



Annual Report

2016 - 2017

*Enabling, Empowering and Enriching
the Lives of Carers*

Directors report for the year ended 31st March 2017

The Directors are pleased to present their report together with the financial statements for the charity for the year ended 31st March 2017. The financial statements comply with current statutory requirements, the memorandum and articles of association and the 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 (FRS102) (effective 1 January 2015).

REFERENCE AND ADMINISTRATION DETAILS OF THE CHARITY, ITS DIRECTORS AND ADVISERS

Directors (who are also the Charity's Trustees) who served during the period to the date of approval of the financial statements were:

June Hollands	Chair
Wondwossen Befikadu Kebede	Treasurer
Grace Hurd	Vice Chair
Joan Harris	
Mary Jacob	
Tanya St Clairs Knight	
Dorah Naisubi	
Eileen Jacus	Stepped down 01/07/2017

Chief Officer & Company Secretary

Verinder Mander

Registered Address:

Southwark Carers
3rd Floor, Walworth Methodist Church
54 Camberwell Road
London SE5 0EN

Tel: 020 7708 4497

Bankers:

The Co-operative Bank
Olympic House, 6 Olympic Court
Montford Street
Salford M5 2QP

Auditors:

Goldwins Limited
Chartered Accountants
75 Maygrove Road
London NW6 2EG

Chair's Report 2017

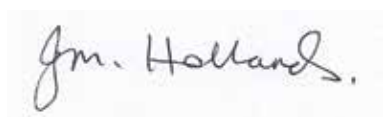
The last year has seen the staff and volunteers at Southwark Carers under enormous pressure. Primarily, this has been due to our main funders not confirming the level of funding for services in this year until February 2017. This has meant that services could only be planned on a 3 monthly basis, which has had an impact on our reach into the community.

Throughout this time the staff and volunteers have worked closely together to maintain stability and to ensure that there was a smooth transition during this difficult period. Despite the uncertainty the team have been working hard to maintain a renewed and redesigned service. Our services now fall under the banner of enabling, empowering and enriching the lives of carers.

The burden of caring does not rest with just one member of a family or friendship network, it extends to all members of the family. Recognising this we have developed our Whole Family Support offering, we have had a dedicated member of the team providing this support and have been able to provide personalised support to over 50 families whilst they care for their loved ones.

The team have strived to achieve targets set and with dedication and fortitude they have managed to be successful in their endeavours. This has been done against the backdrop of a reduced staffing team and reduced resources to provide services for carers.

On behalf of the Board I would like to thank all our staff, volunteers and members for their on-going support.

A handwritten signature in dark ink, reading "June Hollands". The signature is written in a cursive, flowing style.

June Hollands

Chair, Southwark Carers

Structure, Governance and Management

Southwark Carers is a company limited by guarantee (each member having a liability of £1) and a registered charity.

The policies of the charity are determined by the board, whose membership is listed on page 2

Appointment to Board

The charity is governed by a board of directors (the management committee) which meets quarterly. Directors are appointed by the board and serve for one year after which period they may put themselves up for re-election at the Annual General Meeting as prescribed in the Articles of Association. Officers are appointed by the board and elected annually. The board has the power to co-opt up to five non-voting members. At its quarterly meetings, the board agrees the overarching strategies and activities of the charity, including information, communications, fundraising activities, reserves policies and risk management.

Directors are elected to the board annually from members who have registered with the charity. The induction process for any new directors comprises initial meetings with the chair, existing directors and the chief executive. New directors are provided with an induction pack, which comprises a range of background information on the charity's history and recent activities and includes a copy of the Memorandum and Articles of Association, minutes of recent board meetings, recent accounts and a copy of the Charities Commission guidance documents for directors. On-going training to directors is provided as required through meetings, away days and courses. Directors are invited to attend all events that Southwark Carers hosts.

Throughout the year, the board continued to work to review and develop Southwark Carers and its services. The majority of the board, who give their time voluntarily, are carers, or former carers. Both the board and the staff work together to deliver support services for carers and to consult with them about their needs, when developing and planning future services and events.

Statement of Directors Responsibilities

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

Company law and the law applicable to charities in England and Wales requires the directors 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 its incoming resources and application of resources, including its income and expenditure, for that period. In preparing these financial statements the directors are required to:

- select suitable accounting policies and consistently apply them;
- observe the methods and principles of the Charities SORP;
- make judgements and estimates that are reasonable and prudent;
- state whether applicable accounting standards, have been followed subject to any material departures disclosed and explained in the financial statements; and
- prepare the financial statements on the going concern basis unless it is inappropriate to assume that the charity will continue to operate.

The directors are responsible for keeping proper accounting records, which disclose with reasonable accuracy at any time the financial position of the charity and enable them to ensure that the financial statements comply with the Companies Act 2006 and the Charity (Accounts and Reports) Regulations 2008 and the provisions of the trust deed. They are also responsible for safeguarding the assets of the charity and hence for taking reasonable steps for the prevention and detection of fraud and other irregularities. The directors confirm that, in the case of each of

the persons who are directors at the date of this report, the following applies:

- so far as each director is aware there is no relevant audit information (information needed by the Charity's auditors in connection with preparing their report) of which the Charity's auditors are unaware; and
- each director has taken all the steps that he or she ought to have taken as a director in order to make herself/himself aware of any relevant audit information and to establish that the Charity's auditors are aware of that information.

Remuneration Policy

Southwark Carers has a remuneration policy which sets out how all staff remuneration is set. The Directors review the policy and agree all increases in salary, including any cost of living increases, and approve any benefits for the staff team. Salary levels are set after an assessment of job descriptions and person specifications followed by a bench marking exercise that assesses pay rates and benefits associated with that type of role in the voluntary sector. Furthermore, recommendations made in ACEVO's "Good Pay Guide" (2013) are taken into consideration when salary levels are set by the Directors.

Risk Management

The directors have a duty to identify and review the risks to which the charity is exposed and to ensure appropriate controls are in place to provide reasonable assurance against fraud and error.

The charity is subject to review and audit by many bodies in respect of its company status, its charitable status and by its funding bodies. The board considers periodically the major risks to which the charity is exposed and has developed documented controls to mitigate those risks. Significant external risks to funding face all charities and Southwark Carers maintains a detailed business plan with regard to funding and its activities. Internal risks are minimised by internal control procedures covering all transactions.

