,853,433
Other staff costs	55,612	26,814	72,218	19,687	8,835	-	9,218	85,880	278,264	286,261
Travel and subsistence	4,214	36,023	131,793	9,413	5,172	-	2,676	26,788	216,079	194,028
Building costs	-	288,179	7,500	8,539	-	-	-	50,868	355,086	403,791
Running costs	5,182	40,385	51,560	12,964	1,395	-	15,368	128,319	255,173	250,542
Fundraising and marketing	57,084	-	1,673	18,785	-	-	-	20,660	98,202	101,789
Beneficiary costs	-	37,541	-	1,682	-	-	-	44	39,267	56,911
Other trading costs	-	4,179	25	-	-	-	610	18,674	23,488	36,968
Accountancy and audit	-	-	-	4,920	-	-	10,140	-	15,060	8,840
Legal and professional	-	-	-	-	-	-	2,952	21,678	24,630	69,890
Depreciation and impairment	-	-	18,834	1,150	-	-	-	111,124	131,108	108,339
	242,045	1,962,296	608,810	341,573	51,573	-	78,676	1,091,169	4,376,142	4,370,792
Support costs	43,647	829,288	98,205	109,117	10,912	-	-	(1,091,169)	-	-
Governance costs	3,147	59,794	7,081	7,868	786	-	(78,676)	-	-	-
Total expenditure 2020	288,839	2,851,378	714,096	458,558	63,271	-	-	-	4,376,142	
Total expenditure 2019	260,890	2,895,144	688,170	424,288	61,971	40,329	-	-		4,370,792

Notes to the financial statements

For the year ended 31 March 2020

5a Analysis of expenditure (prior year)

	Charitable activities								2019 Total £
	Raising funds £	Social care £	Therapies £	Domestic abuse	Other charitable activities	Interpreter Now – discontinued £	Governance costs £	Support costs £	
Staff costs (Note 8)	157,227	1,514,688	307,533	218,498	35,975	4,745	7,307	607,460	2,853,433
Other staff costs	33,897	26,097	68,618	16,641	8,121	30,023	48,409	54,455	286,261
Travel and subsistence	341	28,398	126,747	7,893	4,163	771	3,881	21,834	194,028
Building costs	–	244,860	7,500	5,607	–	–	–	145,824	403,791
Running costs	3,876	38,786	47,543	15,681	1,332	4,771	11,285	127,268	250,542
Fundraising and marketing	40,769	168	310	48,201	–	–	–	12,341	101,789
Beneficiary costs	–	56,850	–	61	–	–	–	–	56,911
Other trading costs	20	7,285	–	–	–	19	–	29,644	36,968
Accountancy and audit	–	–	–	–	–	–	8,840	–	8,840
Legal and professional	–	–	–	–	–	–	7,754	62,136	69,890
Depreciation and impairment	–	–	18,501	287	–	–	–	89,551	108,339
	236,130	1,917,132	576,752	312,869	49,591	40,329	87,476	1,150,513	4,370,792
Support costs	23,010	908,906	103,546	103,546	11,505	–	–	(1,150,513)	–
Governance costs	1,750	69,106	7,872	7,873	875	–	(87,476)	–	–
Total expenditure 2019	260,890	2,895,144	688,170	424,288	61,971	40,329	–	–	4,370,792

6 Other activities

On 30 April 2018, SignHealth sold 100% of its interest in InterpreterNow Ltd. The transaction generated an overall profit on disposal of £35,669.

