

Company number: 2610559
Charity number: 1011056

SignHealth

Report and financial statements
For the year ended 31 March 2021

**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	CAN Mezzanine, 49 – 51 East Road, London N1 6AH
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 Resigned 12 November 2020 Sara Clare Mitchell Andrew Sims Favaad Iqbal Resigned 12 January 2021 Christine McPherson Mark Perry Trudi Collier Tania Hudson Vanessa Longley Jaz Mann Appointed 22 July 2021 Amanprit Arnold Appointed 22 July 2021
Executive Leadership Team	James Watson-O'Neill Chief Executive Joyce Materego Director of Finance & Resources Christopher Reid Director of Operations Stacey Witter 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

Looking back to April 2020, we had just entered our first lockdown and many of us were trying to make sense of what was happening in the world around us. It's strange to think we first learned of masks, social distancing and lockdowns just over 18 months ago because as I write this now it feels quite normal. We have adapted to living with Coronavirus.

We started the year in a way nobody could have predicted – facing a major health crisis. A phenomenal amount of public health information was being shared to keep us all safe, yet it was inaccessible for so many of us. So we stepped up to support the health and wellbeing of Deaf people in a global pandemic. Like so many people, we did things we hadn't done before; produced daily Coronavirus briefings in British Sign Language (BSL) to fill the gap left by the government, invested in our staff and equipment to keep Coronavirus out of our services and continued to do all we could to improve the health and wellbeing of Deaf people. I'm immensely proud of the work SignHealth did to support our community. You can read more about our response to the COVID-19 pandemic in this report.

And we weren't the only people taking action to ensure essential Coronavirus information was accessible. We supported Lynn Stewart Taylor's #WhereIsTheInterpreter campaign against the absence of an in-person BSL interpreter at the government's daily Coronavirus press briefings. The campaign recently won a breakthrough decision at court - the government was found to be in breach of the Equality Act 2010 by failing to provide a BSL interpreter for a number of briefings.

We also made great progress with our BSL 999 campaign. Thousands of British Sign Language (BSL) users can't get the support they need during emergencies because services are not accessible. Currently the only way to contact 999 is through SMS and text relay services which we know doesn't work for many BSL users. I'm so grateful to you for sharing your experience of 999 services with us so that we, alongside RNID and UK Council on Deafness, could present it to Ofcom as evidence that the system wasn't working. I'm thrilled to say that Ofcom recently made a life-saving decision which means that 999 will have to be accessible in BSL via a Video Relay Service (VRS). Your stories made change happen. Yet another example of why our work at SignHealth is so vital.

In other recent news, I should say how honoured I was to receive an OBE in recognition of my work in equality, diversity and inclusion. This OBE isn't just for me though, it's for all of us who make the world a fairer place and continue the good fight as SignHealth does. Thank you to all of you.

It doesn't end here though. We have continued throughout the pandemic to address the everyday, ongoing, enduring health inequalities that existed pre-pandemic. We have also embarked on a significant journey for Sign Health to become a pro-active anti-racist organisation – you can find more information on page 13 of this report and we will shortly be sharing more detail in BSL and English on our website. There is still a lot to be done to address the health inequalities Deaf people face. And it isn't something we can do alone. We have big ambitions for the future to tackle those challenges, to partner with you and others to collectively bring about real change so there is equity for everyone. Because together we are stronger.

Jackie Driver, Chair

Trustees' Annual Report

The trustees present their report and the audited financial statements for the year ended 31 March 2021.

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

This was an exceptional year as SignHealth spent much of the year responding to the Covid-19 pandemic alongside delivering our three year plan. The pandemic significantly impacted lives and businesses in the UK as we all learned how to adapt to life with Coronavirus.

Covid-19 pandemic

SignHealth adjusted to working remotely and flexibly in response to Coronavirus. We invested heavily in our staff through a well-being programme and IT infrastructure. During the year, we received £101,181 of Covid-19 related grants to deliver essential work in response to the pandemic. We also continued to pay our staff when they contracted the virus or had to self-isolate and were unable to work. During the year, we lost 960.50 days to illness of which 346 days (36%) were attributable to Covid-19 and totalled £95,265 in payroll costs. In addition, we spent £38,021 on PPE and other Covid-19 related costs. We also made a decision to end our lease for the London office, saving £100,000 which will be used to further enable our people to continue working sustainably by investing in their well-being and IT capabilities.

In the absence of accessible information from the government, SignHealth took action to provide essential information in British Sign Language (BSL). We produced a wealth of resources on Covid-19 including a translation of government guidance before any other BSL resources were available. Since the start of the pandemic in the UK, SignHealth has produced 164 summaries in BSL of the government's Coronavirus briefings which are professionally filmed, subtitled, and uploaded to social media, providing vital access to health information for deaf people. In a survey conducted in August 2020, 96% of deaf respondents found these Coronavirus briefing summaries helpful. We felt it was an essential service to the Deaf community during this crisis.

Early on there were concerning signs that the pandemic and measures taken to limit the spread of the virus might disproportionately impact the Deaf community. We were concerned much of that impact would go unnoticed. In response SignHealth conducted two surveys to understand how the pandemic had affected access to healthcare and medication, as well as the impact on Deaf people's mental health. More than 1 in 3 Deaf people reported the pandemic had had a major negative impact on their mental health. The results are the only insights available in the UK into the impact of the pandemic on Deaf adults.

SignHealth played a significant role in ensuring trustworthy, official and accessible information about the Covid-19 vaccine was available to the Deaf community. Videos included an interview with an NHS doctor to find out more, a first-hand account of getting the vaccine from one of our outreach staff, and a video produced in partnership with a range of other charities to encourage Deaf people of colour to register for the vaccine.

Raising concerns and campaigning for accessible information

SignHealth continued to support Lynn Stewart-Taylor's #WhereIsTheInterpreter campaign which highlighted the absence of an in-person BSL interpreter at the government's daily Coronavirus press briefings. As part of the campaign a Deaf woman, Katie Rowley, took the government to Court over BSL access to the Covid-19 briefings and recently won a breakthrough decision from the courts - it was confirmed that the government was in breach of the Equality Act 2010 when it failed to provide a BSL interpreter for a number of briefings that took place. The government will have to evaluate its provisions for Deaf people in order to ensure they have equal access to information as the rest of the population.

We raised concerns about the Home Office's Violence Against Women and Girls survey which was inaccessible for Deaf people, and lobbied them in conjunction with Stay Safe East and Centre for Women's Justice. We also worked with the End Violence Against Women coalition on their Anti-Racism strategy to make sure it was accessible for deaf people.