These procedures are reviewed to ensure they meet the growing needs of the charity. During 2016/17 the charity continued to review and audit its practices to ensure the highest standards are maintained.

Objectives and Activities for the Public Benefit

The Directors have complied with the duty in section 17(5) of the Charities Act 2011 and referred to the guidance on public benefit published by the Charity Commission when reviewing the charity's aims and objectives and in planning its future activities.

The main object of the charity as defined in the memorandum and articles of association is:

"To alleviate the conditions of life of carers in necessitous circumstances, who care for the elderly, sick, disabled, mentally ill or otherwise infirm, by any means that is charitable".

Our Vision – all carers in Southwark will have access to the practical and emotional support they need and the recognition and influence they deserve.

Our Mission – to be an organisation run by and for carers, which provides practical and emotional support to increasing numbers of carers from the diverse communities of Southwark, and to obtain recognition of their invaluable contribution and influence policy in their interests.

Our Aims are to turn this vision and mission into a practical reality for carers across Southwark. We describe our aims under nine headings:

1. **Services** - to have a range of services accessible to carers across Southwark so that they are supported in all areas of need;
2. **Communication** - to communicate clearly with a range of people so that they are aware of our organisation and the needs of carers;
3. **Representation** - to be a voice for carers and to speak up for them at the places where decisions are made about them;
4. **Campaigning** - to put forward publicly the needs that carers have and to encourage and empower carers to speak up for themselves;
5. **Partnerships** - to connect with and support other organisations that can help us deliver our work, or who work with carers;
6. **Governance** – to be a well governed and managed organisation, so that everyone can have confidence in the things we do;
7. **Quality** - to deliver all of our services and activities within agreed standards, to make sure that they are the best they can be;
8. **Resources** - to have the appropriate level of resources available, so that we have what we need in order to deliver to carers; and
9. **Development** - to research new and better ways of working to make sure we continue to develop to meet the needs of carers.

Our Activities are organised under the following headings:

- Reducing Social Isolation
- Advice, Information and Support
- Counselling
- Health and Well Being
- Identifying Hidden Carers
- Financial Support

REDUCING SOCIAL ISOLATION



We run a number of activities, under the banner of Creative Crafts, sewing, knitting, crochet, card-making, jewellery making as well as our Film Club. These provide a life line for some carers, "the group is so valuable because it allows carers to connect", in a friendly safe non-judgmental environment, where their peers can empathise, and understand their issues and concerns, as well as provide them with emotional and practical support from their own personal experiences.

These groups provide carers with a much needed break from their caring role for a short time. The groups also allow carers to form new friendships and social networks. For example, carers from the film group are organising trips outside the events that we run so that they can meet up, relax and enjoy each others company. This social interaction amongst carers is vital as we know that addressing social isolation is a key concern for carers, whose friendships and networks of support are worn away by their caring role. Research by Newcastle University published on 15th August 2017 showed 8 out of 10 carers have felt lonely or socially isolated as a result of their caring role.

Although, not all our carers can access our workshops, social events, parties, information days and other activities, all are informed of them via email, text, website, and targeted phone calls.

Carers Outings

Lambeth County Fair
Southend on Sea



Crystal Palace Museum



Regents Park Open Air Theatre

Achievements and Performance

Monthly Groups

Film Club



Southwark Carers Film Club
Walworth Methodist Church
54 Camberwell Road
London, SE5 0EN

FEB
04

12:00 - 14:30

Aspiring actress Lora Meredith meets Annie Johnson, a homeless black woman at Coney Island and soon they share a tiny apartment.

Each woman has an intolerable daughter, though, Annie's little girl Sarah Jane, is by far the worse. Neurotic and obnoxious, Sarah Jane doesn't like being black; since she's light-skinned (her father was practically white), she spends the rest of the film passing as white, much to her mother's heartache and shame. Lora, meanwhile, virtually ignores her own daughter in a single-minded quest for stardom.



ADDitude Group
Walworth Methodist Church
54 Camberwell Road
London, SE5 0EN

AUG
09

11:00 - 12:30

Aimed at the 1 year olds of children with autism and behavioural problems, featuring regular speakers and training sessions.

Regular session members feel that they get a huge benefit to sharing and coming up with solutions to issues faced by parents.

Join our latest insight group for carers of people with autistic Spectrum Disorders, Aspergers, Attention Deficit Disorders (ADD) aka ADHD, and other demanding behavioural problems.

In recent months we've come into contact with an increasing number of carers of children with demanding behavioural problems, who each face common problems of stress, isolation, and difficulty finding appropriate activities, schools, or just a bit of relief. This group aims to provide some time out to talk about coping.

The group provides a great chance to meet other carers to share stories, advice or just generally have a chat and meet new people. We have regular speakers from relevant organisations and agencies, and in the forthcoming months will have trips and film screenings.



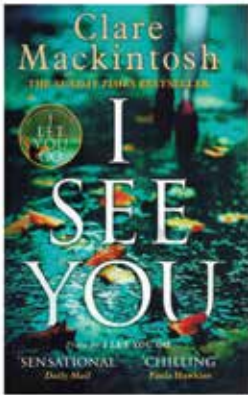
Southwark Carers Film Club
Walworth Methodist Church
54 Camberwell Road
London, SE5 0EN

NOV
23

12:00 - 14:30

Septuagenarian best friends Fred Ballinger and Mick Boyle are on vacation in the Swiss Alps, staying at a luxury resort. Fred is a retired composer of classical music; at the hotel, he is approached by an emissary for Queen Elizabeth II to perform his popular piece "Simple Song" at her husband Prince Philip's birthday concert.

Fred turns down the offer, claiming he is not interested in performing any more - although he still composes pieces in his head when alone. Mick is a filmmaker, and is working with a group of writers to develop the screenplay for his latest film, which he calls his "testament". Also with them is actor Jeremy Irons, who is researching for an upcoming role and frustrated that he is only remembered for his role as a robot. The hotel is inhabited by other quirky individuals, including a young musician, an overweight Diego Maradona, and Miss Universe.



Book Club
Walworth Methodist Church
54 Camberwell Road
London, SE5 0EN

AUG
31

17:00 - 18:30

When Zoe Walker sees her photo in the classified section of a London newspaper, she is determined to find out why it's there.

There's no explanation: just a grainy image, a website address and a phone number. She takes it home to her family, who are convinced it's just someone who looks like Zoe. But the next day the advert shows a photo of a different woman, and another the day after that. Is it a mistake? A coincidence? Or is someone keeping track of every move they make...