7 Net income / (expenditure) for the year

This is stated after charging / (crediting):

	2020 £	2019 £
Depreciation	120,838	108,339
Loss/(gain) on revaluation/disposal of fixed assets	7,155	598,000
Operating lease rentals:	253,764	251,787
Auditor's remuneration (excluding VAT):		
Audit	10,250	9,500
(Over)/under-accrual for prior year audit	(2,400)	(2,800)
Other services	4,700	1,200
	<u>120,838</u>	<u>108,339</u>

8 Analysis of staff costs, trustee remuneration and expenses, and the cost of key management personnel

Staff costs were as follows:

	2020 £	2019 £
Salaries and wages	2,588,745	2,452,614
Redundancy and termination costs	2,000	46,339
Social security costs	223,955	217,650
Employer's contribution to defined contribution pension schemes	125,085	136,830
	<u>2,939,785</u>	<u>2,853,433</u>

The following number of employees received employee benefits (excluding employer pension costs and employer's national insurance) during the year between:

	2020 No.	2019 No.
£60,000 – £69,999	–	1
£70,000 – £79,999	2	–
£100,000 – £109,999	1	1
	<u>1</u>	<u>1</u>

The total employee benefits (including pension contributions and employer's national insurance) of the key management personnel were £367,310 (2019: £495,490). The Key Management Personnel includes the Trustees, the CEO, and all members of the Executive Leadership Team (Director of Operations, Director of Finance and Resources and Director of Communications and Fundraising).

SignHealth underwent a restructure of its leadership team in January 2019. Prior to this, the Key Management Personnel comprised the CEO, Director of Operations, Director of Finance and Resources, Director of Fundraising, Head of Human Resources, Head of Policy and Communications and the Governance and Performance Manager.

The charity trustees were neither paid nor received any other benefits from employment with the charity in the year (2019: £nil). No charity trustee received payment for professional or other services supplied to the charity (2019: £nil).

Notes to the financial statements

For the year ended 31 March 2020

8 Analysis of staff costs, trustee remuneration and expenses, and the cost of key management personnel (continued)

£2,676 of trustee expenses (2019: £3,752), for attendance at trustee meetings, was incurred or paid on behalf of 9 trustees (2019: 4) in the year.

9 Staff numbers

The average number of employees (head count based on number of staff employed) during the year was 123 (2019: 127).

The FTE number of employees for the year was 87 (2019: 90)

Staff are split across the activities of the charitable company as follows (head count basis):

	2020 No.	2019 No.
Raising funds	4	3
Social care	86	90
Therapies	10	10
Domestic abuse	11	10
Other charitable activities	1	1
Administration	10	12
Governance	1	1
	<u>123</u>	<u>127</u>

10 Related party transactions

In the year to 31 March 2020, SignHealth paid the Voluntary Organisations Disability Group (VODG) and the UK Council on Deafness (UKCOD) combined membership and other fees of £4,650 (2018-19: £3,064). The CEO of SignHealth is also a board member of both VODG and UKCOD.

There are no donations from related parties which are outside the normal course of business and no restricted donations from related parties.

The charity has taken out indemnity insurance on behalf of the Trustees.

11 Taxation

The charity is exempt from corporation tax as all its income is charitable and is applied for charitable purposes. Its charge to corporation tax in the year was:

	2020 £	2019 £
UK corporation tax at 19%	<u>-</u>	<u>-</u>

12 Tangible fixed assets**The charity**

	Leasehold land and buildings £	Fixtures and fittings £	Computer equipment £	Total £
Cost				
At the start of the year	194,683	87,268	188,200	470,151
Additions in year	-	14,207	-	14,207
Disposals	(7,188)	-	(584)	(7,772)
At the end of the year	187,495	101,475	187,616	476,586
Depreciation				
At the start of the year	75,503	58,055	73,117	206,675
Charge for the year	46,874	11,409	62,555	120,838
Disposals	-	-	(357)	(357)
At the end of the year	122,377	69,464	135,315	327,156
Net book value				
At the end of the year	65,118	32,012	52,300	149,430
At the start of the year	119,180	29,213	115,083	263,476

All of the above assets are used for charitable purposes.

13 Subsidiary undertakings (prior year)

InterpreterNow Ltd was sold on 30 April 2018.