Delivering BSL Health Access

SignHealth acted swiftly to set up BSL Health Access with InterpreterNow in April 2020 to provide 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 as shown by the thousands of calls the service received in its first few weeks of operation. Following the Board's decision to spend £800,000 of the charity's reserves on the service, we continued to work with colleagues at NHS England and NHS Improvement to see how this service could be publicly funded. SignHealth secured £420,000 from NHS England in December 2020 which was used to extend the service for 4 months to March 2021. During the year we provided 246,138 minutes of interpreter time to people accessing the BSL Health Access line. We are incredibly proud of what BSL Health Access achieved and hope that we can work together with the NHS to find a long-term sustainable solution.

Our Three-Year Plan

This year (2020/21) was the second year of our new Three-Year Plan and we have made good progress with the milestones and targets that were agreed across all three of our priority areas despite the disruptive effects of the Covid-19 pandemic. We continued to deliver our services, however, the focus was on ensuring that our staff's well-being and a sense of connectedness was not affected. We also worked hard to minimise the number of infections amongst our staff as well as our residents. Due to the effects of the pandemic, some of the milestones or timings related to the second year were delayed. Our key achievements and successes in 2020/21 are highlighted below.

Growing Our Services

Social care

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 tenants. 34 of our flats were full at the end of 2020/21, with three vacancies being held between August and September during the year, which was in line with our target of having no more than one vacancy, overall, in a year.

Residents in SignHealth care homes are supported by highly trained staff who are Deaf themselves or fluent BSL users and our staff liaise closely with community mental health professionals. We have a person-centred approach to our work - all residents are encouraged to achieve their individual potential and the support we offer is tailored to the requirements of each and every person.

During the year we continued working with Leeds CCG and NHSE to develop a new residential service in Leeds, which will provide supported living for four Deaf people who have previously lived in secure mental health hospitals. Due to the challenges presented by Covid-19, the opening of this new service has been carried forward into 2021/22.

We continued to use our new a Quality Assurance Framework for our care homes and outreach services and incorporate improvements identified into specific action plans which are monitored on ongoing basis. We also began to renegotiate our fees with local authorities to ensure that we are being properly paid for the services we provide.

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 tenant 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.

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 1,153 advocacy sessions (down from 1,245 in 2019/20), which is a 7% decrease over the year before. The decrease is attributable to the challenges presented by Covid-19. This service is delivered by trained advocates who offer a specialist service in British Sign Language.

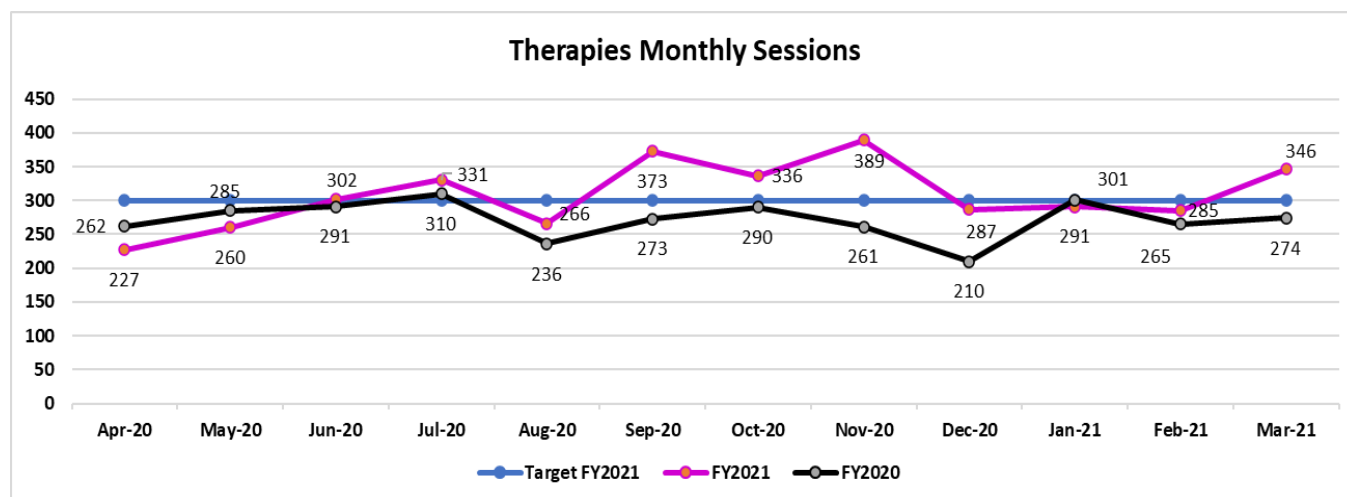
Therapies

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 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 471 referrals across the year (up from 441 in 2019/20) and carried out 4,159 sessions (compared to 3,845 in 2019/20), ensuring that Deaf people received therapy directly in BSL. In 2020/21 the service achieved outstanding recovery results with 52% of Deaf patients achieving recovery, compared to a national NHS target of 50%

We have continued to increase the take up of online therapy throughout 2020/21 and have continued development of new modules of cCBT courses on Depression and Anxiety working with creative professionals to enhance the accessibility of our course content.

Our therapists reached more people and conducted a higher number of sessions due to moving all sessions online following Covid-19 restrictions. This has been a valuable learning experience, demonstrating that it is possible to offer high quality therapy online as an alternative to in person sessions and is therefore a choice we will be continuing to offer in the future.



Domestic Abuse

SignHealth's Domestic Abuse service is the UK's only BSL-based service to help Deaf women, children and men who experience domestic abuse. Deaf people are more at risk of 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. One of

the effects of the Covid-19 pandemic was an increased number of domestic abuse cases. As a result, this year we have seen an increase in demand for our domestic violence support and healthy relationship courses. In 2020/21, the service received 146 new referrals in the year and supported 155 adult cases and numerous young people in workshops. The team also ensured information on staying safe and awareness of domestic abuse was offered to people across all the areas we work in.

Due to the pandemic we have had to move nearly all of our support online, which has proved to be largely successful, though there have been increased challenges in working with other professionals through this way, e.g. the Courts, Police and Housing agencies. We have gained valuable learning about providing online support, which had not been attempted on a large scale before.

We are working with the Ministry of Justice and the Home Office, with support from the Domestic Abuse Commissioner, to ensure that domestic abuse services are accessible to Deaf people across the country. We have not yet succeeded in gaining funding for a national service but we will continue to lobby for change.