Southwark Carers have a number of e-readers which the book club selections loaded onto them, if you would like to borrow one of these please call the office and arrange to come and collect.

Films shown include: Youth, Christian, the Lion at World's End, Hairspray, Untouchable, Inside I'm Dancing, Brooklyn, The Duke Wore Jeans and Imitation of Life.

Our groups provide an opportunity for carers to drop in and learn a new skill, whilst relaxing

- Latin American Carers Group
- ADDitude Group
- Book Club
- Knitting and Nattering a great opportunity to catch up with my new friends.
- Sewing Group
- Jewellery Making
- Gardening Group - our garden has been described as an oasis by SlaM carers.

Other Events

Carers Café we held 3 events throughout the course of the year. The average attendance was 60 at each event. Christmas Party there were over 100 attendees.

Carers Identification Day at East Street Market over 150 Message In A Bottle kits handed out

ADVICE, INFORMATION & SUPPORT

Advice Service

The service provides information on welfare rights matters, benefit issues and representation in appeal matters. It helps with accessing other services in Southwark and helps in finding services to promote well-being.

Last year the Advice Service saw 266 carers.

We record the details of every carer that we speak to. The types of support we provided were:

- Health and social care services including referrals to social services, complaints against social services and liaising with the carer and social services by attending joint meetings;
- Health and wellbeing, including advising about counselling services, massage, positive thinking services, or referral to these services;
- Housing and Adaptations including helping carers to negotiate with Southwark Council to move house more quickly or completing medical report forms. We also try to sort out disputes between the carer and landlords, by writing letters on their behalf.
- Breaks from caring, including a referral to our in-house services and finding other ways of providing the carers with holidays/respite.



Big Energy Savings Network Energy Advice

The Big Energy Saving Network delivers an extensive programme of outreach to vulnerable consumers, focused on helping them reduce their energy costs and consumption.

Our energy champions were able to help carers to get the best deals from their energy supplier, better understand their gas or electricity bill, tariff options, the switching process and other support for families / vulnerable consumers including the Warm Home Discount Scheme, Energy Company Obligations (ECO) and helping customers onto Priority Service Registers.

As part of the project we trained 33 professionals throughout the Borough to provide energy advice sessions to their clients.

124 Carers were provided fuel poverty advice and support.

In addition, we supported a health promotion day, at Silverlock surgery. The event was specifically for patients who needed advice regarding keeping warm through winter, and taking care of themselves.



How we help

KS became the carer for her father who is a stroke victim which has left him with very limited mobility and a wheelchair user. Her father was previously cared for by his partner who had passed away.

KS asked for our assistance with a housing issue as the tenancy of the home her father lived in was only registered in the name of his partner and he had been informed he had to move.

KS's father was terrified of losing his home and all the memories he shared with his partner while living at the property.

We provided advice on the housing situation and signposted KS to Southwark CAB also providing a supporting letter to support the case. The house has been adapted for her father's mobility needs and KS was worried that there would not be another suitable property for her father to move into within the borough.

Southwark Carers continued to provide guidance and emotional support, KS had a meeting the Housing Officer who considered all the facts and supporting evidence. The outcome of the meeting was that the tenancy was transferred into her father's name and he was allowed to remain in the property.

Southwark Carers also signposted KS for a Carers Assessment and her father for a Needs Based Assessment which has resulted in a care package for her father to help manage the caring role.

Advocacy Service

The Advocacy Service provides support in dealing with social, health or housing services and problems that carers might face, in accessing services for themselves or the person they care for. The Advocacy Service aims to promote carers views and protect carers rights by letting their voice be heard.

The Advocacy Service saw 101 carers. Included within the provision of advocacy is:

- Health and social care, including going with carers to meetings with social services. This is mostly with carers with learning difficulties, who do not understand the meetings or what the implications or outcomes are;
- Money and benefits advice and support; and
- Housing and adaptations, including going to meetings with the carer, writing letters to the council on their behalf and appealing housing decisions.



ADVICE, INFORMATION & SUPPORT

Information Services

Southwark Carers provides an integrated set of information services, which aims to provide useful and accessible information direct to carers, staff and professionals, to enable them to support and value carers.

An Information pack is online for all carers to access. It contains a range of advice and contact details for further assistance.

All Carers have been given a plethora of information about the medical conditions of their cared for. Where the diagnosis is recent we will highlight where information can be sought about the condition and also help the carer to understand the condition. In providing information on specific conditions we are very careful not to stigmatise any one condition or increase fears of carers. However, usually, most carers are 'experts' on the medical conditions of their cared for, they are experts by experience as they advocate on their cared for's behalf, attend Doctors' appointments, administer medication. Often, the cared for's condition is only likely to deteriorate and therefore support can sometimes seem futile, as the caring burden will only increase with time.

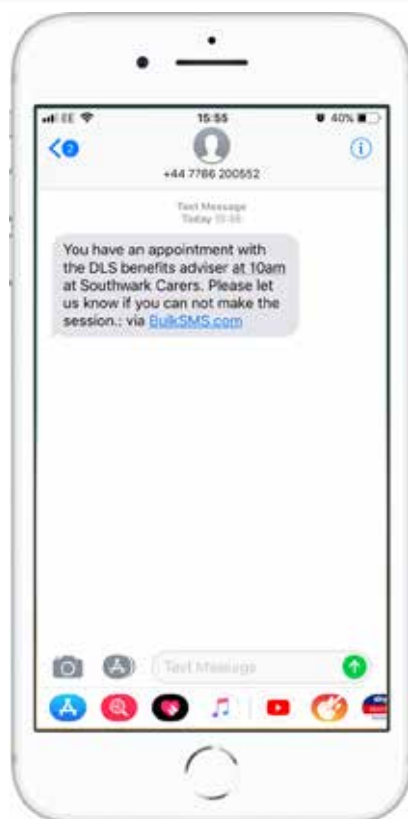
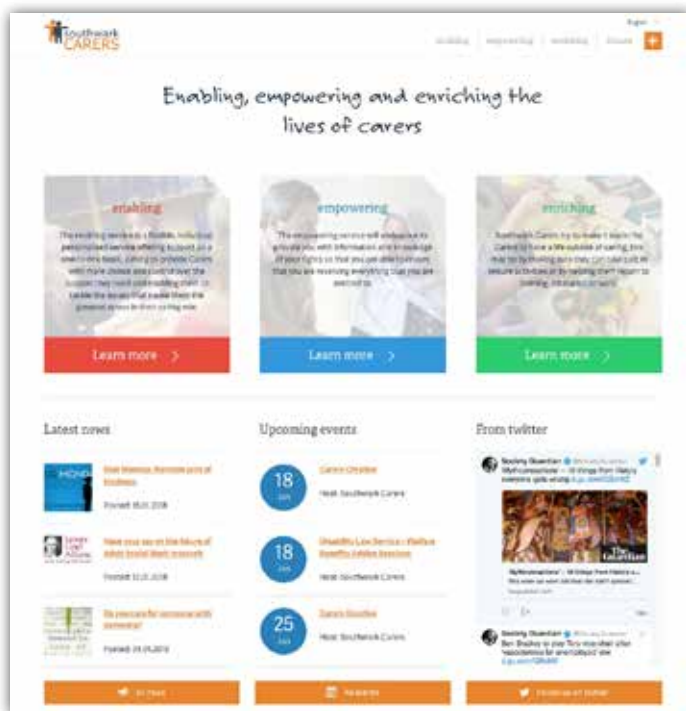
The Website includes the latest news for carers, current and past copies of our newsletter and details of upcoming events. There is also an area for professionals, to provide them with more information on supporting the carers. In the last year we had 11,674 visitors to our website.