14 Listed investments

	2020 £	2019 £
Fair value at the start of the year	100	100
Additions at cost	-	-
Disposal proceeds	-	-
Net gain/(loss) on change in fair value	-	-
	100	100
Cash held by investment broker pending reinvestment	100	-
Fair value at the end of the year	200	100
Investments comprise		
	2020 £	2019 £
Shares listed on the London Stock Exchange	100	100
Cash	100	-
Fair value at the end of the year	200	100

Notes to the financial statements

For the year ended 31 March 2020

15 Debtors

	2020 £	2019 £
Trade debtors	270,816	260,529
Other debtors	778	412
Prepayments and accrued income	78,446	235,467
	<u>350,040</u>	<u>496,408</u>

All of the group's financial instruments, both assets and liabilities, are measured at amortised cost. The carrying values of these are shown above and also in note 16 below.

16 Creditors: amounts falling due within one year

	2020 £	2019 £
Trade creditors	27,805	64,600
Taxation and social security	56,852	59,103
Other creditors	40,874	29,143
Accruals	145,405	198,077
Deferred income (note 18)	8,693	9,683
	<u>279,629</u>	<u>360,606</u>

17 Deferred income

Deferred income comprises income that has been billed in advance.

	2020 £	2019 £
Balance at the beginning of the year	9,683	143,959
Released to income in the year	(197,797)	(585,075)
Deferred in the year	196,807	450,799
Balance at the end of the year	<u>8,693</u>	<u>9,683</u>

18a Analysis of group net assets between funds (current year)

	General unrestricted £	Designated funds £	Restricted funds £	Total funds £
Fixed assets	200	149,430	-	149,630
Net current assets	2,490,311	830,227	37,601	3,358,139
Net assets at 31 March 2020	<u>2,490,511</u>	<u>979,657</u>	<u>37,601</u>	<u>3,507,769</u>

18b Analysis of group net assets between funds (prior year)

	General unrestricted £	Designated funds £	Restricted funds £	Total funds £
Fixed assets	100	263,476	–	263,576
Net current assets	3,163,552	–	57,234	3,220,786
Net assets at 31 March 2019	3,163,652	263,476	57,234	3,484,362

19a Movements in funds (current year)

	At 1 April 2019 £	Income & gains £	Expenditure & losses £	Transfers £	At 31 March 2020 £
Restricted funds:					
Domestic Abuse	28,750	408,743	(425,657)	–	11,836
Residential	6,751	44,032	(46,751)	–	4,032
Therapy	4,207	20,000	(20,000)	–	4,207
Brudenell Road	15,748	–	–	–	15,748
Deaf with Cancer	1,778	–	–	–	1,778
DCMS	–	48,774	(48,774)	–	–
Access to Work	–	13,428	(13,428)	–	–
Total restricted funds	57,234	534,977	(554,610)	–	37,601
Unrestricted funds:					
Designated funds:					
Fixed asset fund	263,476	–	(114,046)	–	149,430
Innovation fund	–	–	–	800,000	800,000
Two Deaf Foot fund	–	30,227	–	–	30,227
Total designated funds	263,476	30,227	(114,046)	800,000	979,657
General funds	3,163,652	3,841,500	(3,714,641)	(800,000)	2,490,511
Total unrestricted funds	3,427,128	3,871,727	(3,828,687)	–	3,470,168
Total funds	3,484,362	4,406,704	(4,383,297)	–	3,507,769

The narrative to explain the purpose of each fund is given in note 20c.

19b Movements in funds (prior year)

	At 1 April 2018 £	Income & gains £	Expenditure & losses £	Transfers £	At 31 March 2019 £
Restricted funds:					
Domestic Abuse	44,026	409,136	(424,412)	–	28,750
Residential	4,974	35,066	(33,289)	–	6,751
Therapy	–	49,207	(45,000)	–	4,207
Brudenell Road	15,748	–	–	–	15,748
Deaf with Cancer	1,778	–	–	–	1,778
Leeds Crisis Centre	1,500	(1,500)	–	–	–
DCMS	–	94,932	(94,932)	–	–
Access to Work	–	12,941	(12,941)	–	–
Total restricted funds	68,026	599,782	(610,574)	–	57,234
Unrestricted funds:					
Designated funds:					
Fixed asset fund	286,228	85,586	(108,338)	–	263,476
Total designated funds	286,228	85,586	(108,338)	–	263,476
General funds	3,514,320	3,899,212	(4,249,880)	–	3,163,652
Total unrestricted funds	3,800,548	3,984,798	(4,358,218)	–	3,427,128
Total funds	3,868,574	4,584,580	(4,968,792)	–	3,484,362