SHOUT Crisis Text Service

We work in partnership with SHOUT to deliver a crisis text line service to Deaf people who need support in a mental health crisis. By texting the word DEAF to 85258 a Deaf person can be connected with a trained volunteer 24 hours a day who can support them to access emergency services or connect with someone nearby to get the help they need. During this second year of the service being/ operational we had 433 conversations (2020: 158) with Deaf people, the conversations growing every quarter. We are really proud of our partnership with SHOUT and we are looking for ways to promote this service even more widely over the year ahead.

New Services

Our Children and Young People (CYP) partnership programme with National Deaf Children's Society (NDCS), KOOTH and Sense involving new products for young BSL users as well as peer to peer schools support has been postponed into 2021/22 due to the pandemic.

Developing Our Profile

During the pandemic local authorities, community groups and NHS trusts across England linked to SignHealth's website as the source of Covid-19 information in BSL and that webpage was visited by over 30,700 people during the year. A major achievement in 2020/21 has been increasing our profile by 69% on social media – Facebook, Instagram and Twitter; for every 10 social media engagement in 2019/20, there were 17 in 2020/21. In March 2021, the closure of BSL Health Access service dominated engagement. This was also as a result of us providing essential Coronavirus information across our channels, particularly the BSL translations of the government Coronavirus press briefings. Covid-19 has had a positive impact on our ability to raise unrestricted funds through events, community giving, payroll and individual giving.

We launched a Charity of the Year partnership with SignVideo, a communication organisation focussed on giving video relay services access to the d/Deaf community. The three-year partnership runs from 2020 until 2023.

The partnership will raise unrestricted income for SignHealth, raise the profile of both SignHealth and SignVideo within the Deaf community and SignVideo will also support our fundraising via match fundraising. SignVideo are also encouraging staff to sign up to the 'payroll giving scheme', where staff can make a monthly donation through their wages.

It's a great opportunity for both SignVideo staff and interpreters to be a part of our working group, where they can build on their professional development by learning about mental health and domestic abuse issues.

We have also seen large increases in our KPIs across communications, especially during the early months of the first national lockdown. On Facebook we were reaching over 230,000 people every month during the first three months of the pandemic (up our average of 43,000/month in 2019/20). On Twitter we reached an average of 3x more people every month than the year before.

SignHealth also featured on the monthly popular BBC See Hear programme four times during the year, highlighting Deaf mental health advice and services, vaccine information and anti-racism efforts. We were also interviewed on ITV News and BBC News about Deaf people's access to health and the impacts of Covid-19. Our activities were featured in Civil Society News, highlighted by ACEVO and featured regularly in the well-read deaf blog Limping Chicken. Over the holidays we partnered with the well-respected brand Deaf Identity who donated a percentage of their profits to SignHealth.

Strengthening Our Organisation

We have started work on our EDI (Equality, Diversity and Inclusion) ambitions and our journey towards being an anti-racist organisation. With support from New Ways we have co-produced a statement on our anti-racism ambition and will be publishing this in full on our website in BSL and English very soon.

SignHealth's Anti-racism Ambition

We have a vision for a world where there are no barriers to good health and wellbeing for all Deaf people of all races and cultural backgrounds.

As a health charity, our anti-racism ambition is to remove race inequalities and barriers that affect the health and wellbeing of our deaf communities of colour. In particular, we focus on solving the challenges of the intersection of racism and audism

This work starts with us. We champion inclusivity and want to play our part providing leadership and knowledge to empower our community to work with us to make the change needed.

We are committed to publishing our gender, ethnicity and race pay gap statistics on our website and in our Annual Report from next year. We invested in anti-racism training for both the Executive Leadership Team and our Board of Trustees. This training will be rolled out to the rest of the organisation during the next financial year.

We have also made plans to re-join the Living Wage Foundation with an amount set aside for this in our budget for 2021/22. We carried out a review of all salaries across the organisation, with a plan to

raise all rates to the Living Wage levels. This was approved by the Board of Trustees in March 2021. The new rates will be implemented during 2021/22 and backdated to 1 April 2021.

We worked with Adapta, our IT consultants, to migrate our fundraising data successfully from Donorflex to Donorfy. Following this work, it was agreed to focus training our fundraising and communications staff to use the new CRM and get the best out of our new tool. We also continued with the work on Social Care services beginning to use Person Centred Software. Training and rollout of the Person Centred Software is underway and continues into 2021/22.

We have increased staff usage and familiarity with Office 365. We completed the migration of all shared documents to Office 365 in 2020/21 including our care home documents. We continue to make use of Workplace (internal Facebook) as an internal communication channel which has been instrumental in keeping our staff connected, particularly as it enables us to quickly and easily share BSL video content with one another.

We have started the implementation of cyclical upgrading and renewal of all software, hardware and office equipment across the whole of SignHealth. As last year, the renewal budget is now included in ongoing costs.

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 adapted the short term Covid-19 working group into a wider and permanent Leadership Team which supports progress through the organisation and succession planning.

We have piloted various leadership programmes over the last two years and are now developing an in-house programme, based on use of the Insights Discovery profile. We started rolling out specific leadership programme as part of the L&D strategy, including our successful mentoring scheme which is now reported to the Board.

We have also undertaken work to increase our fees 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 resulted in an increase in income for this and future financial periods which will ensure that SignHealth continues to be here for the d/Deaf community.

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:

Home Office

NHS England

London Councils

Kent Police County Council

City Bridge

Prudential Intl – John Skidmore Foundation

DD McPhail Foundation

City of London – London Relief Community Fund

Solace Women's Aid

Children In Need

Community Foundation for Surrey

Postcode Lottery Herts

Neighbourly

A K Lumsden Discretionary Trust

Surrey Community Fund

People's Postcode Trust

The Rayne Foundation

Ovingdean Hall Foundation

Sutton Coldfield Municipal Charities

BBC Children in Need

Friends at Work

The Charles Hayward Foundation

We would also like to say a huge thank you to all who supported SignHealth by taking part in our annual fundraising events. The events raised over £14,000 for our work with Deaf adults and children, despite many schools being closed for much of the year.

As in previous years, much of the support we have received over the year has been towards our award-winning Domestic Abuse Service, previously called DeafHope, run by Deaf people for Deaf people affected by domestic abuse. Our service helps to improve awareness, resilience and independence and consistently achieves 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. The service 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 and £154,822 from the Home Office.

As always, we are grateful to each and every one of you, our work was made possible through and with your generous help.