We also sent 36 e-shots that reached 24,180 carers and 431 professionals. As part of our digital marketing and outreach campaign we sent 4 text shots and reached 5,200 carers.

We also sent out specialist communications reaching 646 mental health carers.

We have 1,895 followers on Twitter and have roughly 79 interactions per day with our content, over 28,000 contacts per year. We also created a second twitter account for the Health Development Team to update users about their location and drop-in times.

We use social media tools including Facebook to share information and news stories, each posting reaches on average 6 people per day, around 12,000 page views in the period 2016 – 2017.



HEALTH & WELLBEING

Counselling Service

The charity offers up to 13 weeks of free, confidential counselling. Clients can come for counselling about matters related to their caring role.

We also offer counselling to carers who are experiencing difficulties or problems, which are unrelated to caring. In addition, we do offer bereavement counselling. There were 1932 sessions offered and the service was accessed by 292 service users.



How we help

UU was referred to Southwark Carers via her GP shortly after the unexpected deportation of her husband to Nigeria. She was struggling to care for her three year old son who she described as having severe learning difficulties and a recent Autism diagnosis plus supporting her other three children all of whom were primary school age. UU had no family in the UK and few friends, she'd felt unable to accompany her husband believing the children's education and her son's medical treatment would be compromised. At assessment she vocalised strong feelings of anger and resentment that the authorities had 'taken him away' plus frustration her husband had hidden from her the extent of his visa difficulties.

UU described a deep sense of shame over what had happened and had been unable to share her feelings with the other mothers at school. Whilst UU made assurances that she would never consider harming herself because 'she was all the children had' it became apparent she was withdrawing from every day social interactions and becoming increasingly isolated.

At the outset, UU felt overwhelmed by the enormity of her circumstances and very alone. Counselling allowed UU to safely express the strong emotions engulfing her without fear of judgement or reprisal. Over 12 sessions she slowly began to come to terms with her situation, understanding it was not her fault and normalising the angry feelings she was experiencing. A key goal of therapy was to encourage UU to value self-care, initially this was done by honouring her commitment to attend her counselling sessions and to make time for herself in her busy schedule.

Helping UU recognise she was a deserving and worthwhile person made it possible to gradually reframe her perception 'self-care is selfish' to 'self-care makes me stronger'. In learning to value her status as a carer UU began to accept 'it is healthy to ask for help.' These shifts in mentality bolstered UU self-confidence. Towards the end of therapy she began re-engaging with her school community and to seek out services who could support her in caring for her son.

How we help

DD referred himself to Southwark Carers' counselling service, as he was in great need of support for the bereavements he had experienced. DD's two best friends had killed themselves in what appeared to be very sudden acts of violence against themselves. Three years prior to these events, DD's mother and grandmother had also died of long-term illnesses. The shock of the latest bereavements had led DD to not only feel traumatised at the loss of his close friends, but also re-experience intense grief relating to the death of his mother and grandmother. He had begun to isolate himself from positive social contact.

Upon initially presenting, DD was experiencing suicidal thoughts and feelings and voices in his head that were very disconcerting. He was experiencing a profound lack of sleep due to these distressing symptoms, which was making him feel extremely fatigued. Notably, there had been three previous suicide attempts by DD in the last 12 years – all of these attempts were sudden and with no pre-defined plan.

Our counsellor commenced by running a comprehensive risk assessment and generating a suicide prevention plan. This included re-engagement with statutory mental health services and chiefly his GP, and DD had been discharged from the CMHT. He was frustrated at the lack of impact his medication was having upon his troubling thoughts.

Upon establishing a shared crisis management plan with statutory mental health and DD, the counsellor worked with DD to establish some self-help coping strategies, including relaxation techniques and positive visualisation. These helped reduce the levels of anxiety and depression symptomatic of the recent bereavements, lack of sleep and persistent voices.

After DD was able to stabilise in his current emotional state, the counsellor was then able to work with DD on allowing the memory of his departed friends into the room, which facilitated recollections of positive times they had shared. In recognising the value of these relationships and what the two friends meant to him, DD was able to make a conscious decision as to how he would choose to remember them, and thus draw strength from this.

The counsellor was then able to facilitate a space for DD to talk about the death of his mother and grandmother. He was able to express the frustration and anger that had been surrounding their deaths, as DD felt as though he could have done more to help both of them, even though their conditions were terminal. DD moved towards being able to normalise his grief and verbally express his affection for his grandmother in a manner that he had not felt able to previously undertake.

Upon concluding our work with DD, he indicated feeling a reduced level of anger, anxiety and frustration. He was also able to report a reduction in suicidal thoughts and feelings, and he thus felt more able to seek help if needed in the future, as opposed to further isolating himself. DD was able to connect with some old friends and had begun to engage with statutory mental health services concerning the voices he was experiencing.

How we help

JJ referred herself for bereavement counselling at Southwark Carers, as she had experienced the death of her life partner on holiday. They had both gone swimming in the sea and he had drowned.