19c Purposes of restricted funds

Domestic Abuse (previously DeafHope)

SignHealth's domestic abuse service, previously called DeafHope, works with the Deaf survivors of domestic abuse and includes our work with with Deaf children and young people. It is funded by our fantastic supporters, who in 2019–20 include London Councils, the Home Office, The Police and Crime Commissioners for Kent and Sussex, Wandsworth Community Fund, Children in Need, the Community Foundation for Surrey, Mordaunt, Postcode Lottery Hertfordshire, Kent Community Foundation, Ovingdean Hall Foundation and the City Bridge Foundation.

The Home Office is providing a grant over 2 years to enable SignHealth to improve its capacity to respond to deaf victims of domestic abuse. £125,000 was awarded during the financial year 2019–2020, and was expended for the purpose for which it was awarded. Of the grant, £65,803 was spent on direct project and beneficiary costs, £8,496 on project overheads and £50,701 on staff costs.

£148,444 was awarded from the London Councils Grant Committee during the financial year 2019–2020 for SignHealth's domestic abuse service and was expended for the purpose for which it was awarded: for abused Deaf women and children in London. Of the grant, £12,792 was spent on direct project costs, £10,448 on project overheads and £125,204 on staff costs.

Residential

Support has kindly been received for specific work in our residential schemes, including support for training costs, and small refurbishment work at some of the homes and breaks with carers for those service users with the most complex mental health needs.

Therapy/Online Therapy

With support from the Bupa Foundation, Comic Relief, the Rayne Foundation and the Pixel Fund, we have been able to develop an online resource for Deaf people needing cognitive behavioural therapy (CBT).

19c Purposes of restricted funds (continued)**Brudenell Road**

Funding received for 'Brudenell Road' refers to a new housing scheme we are developing in Leeds.

Deaf with Cancer

Funding provides therapy for deaf people diagnosed with or recovering from cancer.

Leeds Mental Health & Leeds Crisis Centre

The Leeds Community Foundation has funded two projects: one to provide peer-to-peer support for Deaf people with mental health needs and another to provide crisis community support.

DCMS

The Department of Culture, Media and Sport provides a grant to support a domestic violence support service for Deaf women and girls in Greater Manchester. This grant ended on 31 October 2019.

Access to Work

SignHealth receives funds from the Department of Work and Pensions, to reimburse the cost of additional communications support workers employed on the SignHealth payroll, providing support to SignHealth staff in receipt of an Access to Work grant.

Purposes of Designated Funds and General Funds

The fixed asset fund represents the net book value of all assets held by the charity, excluding the Restricted funds.

The Two Deaf Foot designated fund represents funds raised for SignHealth by the Two Deaf Foot fundraising walk from John O'Groats to Land's End in summer 2020. Expenditure of these funds is overseen by a committee comprising the Two Deaf Foot walkers and members of the SignHealth Board of Trustees.

The innovation designated fund represents funds set aside by the Board of Trustees, to put towards initiatives that will further SignHealth's charitable objects but that represent a high financial risk. In the year 2020-21, the Board has decided to use these funds to support BSL Health Access, which provides on-demand access to qualified BSL interpreters online 24hours a day, for use in any health setting free of charge.

20 Operating lease commitments

The charity's total future minimum lease payments under non-cancellable operating leases is as follows for each of the following periods:

	Property		Equipment	
	2020	2019	2020	2019
	£	£	£	£
Less than one year	259,421	241,548	5,784	6,897
One to five years	-	43,000	8,703	14,307
	259,421	284,548	14,487	21,204

21 Legal status of the charity

The charity is a company limited by guarantee and has no share capital. The liability of each member in the event of winding up is limited to £1.