Financial Review

SignHealth made an overall deficit of £210,391 (2020: £23,407 surplus) in the year to 31 March 2021, against a budgeted surplus of £13,391 (2020: £13,825). The Board of Trustees authorised £800,000 of reserves to be spent on the BSL Health Access initiative; and the deficit includes adjustments for the grant of £420,000 received from NHS England plus unrealised gains from our investments of £223,082 less the £1,206,927 cost of providing access to the health services to the Deaf community during the Covid-19 pandemic. The underlying surplus is therefore higher at £353,354 than the value on the face of the accounts; highlighting that SignHealth has continued to make an operational surplus following the previous turnaround periods. The table below reconciles the deficit to the underlying surplus on our business as usual activities.

Deficit per SOFA	-£210,391
Less: NHSE Grant for BSLHA	-£420,000
Add: BSLHA Expenditure	£1,206,927
Less: Investments Net Gains	-£223,082
Underlying surplus	£353,454

The Covid-19 pandemic has put a spotlight on the instability of the charity sector with many charities witnessing a decrease in cash and income, and an increase in expenditure. A January 2021 article published by DEMOS and NPC reported that only a third of the charities had six months or more in reserves going into 2021. SignHealth is one of these charities. SignHealth's income and expenditure profile changed in comparison with the prior year. Income increased by £888,712 or 20%, in comparison with the year ended 31 March 2020. The difference was in part due to the BSLHA grant from NHS England and in part due to income generated from our residential care services fees uplift work which generated some extra income in the current year. Expenditure rose too by £1,334,096 or 30%. The difference was mainly due to the expenditure on the BSLHA initiative to which £1,206,927 of cost is attributed to.

SignHealth set another break-even budget for the 2021-22 year. However, the ongoing coronavirus pandemic and the effects of Brexit means that we proceed with caution as it can potentially cause financial stress to the charity, as it continues to do to many. SignHealth's services are all considered essential and the charity therefore continues to operate. The charity has also made a conscious decision to close our office in London on 31 March 2021 and reinvest the savings into staff well-being and a sense of connectedness which is critical for our sustainability. We continue to experience additional cost pressures on staff costs in managing sickness absence over budgeted levels, and in expenditure on PPE and supporting social distancing measures. The charity enters this period with a strong balance sheet with cash in bank and at hand £1,292,682 and accessible investments totalling £1,672,034, which put it in a very strong position to manage through the continuing pandemic restrictions. At the date of this annual report, the charity is forecasting a small surplus for the year ending 31 March 2022.

During the year, the charity gratefully received funds from NHSE ringfenced for our BSL Health Access initiative. These funds which totalled £420,000 enabled the charity to extend the time over which the service could be accessible to our beneficiaries to the end of the year. In addition, the charity received further funds towards the SignHealth Two Deaf Foot Fund. These funds have continued to be ringfenced in a designated fund in the accounts, and they total £34,258.

In April 2020, following the Board of Trustees approval of the new investment policy for the charity and appointed investment managers; the charity invested £1,462,690 over four months with Rathbones as the charity's investment managers. The charity reported £223,082 net gains and £11,565 income for the year.

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.

The Audit and Risk Committee held 4 meetings during the year to review our risk management framework, agreeing that our current process continues to be sound and fit for purpose. Our risk areas were not updated; however, covid-19 considerations were constantly reviewed throughout the year. These included BSL Health Access, health and well-being of staff and residents and PPE (in particular, the availability of clear face masks to enable both protection and communication through BSL).

Our current risk register incorporating the risks associated with our Three-Year Plan was developed in 2019/20 and approved by the Board of Trustees in March 2020. As mentioned earlier this is

updated on a quarterly basis by ELT, prior to going to the Audit and Risk Committee and Board meetings. It focuses on the following Risk Areas – all underpinned by Covid-19 considerations:

- 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), which remain the same as in the last financial year, and underpinned by Covid-19 considerations:

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 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 any investigations relating to alleged safeguarding incidents continue to be 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 for our policies and procedures. 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.

During the year, we also invested heavily in the well-being of our staff through extra supervision sessions and the launch of our health and well-being strategy.

Financial Management

For SignHealth, although the risk is low, the impact can be high if we do not mitigate this risk around 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 a small 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. 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 now have new procedures documented 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. During the year, we worked on our payroll processes to implement the improvements recommended by the auditors in the 2020 audit. We are proud to report that we have seen significant improvements during the year in this area and others.

Reserves policy

The charity's reserves policy articulates 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 (2021-22: £430,360), and a further five months' operating expenditure is sufficient to mitigate medium term risks (2021-22: £2,515,800). SignHealth therefore aims to hold a minimum of six months' operating expenditure (2021-22: £2,582,160).

At 31 March 2021, SignHealth's total unrestricted funds were £3,250,499 which equates to seven months' operating expenditure. SignHealth's general funds, excluding designated funds, were £3,133,511. We therefore are holding £551,351 more than our 6 months' operating expenditure. In the year 2021/22, we will invest in preparations for the high strategy work which will start after our current three year plan and in absorbing any financial turbulence which we may experience as a result of Covid-19 and Brexit after effects.

Investments

Rathbones our investment managers started investing in quarter 2 of the financial year, this affected the income received during the year (£11,565).

The equity holdings are held as share unit holdings. The trustees have adopted the ethical policy of the Rathbone Core Investment Fund for Charities (into which the Charity will invest) which is: no direct investments in companies manufacturing tobacco or tobacco products, or companies that derive more than 10% of their revenues from the manufacture of alcoholic beverages, armaments, gambling, high interest rate lending or pornography.

There is no difference between fair value and market value as the investments are either fixed interest, equities or cash deposits. Market valuation shows the fair value for these assets.

Going Concern

The Trustees have approved a break-even budget for 2021 -22 and have reviewed the projected cash flow to September 2022. Our reserves cover just over seven months' worth of expenditure. We also have budgeted £748,000 of fundraised income for FY2022, of which 71% is secured. Overall, our secured earned income constitutes 79% of our total income.

The trustees consider that there are no material uncertainties about the charitable company's ability to continue as a going concern. 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, 2020/21 was the second year of our Three-Year Plan, which was primarily focussed around the delivery of proposals and launching of new services, partnerships or areas of work. Next year (2021/22) is the third year of this plan and represents an extension of the year of consolidation and implementation due to the slowing effects of the pandemic.