JJ was experiencing intense feelings of guilt and also chronic desperation as to how she might see her life unfolding in front of her. Although she did not experience any suicidal ideation, JJ did have reoccurring thoughts around whether life was worth living given that TT had died. Enmeshed with these thoughts was the reoccurring idea that JJ had somehow been responsible for TT's death. Upon returning from the trip away, JJ had not been able to attend work, and when presentation to Southwark Carers for her initial counselling assessment, was on long-term sick leave. JJ felt that talking to people about her grief would be overwhelming and that she was not capable of 'holding herself together' if she started talking about the depth of how she felt about TT's death.

The counsellor, following an initial in-depth assessment of emotional well-being and resilience, discerned that there was a high degree of shock and trauma experienced by JJ. The counsellor assisted JJ in contacting her GP to receive some specialist trauma intervention from Southwark Psychological Therapies Service. Once this was concluded, JJ reported a greater capacity to speak about her loss and also a more significant range of feelings she was experiencing.

The counsellor was then able to work with JJ on sharing her thoughts and feelings about the death of TT. This uncovered more guilt, and JJ seemed to be connecting the difficulties they had been having in their relationship to somehow contributing to TT's death. This cycle of distressed thinking was leading JJ into an increasingly depressed emotional situation. She had experienced problems eating and sleeping, and a decrease in her capacity to derive pleasure from social interaction. There was also a fear present around telling people about TT's death – firstly that it would continue to be overwhelming for her, but also that other people would be overwhelmed upon hearing it and blame JJ for TT's death.

Some cognitive exercises were employed by the counsellor, using an A-B-C model to discern JJ's underlying hypotheses around her thought patterns. From this set of exercises, Jane was able to work with the counsellor on establishing some alternative thought patterns, which featured less self-blame and enabled a wider view of the situation and the realisation that JJ was not responsible for TT's death.

As the self-blame began to shift, JJ experienced less depressive and anxiety related symptoms. She was then able to talk with her workplace and made a joint plan to return to work on a part-time basis. Using a staggered process to support her and make the transition sustainable. JJ also started to feel able to re-engage with her friends and family members, and seek emotional support from them.

Upon concluding the counselling, JJ felt more able to speak about her feelings and the overall experience, without the impending sense of the material being over-whelming. As the following months progressed, JJ did need to re-engage with her GP concerning flashbacks of the experience, which had begun to manifest. Southwark Carers also provided a short duration of counselling sessions to help JJ process these images and make sense of how much she missed TT.

Health Development Team

The Carers Health Development Team help carers access information and advice, advocacy, carers assessments, personal budgets, counselling, relaxing therapies, food vouchers, financial assistance and grants for essential purchases.

One of the most phenomenal impacts of the team was their ability to conduct home visits and see carers at their GPs surgeries. The Health Development Team were able to attend 35 home visits.

The Carers Health Development Team held 27 events in GP surgeries. We supported an open day at the Aylesbury Medical Centre, where visitors from various charities and organisations were on hand to offer help and advice to patients. We have also sustained regular interaction with PPGs throughout the Borough.

They also met with 7 health teams including representatives from all the major hospitals in the borough, community multi-disciplinary teams, the NHS GP focus group and the Southwark and Lambeth Pharmacies network.

The Health Development Team were also able to attend and speak at 105 events across Southwark and at national events representing the views of carers in Southwark. The events ranged from patient participation groups at local GPs surgeries to borough wide pharmacy meetings, community council meetings, CAS, Healthwatch, and voluntary sector partners, e.g. Age UK. On a national level we attended events ranging from Carers UK Campaign launches to Policy launches in parliament and national conferences.

Two waves of literature were dropped at all 40 GPs surgeries in the Borough

Carers United Project

We developed the work that we had done with the Challenging Behaviour Foundation, to support family carers dealing with challenging behavior. This is a peer support project where carers who have lived experience of dealing with challenging behaviour have been trained to provide emotional and practical support to carers dealing with challenging behaviour.

Case Study: A has been supporting Z for the last year. Z carers for her husband, who as a result of an assault has been left with severe injuries that have impacted on his hearing and sight. As a result of the injuries Z's husband is bed bound. The on going monthly emotional support A has offered to Z over the past year has been invaluable without Z could not have continued in her caring role. A has been a grounding force for Z allowing her to remain strong and resilient and continue in her caring role.

SAIL

We received 95 referrals from SAIL. Each of these individuals was supported by us. The support offered covered the full parameter of our services.

How we help

DF is 88 years old was referred to our service via a SAIL form. Southwark Carers made contact with her carer DT, after a conversation we signposted DT for a carers assessment. DT was referred to our counseling service to help manage DT's mental health.

DT asked us for help with advocacy support as she wanted her cared for person to be placed in a supported housing unit. DF's health was deteriorating and the level of care needed was placing a lot of strain on DT, who felt that better access to medical /professional help would be better for her mother."

Achievements and Performance

How we help

AF is 79 years old she was referred to our service via a SAIL form. Southwark Carers made contact with her carer SF, AF is Bangladeshi and has limited English, Southwark Carers have staff members able to speak a number of community languages and arranged for someone to go to the house to meet with the family and see what help was needed.

During the conversation it became apparent that the family were not receiving all available benefits and that the family should apply for Carers Allowance. Southwark Carers helped the family apply and maximise their benefits. We have also helped the family to contact adult social care in order to receive a carers personal budget.'

How we help

JK is 86 years old and was referred to our service via a SAIL form. Southwark Carers made contact with his carer AG who needed help with the caring role as she was due to have an operation and needed to access respite care in order to ensure the safety and care of JK.

Southwark Carers liaised with Occupational Therapy and Adult Social Care to arrange a needs based assessment and adaptations for the home to allow AG to get medical attention.

Southwark Carers advocated on the clients behalf to get a walk in shower / wet room fitted in the home to make it easier for JK to bathe and make it easier on AG's knees following the operation.'

How we help

ID and JD are both in their 80s and were referred to our service via a SAIL form. Southwark Carers made contact with their carer JV to see what help and support we could provide. JV explained that she would like some help with explaining her caring role to her employers and to create an emergency plan in case anything happened to her and ID and JD needed support from somewhere else.

JV explained that she also wanted some help with her low mood, the case worker discussed some of the services available through Southwark Carers and the local community including counselling, and support groups.' JV decided not to take up counselling at that point but took the information in order to consider options in future.'

WHOLE FAMILY SUPPORT

The Whole Family Support Service was developed as a result of our approach of supporting all carers in family not just the primary carer. Our service aims to provide a holistic package of support for families and young carers at times that suit them. Young carers and their families are offered one-to-one support, signposting, advocacy and fun activities for the whole family.