At the September 2020 Board meeting, Trustees agreed that a full strategic planning process should be undertaken to develop a new Three Year Plan, being carried out by March 2022. It was agreed that the process which led to the development of a new High-Level Strategy was approved by the Board in July 2021 and a new Three-Year Plan (based on this new Strategy) to be approved by the Board in March 2022. Following further discussions by the Board, they have recently agreed that they want to be more ambitious than this and recognise that, without working with others, we are unlikely to achieve our charitable purposes. We have therefore started work on developing a new high level strategy with a number of other organisations, based on the Marmot Wider Determinants of Health. Due to the complexity of this the timescales for development of this strategy have been extended. The Board now plan to agree a new High Level Strategy in September 2022, with a new Three Year Plan for SignHealth (covering the period 2023/2026) being approved in March 2023. This will necessitate extending the existing Three Year Plan for an additional, fourth year into 2022/23. This does not present a problem as there will still be things to do on a number of the new services that are due to start in quarters 2 and 3 of Year Three (2021/22), such as Brudenell Road. Stretching milestones will also be developed across the other objectives, linked to the implementation of the new Thinking Caps fundraising initiative (which will be developed in Year Three) and further work on making SignHealth a BSL Proud and user led organisation.

In year 2021/22 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.

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.

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.

Our Board now consists of 10 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 current Board of Trustees is made up of seven Deaf and three 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 9 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.

Leadership and management

During the year, SignHealth had an Executive Leadership Team (ELT) with a majority of Deaf staff as its members.

We continued to further invest in Management and Leadership training with managers across SignHealth and this will continue across the new Three-Year Plan.

The Chief Executive continues to meet with all staff teams regularly throughout the year and has regular monthly Leadership Team meetings with all senior managers across SignHealth.

We continue to take part in a cross-charity mentoring scheme, run in partnership with Sense, RNID, NDCS, Scope, Diabetes UK, Thomas Pocklington Trust and RNIB.

We have reviewed the newly updated Charity Governance Code, which highlighted broad compliance and good practice against the principles whilst also identifying some areas where further work is necessary. Following the approval by the Board with the areas of development being formulated into an action plan. We have started to use the Charity Governance Code in our high level strategy work which use the Marmot's Review of the Social Determinants of Health model. The plans will be developed and presented to be approved in 2022/23 and will start in 2023/24.

Fundraising Regulations

During the year, SignHealth engaged in public fundraising, but did not use professional fundraisers or commercial participators. The charity continued to observe and comply with the relevant fundraising regulations and codes and is a member of the Fundraising Regulator. The charity received no complaints (2020: no complaints) relating to its fundraising practice.

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.

SignHealth launched a Shadow Trustee Scheme in early 2020. Unfortunately, the 2020 scheme was a victim of COVID-19 and was not able to continue in the way that we originally envisaged. The intention was that the scheme members would then be able to make an informed decision to apply to become Trustees, either at SignHealth or at other organisations. The scheme has been refreshed and relaunched for 2021/22, with five participants, and will include the opportunity to attend all Board meetings, have regular conversations with a Trustee mentor, receive training 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 regards to agenda items.

Details of related party transactions can be found in note 9 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 18 October 2021 signed on their behalf by

Jackie Driver
Chair of Trustees

Opinion

We have audited the financial statements of SignHealth (the 'charitable company') for the year ended 31 March 2021 which comprise the statement of financial activities, balance sheet, statement of cash flows and notes to the financial statements, including significant accounting policies. The financial reporting framework that has been applied in their preparation is applicable law and United Kingdom Accounting Standards, including FRS 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 2021 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

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

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

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

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 contained within the annual report. Our opinion on the financial statements does not cover the other information and, except to the extent otherwise explicitly stated in our report, we do not express any form of assurance conclusion thereon. Our responsibility is to read the other information and, in doing so, consider whether the other information is materially inconsistent with

Independent auditor's report

To the members of SignHealth

For the year ended 31 March 2021

the financial statements or our knowledge obtained in the course of 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 this gives rise to a material misstatement in the financial statements themselves. 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; and
- 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 directors 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.

Irregularities, including fraud, are instances of non-compliance with laws and regulations. We design procedures in line with our responsibilities, outlined above, to detect material misstatements in respect of irregularities, including fraud. The extent to which our procedures are capable of detecting irregularities, including fraud are set out below.

Capability of the audit in detecting irregularities

In identifying and assessing risks of material misstatement in respect of irregularities, including fraud and non-compliance with laws and regulations, our procedures included the following:

- We enquired of management and the board of trustees, which included obtaining and reviewing supporting documentation, concerning the charity's policies and procedures relating to:
 - Identifying, evaluating, and complying with laws and regulations and whether they were aware of any instances of non-compliance;
 - Detecting and responding to the risks of fraud and whether they have knowledge of any actual, suspected, or alleged fraud;
 - The internal controls established to mitigate risks related to fraud or non-compliance with laws and regulations.
- We inspected the minutes of meetings of those charged with governance.
- We obtained an understanding of the legal and regulatory framework that the charity operates in, focusing on those laws and regulations that had a material effect on the financial statements or that had a fundamental effect on the operations of the charity from our professional and sector experience.
- We communicated applicable laws and regulations throughout the audit team and remained alert to any indications of non-compliance throughout the audit.
- We reviewed any reports made to regulators.
- We reviewed the financial statement disclosures and tested these to supporting documentation to assess compliance with applicable laws and regulations.
- We performed analytical procedures to identify any unusual or unexpected relationships that may indicate risks of material misstatement due to fraud.
- In addressing the risk of fraud through management override of controls, we tested the appropriateness of journal entries and other adjustments, assessed whether the judgements made in making accounting estimates are indicative of a potential bias and tested significant transactions that are unusual or those outside the normal course of business.

Independent auditor's report

To the members of SignHealth

For the year ended 31 March 2021

Because of the inherent limitations of an audit, there is a risk that we will not detect all irregularities, including those leading to a material misstatement in the financial statements or non-compliance with regulation. This risk increases the more that compliance with a law or regulation is removed from the events and transactions reflected in the financial statements, as we will be less likely to become aware of instances of non-compliance. The risk is also greater regarding irregularities occurring due to fraud rather than error, as fraud involves intentional concealment, forgery, collusion, omission or misrepresentation.

A further description of our responsibilities is available on the Financial Reporting Council's website at: www.frc.org.uk/auditorsresponsibilities. This description forms part of our auditor's report.

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.