50 Families were worked with throughout the year.
302 Home Visits. Throughout the course of the year each family received an average of 6 home visits.
11 Family Activities with 279 attendees.



How we help

12 year old AB was caring for her mum who suffered from chronic depression before she joined our service a year ago. AB's main responsibilities were to look after her two younger siblings, ensuring they were up in time to get to school and helping mum with household chores like cooking and cleaning.

Within a couple of months of joining us, AB's grandmother was moved into the family home with a diagnosed terminal illness. This placed a huge amount of pressure on both mum and daughter. AB's grandmother was then provided with palliative care and AB's mother had to go through the process of telling her relatives – many of them estranged – that her mother was dying, discussing possible funeral arrangements and comforting her distressed daughter. Then, on one occasion, AB's mother was nearly killed by a palliative care nurse who gave her the wrong dose of medication and she had to be rushed to hospital.

AB's mother was sick with stress, which in turn was affecting AB's mental health. Back in hospital, doctor's realised they had made a mistake and had misdiagnosed AB's grandmother – she no longer had a terminal illness. AB's mother then had to call round all her relatives and tell them their mother wasn't dying. During this process we offered AB regular activities to get her out of the house and although AB wasn't keen on the idea of counselling we referred her mother to Southwark Carers counselling service. We then helped AB's mother to make a formal complaint to the NHS Trust which had treated her mother by helping her draft letters to the Trust and her local MP. After nearly a year, AB's mother received a formal apology from a senior member of her NHS Trust acknowledging that serious mistakes had been made in her mother's care.

AB's mother noted her daughter's improved wellbeing as a result of our service in a recent comment:

"Southwark Carers Family Support team have been very helpful to me and my family. My daughter attends activities at the service regularly and always comes home happy."

Achievements and Performance

How we help

CG's mother became physically disabled after suffering a stroke while CG and her two younger sisters were children. CG's mother cannot understand or speak fluent English and taking care of her mother and sisters, by default, became CG's responsibility.

CG's home life has put her under considerable stress in recent months, particularly as a result of the behaviour of one of her sisters who has a history of volatile behaviour and was arrested by the police twice this year. CG's second sister suffers from chronic physical illness.

Unfortunately, CG was required to attend two separate police stations to support her sister on the same day she was due to be interviewed for what she described as her dream job with a high powered city firm.

CG's more troubled sister did not want to join our social group, however, we referred her to CAMHS and invited her other sister to attend our group sessions.* We also wrote a supporting letter to CG's prospective employer in a last ditch attempt to 'save' her position. As a direct result the employer re-scheduled CG's interview and she got the role.

CG recently made the following comment:

"You are always there when we need you and you always know what to do, it's very reassuring! I was actually in tears when you wrote that letter to my employer. I got the job! They said it helped them understand my situation. I can't believe it, this was my dream job and I've been there 5 months already. I am so happy, thank you so, so much."

*CG has not been able to join our social group due to time commitments.



How we help

JR, MR and TR all care for their mother who suffers from a range of debilitating illnesses. For many years they were moved around temporary accommodation and at one stage suffered a house fire in which they lost all their belongings. Their mother referred them to Southwark Carers in 2016 but found it increasingly difficult to manage at home, particularly when it came to mobility and the need to get her two youngest children to school – something she desperately didn't want JR, MR and TR to do for fear that their own education would suffer. Mum referred herself to social services several times without success before explaining the situation to Southwark Carers. Staff then made – and chased – referrals to Occupational Therapy and Adult Social Services in order to ensure that that mum received the best possible care. As a result, mum's mobility issues were reviewed and support was put in place to help get the younger children to school.

Mum recently said:

"I really don't know how to thank u but Jehovah my father will bless u abundantly. Adult social services has approved a carer & they r gonna contact my landlord 4 approval key safe & safety alarm... they also contacted children services to ask 4 school run help... thanks & God bless."

How we help

AC helps her mother to care for her severely disabled brother and sister. AC referred herself to us in 2016 and she began to attend our group sessions on a regular basis. AC began to report much greater self confidence and a sense of fitting in for the first time after finding other young people in a similar position as her. After discussing career options, AC expressed a desire to go into teaching.

AC's mother is only able to communicate in broken English. Within a few months of joining us she had a breakdown and we were able to find her a local counsellor in her own language. We also contacted a local school to find AC an introductory role as a teaching assistant after completing her A-Levels at the end of this year.

AC says:

"My mum's 1st language isn't English. Southwark Carers got her a counsellor in her own language when she was going through a really rough time last year. And they're helping me to get work experience as a teacher because that's what I want to do as a career."

The group sessions at Southwark Carers allow me to socialise with other people my age who are in a similar situation as me. This makes you realise that your situation isn't as bad as you thought it was."

Achievements and Performance

How we help

SE went into depression after failing to get her expected exam results and get into her preferred university. She found socialising with other young people at our group sessions helped her to forget about her issues for short periods and de-stress. We also helped her draft several university applications and provided supporting statements to a number of these universities as well as short term work experience opportunities.

Around the same time, her mother confessed to being depressed and we referred her to Southwark carers counselling service. Both have since reported increased levels of wellbeing.

SE said:

"You're actually the greatest, you always go that extra mile, thank you!"



How we help

The C's are a family of six whose time living on top of each other has been exacerbated by instances of severe mental illness in both parents and children had taken its toll on relationships within the household. People were continuously falling out and educational attainment was suffering to the point that one child was excluded from college permanently. It emerged that the family had not been on holiday together for five years. We arranged for them to have a holiday outside London and organised a meeting with an alternative education provider to address the needs of the excluded child.

IDENTIFYING HIDDEN CARERS

It is pertinent to note that a key objective for the charity is to identify hidden carers and to provide them with appropriate support. Another key aim of our service is to raise awareness of carer issues to local health services, such as GP surgeries, local hospitals and clinics. It encourages health services to identify carers as early as possible and provide carer awareness training to health professionals across the borough.

We use innovative methods to spread our message that where an individual is looking after someone who is ill, elderly or frail that they need to recognise that their role is beyond simply that of caring for a loved one, that it is an unpaid role that saves the economy, £132 billion an average of £19,336 per carer who recognises and publicly acknowledges their role. We held a stall on East Street Market where we were able to engage with over 150 members of the public.