Jonathan Orchard (Senior statutory auditor)

17 November 2021

for and on behalf of Sayer Vincent LLP, Statutory Auditor
Invicta House, 108-114 Golden Lane, LONDON, EC1Y 0TL

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

For the year ended 31 March 2021

	Note	Unrestricted £	Restricted £	2021 Total £	Unrestricted £	Restricted £	2020 Total £
Income from:							
Donations and legacies	2	149,612	-	149,612	134,402	4,032	138,434
Charitable activities							
Social care	3a	3,187,968	35,812	3,223,780	2,946,082	53,428	2,999,510
Therapies	3b	727,876	75,500	803,376	654,936	64,107	719,043
Domestic abuse	3c	2,238	465,720	467,958	20,017	413,410	433,427
Other charitable activities	3e	73,277	101,181	174,458	62,341	-	62,341
BSL Health Access (BSLHA)	3e	-	420,000	420,000	-	-	-
Fundraising events		9,604	-	9,604	25,764	-	25,764
Investments	4	42,597	-	42,597	28,185	-	28,185
Other income		4,031	-	4,031	-	-	-
Total income		4,197,203	1,098,213	5,295,416	3,871,727	534,977	4,406,704
Expenditure on:							
Raising funds	5a	290,461	-	290,461	288,839	-	288,839
Charitable activities							
Social care		2,947,908	117,469	3,065,377	2,791,199	60,179	2,851,378
Therapies		524,483	85,500	609,983	649,989	64,107	714,096
Domestic abuse		15,685	460,846	476,531	28,234	430,324	458,558
Other charitable activities		55,841	5,118	60,959	63,271	-	63,271
BSL Health Access (BSLHA)		786,927	420,000	1,206,927	-	-	-
Total expenditure		4,621,305	1,088,933	5,710,238	3,821,532	554,610	4,376,142
Net income/(expenditure) before gains/(losses)		(424,102)	9,280	(414,822)	50,195	(19,633)	30,562
Gain on revaluation of investments		223,082	-	223,082	-	-	-
Net losses on disposal of assets		(18,651)	-	(18,651)	(7,155)	-	(7,155)
Net income/(expenditure) for the year	6	(219,671)	9,280	(210,391)	43,040	(19,633)	23,407
Net movement in funds		(219,671)	9,280	(210,391)	43,040	(19,633)	23,407
Reconciliation of funds:							
Total funds brought forward		3,470,168	37,601	3,507,769	3,427,128	57,234	3,484,362
Total funds carried forward		3,250,497	46,881	3,297,378	3,470,168	37,601	3,507,769

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 17 to the financial statements.

As at 31 March 2021

	Note	2021 £	2020 £
Fixed assets:			
Tangible assets	11	69,658	149,430
Investments	12	1,672,034	200
		<u>1,741,692</u>	<u>149,630</u>
Current assets:			
Debtors	13	673,079	350,040
Short term deposits		-	1,006,443
Cash at bank and in hand		1,292,682	2,281,285
		<u>1,965,761</u>	<u>3,637,768</u>
Liabilities:			
Creditors: amounts falling due within one year	14	(410,075)	(279,629)
			<u>(279,629)</u>
Net current assets		<u>1,555,686</u>	<u>3,358,139</u>
Total net assets		<u>3,297,378</u>	<u>3,507,769</u>
Funds:			
Restricted income funds	17	46,881	37,601
Unrestricted income funds:			
Designated funds		116,990	979,657
General funds		3,133,507	2,490,511
		<u>3,250,497</u>	<u>3,470,168</u>
Total unrestricted funds		<u>3,250,497</u>	<u>3,470,168</u>
Total funds		<u>3,297,378</u>	<u>3,507,769</u>

Approved by the trustees on 18 October 2021 and signed on their behalf by

J Driver
TrusteeT Hudson
Trustee

Statement of cash flows

For the year ended 31 March 2021

	Note	2021 £	£	2020 £	£
Cash flows from operating activities					
Net income/(expenditure) for the reporting period (as per the statement of financial activities)		(210,391)		23,407	
Depreciation charges		109,164		120,838	
Losses disposal of fixed assets		18,651		7,155	
Dividends, interest and rent from investments		(42,597)		(28,185)	
(Profit)/loss on the disposal of fixed assets		-		-	
(Increase)/decrease in stocks		-		-	
(Increase) in debtors		(323,039)		146,368	
Increase/(decrease) in creditors		130,446		(80,977)	
Net cash (used in)/provided by operating activities			(317,766)		188,606
Cash flows from investing activities:					
Dividends, interest and income from investments		42,597		28,185	
Proceeds from the sale of fixed assets		-		260	
Purchase of fixed assets		(48,043)		(14,207)	
Proceeds from sale of investments		6,136		-	
Purchase of investments		(1,462,690)		(100)	
Net (gains) on revaluation of investments		(223,082)		-	
Movement in cash held by investment managers pending reinvestment		7,802		-	
Net cash (used in)/provided by investing activities			(1,677,280)		14,138
Change in cash and cash equivalents in the year			(1,995,046)		202,744
Cash and cash equivalents at the beginning of the year			3,287,728		3,084,984
Cash and cash equivalents at the end of the year			1,292,682		3,287,728

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. (From 1 April 2021: CAN Mezzanine, 49 – 51 East Road, Old Street, London N1 6AH)

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 aftermath of COVID-19 pandemic ongoing during 2021, the charity expects its fundraising activities to continue 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 2021

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% (2020:4%) |
| ● Social care | 77% (2020:76%) |
| ● Therapies | 8% (2019:9%) |
| ● Domestic abuse | 10% (2020:10%) |
| ● Other charitable activities | 1% (2020: 1%) |

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% (2020:4%) |
| ● Social care | 77% (2020:76%) |
| ● Therapies | 8% (2019:9%) |
| ● Domestic abuse | 10% (2020:10%) |
| ● Other charitable activities | 1% (2020: 1%) |

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 2021

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	2021 Total	Unrestricted	Restricted	2020 Total
	£	£	£	£	£	£
Gifts	122,030	–	122,030	134,402	1,400	135,802
Legacies	–	–	–	–	2,632	2,632
CoronaVirus Retention Job Scheme	27,582	–	27,582	–	–	–
	<u>149,612</u>	<u>–</u>	<u>149,612</u>	<u>134,402</u>	<u>4,032</u>	<u>138,434</u>

Notes to the financial statements

For the year ended 31 March 2021

3 Income from charitable activities

	Unrestricted £	Restricted £	2021 Total £	Unrestricted £	Restricted £	2020 Total £
3a Social care						
Access to work	-	5,118	5,118	-	13,428	13,428
Fees	3,112,635	-	3,112,635	2,870,857	-	2,870,857
Client income	75,333	-	75,333	75,225	-	75,225
Grants receivable	-	30,694	30,694	-	40,000	40,000
Sub-total for Social Care	3,187,968	35,812	3,223,780	2,946,083	53,428	2,999,510
3b Therapies						
Fees	727,876	-	727,876	654,936	-	654,936
Grants receivable	-	75,500	75,500	-	64,107	64,107
Sub-total for Therapies	727,876	75,500	803,376	654,936	64,107	719,043
3c Domestic abuse						
Fees	2,238	-	2,238	20,017	-	20,017
Grants receivable	-	465,720	465,720	-	413,410	413,410
Sub-total for Domestic abuse	2,238	465,720	467,958	20,017	413,410	433,427
3d Grant income						
BSL Health Access (BSLHA) grant	-	420,000	420,000	-	-	-
	-	420,000	420,000	-	-	-
3e Other charitable activities						
Fees	73,277	-	73,277	62,341	-	62,341
Grants receivable	-	101,181	101,181	-	-	-
Sub-total for other charitable activities	73,277	101,181	174,458	62,341	-	62,341
Total income from charitable activities	3,991,359	1,098,213	5,089,572	3,683,378	530,945	4,214,321

4 Income from investments

	2021 Total £	2020 Total £
Interest receivable	16,362	17,680
Other rental income	14,670	10,505
Income from investments	11,565	-
	42,597	28,185

All income from investments is unrestricted.

Notes to the financial statements

For the year ended 31 March 2021

5a Analysis of expenditure (current year)

	Charitable activities								2021 Total £	2020 Total £
	Raising funds £	Social care £	Therapies £	Domestic abuse	Other charitable activities	BSLHA £	Governance costs £	Support costs £		
Staff costs (Note 7)	194,840	1,629,937	344,306	271,986	41,344	-	53,776	663,091	3,199,280	2,939,785
Other staff costs	11,206	60,825	61,092	24,439	4,664	-	-	142,073	304,299	278,264
Travel and subsistence	145	16,668	10,104	697	365	-	-	3,650	31,629	216,079
Building costs	-	261,156	7,685	8,516	1,386	-	-	39,535	318,278	355,086
Running costs	7,957	42,632	67,147	31,331	116	1,206,927	18,363	183,894	1,558,367	255,173
Fundraising and marketing	17,472	144	2,000	5,656	-	-	-	31,630	56,902	98,202
Covid-19 costs	2,687	655	-	-	-	-	-	34,679	38,021	-
Beneficiary costs	-	38,816	-	1,147	-	-	-	-	39,963	39,267
Other trading costs	5	4,030	385	-	-	-	-	20,940	25,360	23,488
Accountancy and audit	-	-	-	-	-	-	12,300	-	12,300	15,060
Legal and professional	3,816	2,451	-	-	-	-	3,312	7,096	16,675	24,630
Depreciation and impairment	-	647	12,598	1,926	-	-	-	93,993	109,164	131,108
	238,128	2,057,961	505,317	345,698	47,875	1,206,927	87,751	1,220,581	5,710,238	4,376,142
Support costs	48,823	939,848	97,646	122,058	12,206	-	-	(1,220,581)	-	-
Governance costs	3,510	67,568	7,020	8,775	878	-	(87,751)	-	-	-
Total expenditure 2021	290,461	3,065,377	609,983	476,531	60,959	1,206,927	-	-	5,710,238	
Total expenditure 2020	288,839	2,851,378	714,096	458,558	63,271	-	-	-		4,376,142

5a Analysis of expenditure (prior year)

	Charitable activities								2020 Total £
	Raising funds £	Social care £	Therapies £	Domestic abuse	Other charitable activities	Interpreter Now – discontinued £	Governance costs £	Support costs £	
Staff costs (Note 7)	119,953	1,529,175	325,207	264,433	36,171	–	37,712	627,134	2,939,785
Other staff costs	55,612	26,814	72,218	19,687	8,835	–	9,218	85,880	278,264
Travel and subsistence	4,214	36,023	131,793	9,413	5,172	–	2,676	26,788	216,079
Building costs	–	288,179	7,500	8,539	–	–	–	50,868	355,086
Running costs	5,182	40,385	51,560	12,964	1,395	–	15,368	128,319	255,173
Fundraising and marketing	57,084	–	1,673	18,785	–	–	–	20,660	98,202
Beneficiary costs	–	37,541	–	1,682	–	–	–	44	39,267
Other trading costs	–	4,179	25	–	–	–	610	18,674	23,488
Accountancy and audit	–	–	–	4,920	–	–	10,140	–	15,060
Legal and professional	–	–	–	–	–	–	2,952	21,678	24,630
Depreciation and impairment	–	–	18,834	1,150	–	–	–	111,124	131,108
	242,045	1,962,296	608,810	341,573	51,573	–	78,676	1,091,169	4,376,142
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

Notes to the financial statements

For the year ended 31 March 2021

6 Net income / (expenditure) for the year

This is stated after charging / (crediting):

	2021 £	2020 £
Depreciation	109,164	120,838
Loss/(gain) on revaluation/disposal of fixed assets	18,650	7,155
Operating lease rentals:	–	253,764
Auditor's remuneration (excluding VAT):		
Audit	10,400	10,250
(Over)/under-accrual for prior year audit	150	(2,400)
Other services	–	4,700
	<u>138,364</u>	<u>283,947</u>

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

Staff costs were as follows:

	2021 £	2020 £
Salaries and wages	2,802,924	2,588,745
Redundancy and termination costs	1,778	2,000
Social security costs	252,366	223,955
Employer's contribution to defined contribution pension schemes	142,212	125,085
	<u>3,199,280</u>	<u>2,939,785</u>

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

	2021 No.	2020 No.
£70,000 – £79,999	2	2
£100,000 – £109,999	1	1
	<u>3</u>	<u>3</u>

The total employee benefits (including pension contributions and employer's national insurance) of the key management personnel were £379,817 (2020: £367,310). 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).

The charity trustees were neither paid nor received any other benefits from employment with the charity in the year (2020: £nil). No charity trustee received payment for professional or other services supplied to the charity (2020: £nil).

Notes to the financial statements

For the year ended 31 March 2021

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

Nil trustee expenses (2020: £2,676), for attendance at trustee meetings, was incurred or paid on behalf of 0 trustees (2020: 4) in the year.

8 Staff numbers

The average number of employees (head count based on number of staff employed) during the year was 142 (2020: 123).