We designed a number of unique marketing materials which were placed at over 150 health settings in Southwark including GP surgeries, pharmacists, libraries and leisure centres. Our Z-fold leaflet was used as a best practice example across the Carers Trust network of over 140 centres. Other tools included identification cards in protective 'oystercard' type wallets and our emergency planning kits.

Carers notice-boards in GP surgeries have been regularly updated and are key in advertising services to carers in the borough. Southwark Carers leaflets are delivered regularly to GP surgeries in the borough as well as local pharmacies and other health service buildings.

We used the plays that we have developed to reach out to hidden carers, so that they could self identify and then access services and support available to them.

CARERS ASSESSMENTS

In April 2015 the Care Act 2014 came into effect. The Care Act enshrined a number of key principles for Carers. The Act was hailed as finally recognising a Carers right to an independent assessment of their needs. Implementation of the Care Act across the Country has varied. Southwark Council in its implementation of the Care Act decided that the process for carrying out Carers Assessments would be taken back in house and would be carried out by a specialist carers social work team. After the Carers Assessment process was taken in house by Southwark Council we referred 223 carers for an assessment.

Financial Support

It is with sadness that we report that this was the first year that we were not able to offer carers respite directly, as the funding for this ceased in October 2016, this function was retained by the Council. However, we were able to advocate on behalf of carers allowing them to access respite through Southwark Council.

Other Grants

As a result of the changes in funding experienced by us and taking into account the economic and political landscape of social care we continued to work with over 40 grant providers to secure grants for carers. In this financial year we were able to help carers purchase furniture including new beds, mattresses, and chests of drawers, wardrobes. We were also able to assist in the purchase of white goods including fridges, washing machines, and ovens. We also assisted in securing educational equipment for children with additional needs. In total we achieved additional income of £4,827.00 for our service users.

Y was awarded £250 for a new sofa. It was great to have somewhere comfortable to sit and relax in the evening.

N was awarded £200 for a new school uniform.

Working in partnership with Pecan the local foodbank we were also able to provide carers with food vouchers.

OTHER

We have made good progress in achieving our main aims.

Services - please see above where our activities and performance has been set out.

1. **Representation** – Southwark Carers has continued to represent the views of about 2,800 carers locally and has been a key voluntary sector presence in the Carers Strategy Forum which makes recommendations to commissioners of local health and social services. Our staff are also key speakers at public events about health and social care and carers, their rights and their needs.

Southwark Carers have regularly attended the All Party Political Group on Carers at the House of Commons, this has allowed us to represent the views of carers locally and nationally. Furthermore, we have been able to be at the cutting edge of policy developments and decision making.

Locally we have been asked on numerous occasions to represent the views of carers on consultations on local issues, ranging from planning through to the layout and design of local hospitals, local health networks and provision of services for all conditions.

2. **Campaigning** - we have continued to publicly campaign to put the needs and rights of carers into the public realm. We supported Carers Week and Carers Rights Day, and organised our own co-ordinated publicity campaigns, using newspaper advertising, posters and leaflets in health and community buildings, to help people across the community to identify as carers.

3. **Partnership Working** – during the year we have regularly communicated with or established new working relationships with a range of organisations, to help us in our work, including Community Action Southwark, Contact A Family, Cambridge House, Carers UK, SLaM and Southwark Resource Centre.

Healthwatch Southwark has worked with us since 2013. In the last year, we found several ways of working together in partnership which have been very successful. Healthwatch Southwark said:

We are very grateful for the support Southwark Carers have given us in the last year and we look forward to working together more in the future.

We created partnerships with businesses within the borough, in particular a number of local coffee shops who now display our literature and some of our events are hosted there. Harper Collins and Homebase continued their support of the carers centre by donating goods.

4. **Governance** – our Trustees met quarterly throughout the year and continued to consider all the issues relevant to delivering our services, managing staff and developing the organisation in order to continue to serve carers locally and to ensure that we continue to meet the needs of carers.

5. **Quality** – to ensure that we are able to deliver our services and be an organisation that operates at a consistently high level of quality. Work on Quality Assurance continued work, more specifically on Investors in People and Volunteers accreditation and ISO9001 this is with a view to ensuring that we are continually striving to provide an excellent service.

All staff received training on how to effectively use the Carers Star, an outcome tool specifically designed for those working with carers. The Carers Star is underpinned by a model of change that has five steps, cause for concern, getting help, making changes, finding what works and as good as it can be.

6. **Resources** - the Trustees have throughout the year maintained oversight of the financial and practical resources required to ensure that Southwark Carers continues into the future and have taken steps to ensure that we have an appropriate level of staff, financial reserves, and the practical resources for the office and carers centre.

7. **Development** – throughout the year we have considered different methods of working and the potential for new services that we could offer to carers, in order to support them as best we can. We did bid for funding for new services but were not always successful, however, each application that we did allowed us to develop ideas and look at providing innovative ways of supporting carers, for example, an online counselling service. Our successful applications have allowed to develop our whole family support offering.

We will continue to consider new sources of funding to extend and develop more services for carers of all ages, in the year ahead.

Reserves Policy

The purpose of the policy is to ensure that Southwark Carers are able to meet their contractual obligations and finance future expansion of the organisation. The Directors have decided to set aside funds not committed or invested in tangible assets. The level of free reserves (excluding restricted funds) is reviewed annually by the directors. The directors consider that the most appropriate level of free reserves should be between £177,250 3 months running costs and £354,500 6 months running costs. Unrestricted reserves at 31st March 2017 were £132,966.

The present level of unrestricted reserves equates to 2.5 months running costs. However, it falls short of the lower threshold of £177,250. Therefore, the strategy will be to continue to act prudently in relation to the organisations reserves. However, Southwark Carers will assess the viability of reinvesting funds into services where there is a demonstrable need that cannot be met through other sources of funding.

Plans for future periods

We look forward to diversifying our income and our funding streams further by making applications to national and local trusts. We look forward to working with Southwark Council in developing future services for Carers.

We look forward to developing and strengthening our local and national partnerships in order to develop models of best practice, around all services for carers, for example emergency planning.

The Mary Marshall Social Enterprise model has continued to be developed throughout this year. We have made more products and we have received donations for products that we have made.

We continued to extend the reach of our services by offering activities at the weekend. We aim to further increase the reach of our services by offering more events outside the Monday to Friday 9 to 5 spectrum. For example, our activities are extending their reach, and on the first Saturday of the month we have a film show.