The FTE number of employees for the year was 97 (2020: 87)

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

	2021 No.	2020 No.
Raising funds	5	4
Social care	95	86
Therapies	10	10
Domestic abuse	13	11
Other charitable activities	1	1
Administration	17	10
Governance	1	1
	<u>142</u>	<u>123</u>

9 Related party transactions

In the year to 31 March 2021, SignHealth paid the Voluntary Organisations Disability Group (VODG) and the UK Council on Deafness (UKCOD) combined membership and other fees of £5,240 (2019–20: £4,650). 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.

10 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:

	2021 £	2020 £
UK corporation tax at 19%	<u>–</u>	<u>–</u>

11 Tangible fixed assets**The charity**

	Leasehold land and buildings £	Fixtures and fittings £	Computer equipment £	Total £
Cost				
At the start of the year	187,495	101,475	187,616	476,586
Additions in year	–	–	48,043	48,043
Disposals	(187,495)	(10,179)	(29,693)	(227,367)
At the end of the year	–	91,296	205,966	297,262
Depreciation				
At the start of the year	122,377	69,464	135,315	327,156
Charge for the year	46,874	11,790	50,500	109,164
Disposals	(169,251)	(9,772)	(29,693)	(208,716)
At the end of the year	–	71,482	156,122	227,604
Net book value				
At the end of the year	–	19,814	49,844	69,658
At the start of the year	65,118	32,011	52,301	149,430

All of the above assets are used for charitable purposes.

12 Listed investments

	2021 £	2020 £
Fair value at the start of the year	100	100
Additions at cost	1,462,690	–
Proceeds from sale of investments	(6,136)	–
Net gain/(loss) on change in fair value	223,082	–
	1,679,736	100
Cash held by investment broker pending reinvestment	(7,702)	100
Fair value at the end of the year	1,672,034	200
Investments comprise		
	2021 £	2020 £
Shares listed on the London Stock Exchange	1,679,736	100
Cash	(7,702)	100
Fair value at the end of the year	1,672,034	200

Financial investments are measured at fair value through income and expenditure.

Notes to the financial statements

For the year ended 31 March 2021

13 Debtors

	2021 £	2020 £
Trade debtors	474,652	270,816
Other debtors	133	778
Prepayments and accrued income	198,294	78,446
	<u>673,079</u>	<u>350,040</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 14 below.

14 Creditors: amounts falling due within one year

	2021 £	2020 £
Trade creditors	155,266	27,805
Taxation and social security	68,139	56,852
Other creditors	28,510	40,874
Accruals	132,757	145,405
Deferred income (note 15)	25,403	8,693
	<u>410,075</u>	<u>279,629</u>

15 Deferred income

Deferred income comprises income that has been billed in advance.

	2021 £	2020 £
Balance at the beginning of the year	8,693	9,683
Released to income in the year	(374,774)	(197,797)
Deferred in the year	391,484	196,807
Balance at the end of the year	<u>25,403</u>	<u>8,693</u>

16a Analysis of group net assets between funds (current year)

	General unrestricted £	Designated funds £	Restricted funds £	Total funds £
Fixed assets	1,672,034	69,658	–	1,741,692
Net current assets	1,461,473	47,332	46,881	1,555,686
Net assets at 31 March 2021	<u><u>3,133,507</u></u>	<u><u>116,990</u></u>	<u><u>46,881</u></u>	<u><u>3,297,378</u></u>

16b Analysis of group net assets between funds (prior 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	2,490,511	979,657	37,601	3,507,769

17a Movements in funds (current year)

	At 1 April 2020 £	Income & gains £	Expenditure & losses £	Transfers £	At 31 March 2021 £
Restricted funds:					
Domestic Abuse	11,836	465,720	(460,697)	–	16,859
Residential	4,032	30,694	(26,437)	–	8,289
Therapy	4,207	75,500	(75,500)	–	4,207
Brudenell Road	15,748	–	–	–	15,748
Deaf with Cancer	1,778	–	–	–	1,778
Corona Virus funds	–	91,181	(91,181)	–	–
Peter Sowerby	–	10,000	(10,000)	–	–
BSLHA	–	420,000	(420,000)	–	–
Access to Work	–	5,118	(5,118)	–	–
Total restricted funds	37,601	1,098,213	(1,088,933)	–	46,881
Unrestricted funds:					
Designated funds:					
Fixed asset fund	149,430	48,043	(127,814)	–	69,659
Innovation fund	800,000	–	(786,927)	–	13,073
Two Deaf Foot fund	30,227	–	–	4,031	34,258
Total designated funds	979,657	48,043	(914,741)	4,031	116,990
General funds	2,490,511	4,149,160	(3,502,133)	(4,031)	3,133,507
Total unrestricted funds	3,470,168	4,197,203	(4,416,874)	–	3,250,497
Total funds	3,507,769	5,295,416	(5,505,807)	–	3,297,378

The narrative to explain the purpose of each fund is given in note 17c.

17b Movements in funds (prior 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

17c 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 Deaf children and young people. It is funded by our fantastic supporters, who in 2020 -21 include London Councils, the Home Office, The Police and Crime Commissioners for Kent and Sussex, Charles Hayward Foundation, London Community Response Fund, Solace Women's Aid, Children in Need, the Community Foundation for Surrey, Postcode Lottery Hertfordshire, Ovingdean Hall Foundation and the City Bridge Foundation.

The Home Office had provided a grant over 2 years to enable SignHealth to improve its capacity to respond to deaf victims of domestic abuse. An extra £154,822 was awarded during the financial year 2020-2021, and was expended for the purpose for which it was awarded. Of the grant, £27,865 was spent on direct project and beneficiary costs, £36,148 on project overheads, 5,400 was spent on a CRM system and £84,818 on staff costs.

£148,444 was awarded from the London Councils Grant Committee during the financial year 2020-2021 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, £20,406 was spent on direct project costs, £9,161 on project overheads and £118,877 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.

17c Purposes of restricted funds (continued)**Therapy/Online Therapy**

With support from the Rayne Foundation, we have been able to continue the development of an online resource for Deaf people needing cognitive behavioural therapy (CBT).

Brudenell Road

Funding received for 'Brudenell Road' refers to a new housing scheme we are developing in Leeds which is now set to open in August 2021.

Deaf with Cancer

Funding provides therapy for deaf people diagnosed with or recovering from cancer. This fund remains unutilised which means we will carry it forward into financial year ending 31 March 2022

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. During the year, we received a further £4,030 to the fund. In the year 2020-21, the Board did not need use these funds to support BSL Health Access, since we were able to secure top-up funding from NHSE.

18 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	
	2021	2020	2021	2020
	£	£	£	£
Less than one year	-	259,421	-	5,784
One to five years	-	-	-	8,703
	-	259,421	-	14,488

19 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.