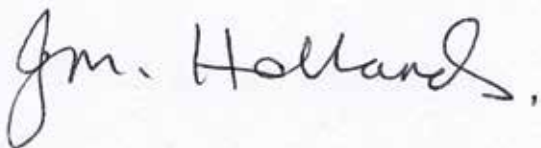
We started working with a local musician in order to write an anthem / theme song for Southwark Carers. So that we could extend our reach to carers through a different medium and also to reach out to carers of all ages.

Financial Review

The total income for the year was £474,113 in 2017 compared to £583,909 in 2016. The charitable expenditure decreased from £511,613 in 2016 to £464,466 in 2017.

This report has been prepared in accordance with the special provisions relating to small companies within Part 15 of the Companies Act 2006.

Approved by the Directors and Signed on their behalf by:



June Hollands, Chair. 22nd December 2017

INDEPENDENT AUDITORS REPORT

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Independent Auditors' Report

We have audited the financial statements of Southwark Carers for the year ended 31st March 2016 which comprise the Statement of Financial Activities, the Balance Sheet, Statement of Cash flows and the related notes. The financial reporting framework that has been applied in their preparation is applicable law and United Kingdom Accounting Standards (United Kingdom Generally Accepted Accounting Practice).

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

Respective responsibilities of trustees and auditors

As explained more fully in the Trustees' Responsibilities Statement, 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. Our responsibility is to audit and express an opinion on the financial statements in accordance with applicable law and International Standards on Auditing (UK and Ireland). Those standards require us to comply with the Auditing Practices Board's (APB's) Ethical Standards for Auditors.

Scope of the audit

An audit involves obtaining evidence about the amounts and disclosures in the financial statements sufficient to give reasonable assurance that the financial statements are free from material misstatements, whether caused by fraud or error. This includes an assessment of:

whether the accounting policies are appropriate to the charitable company's circumstances and have been consistently applied and adequately disclosed;
the reasonableness of significant accounting estimates made by the trustees;
and the overall presentation of the financial statements.

In addition, we read all the financial and non-financial information in the Trustees' Annual Report to identify material inconsistencies with the audited financial statements and to identify any information that is apparently materially incorrect based on, or materially inconsistent with, the knowledge acquired by us

in the course of performing the audit. If we become aware of any apparent material misstatements or inconsistencies we consider the implications for our report.

Opinion on financial statements

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 2016 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; and
- have been prepared in accordance with the requirements of the Companies Act 2006.


Opinion on other matters prescribed by the Companies Act 2006

In our opinion 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.

Matters on which we are required to report by exception

We have nothing to report in respect of the following matters where 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.



Anthony Epton (Senior Statutory Auditor) for and on behalf of
Goldwins Limited, Statutory Auditor
Chartered Accountants 75 Maygrove Road, West Hampstead London NW6 2EG
22nd December 2017

Statement of financial activities (including an income and expenditure account) for the year ended 31st March 2017

	Notes	Unrestricted	Restricted	2017 Total	2016 Total
		£	£	£	£
INCOME FROM					
Donations and Legacies	3	4,185	-	4,185	2,796
Charitable Activities	4				
- Counselling		-	16,205	16,205	16,205
- Volunteering		-	-	-	27,000
- Carer's Health Development		-	-	-	181,500
- Financial Support for Carers		345,626	-	345,626	255,229
- Advice and Information		103,554	-	103,554	101,064
- Enabling, Empowering and Enriching		-	-	-	-
Other trading activities		43	-	43	115
Investments	5	-	-	-	-
Other		-	-	-	-
TOTAL INCOME		453,408	16,205	469,613	583,909
EXPENDITURE ON					
Raising funds	6	1,143	-	1,143	1,586
Charitable activities	6				
- Counselling		-	29,260	29,260	11,963
- Volunteering		-	8,191	8,191	49,165
- Carer's Health Development		-	3,860	3,860	180,137
- Financial support for Carers		-	1,450	1,450	6,661
- Advice and information		289,538	-	289,538	255,229
- Enabling, Empowering and Enriching		131,024	-	131,024	6,872
Other		-	-	-	-
TOTAL EXPENDITURE		421,704	42,762	464,466	511,613
NET INCOME / (EXPENDITURE) BEFORE NET GAINS / (LOSSES) ON INVESTMENTS		31,703	(26,557)	5,147	72,296
Net gains / (losses) on investments		-	-	-	-
NET INCOME / (EXPENDITURE) FOR THE YEAR	7	95,517	(23,221)	72,296	(170,208)
Transfers between funds		(19,753)	19,753		
NET INCOME / (EXPENDITURE) BEFORE OTHER RECOGNISED GAINS AND LOSSES		11,950	(6,804)	5,147	72,296

	Notes	Unrestricted	Restricted	2017 Total	2016 Total
Net movement in funds		11,950	(6,804)	5,147	72,296
Reconciliation of funds:		-	-	-	-
Total funds brought forward		116,516	17,811	134,327	62,031
Total funds carried forward		<u>128,466</u>	<u>11,008</u>	<u>139,474</u>	<u>134,327</u>

All of the above results are derived from continuing activities. 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.

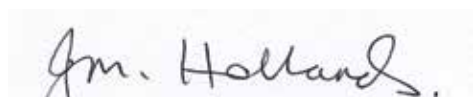
The notes on pages 26 to 39 form part of these financial statements.

Balance Sheet as at 31st March 2017

		2017		2016	
	Notes				
FIXED ASSETS					
Tangible assets	12		9,338		6,246
			9,338		6,246
CURRENT ASSETS					
Debtors	13	8,254		11,830	
Cash at bank and in hand		133,615		125,933	
		141,869		137,763	
LIABILITIES					
Creditors: amounts falling due within one year	14	11,733		9,682	
NET CURRENT ASSETS / (LIABILITIES)			130,136		128,081
TOTAL ASSETS LESS CURRENT LIABILITIES			139,474		134,327
Creditors: amounts falling due after one year			-		-
NET ASSETS EXCLUDING PENSION ASSET / (LIABILITY)			139,474		134,327
Defined benefit pension scheme asset / (liability)			-		-
TOTAL NET ASSETS / (LIABILITIES)			139,474		134,327
THE FUNDS OF THE CHARITY:					
Restricted income funds	17		11,008		134,327
Unrestricted income funds:	17				-
Designated funds		-		-	134,327
General funds		128,466		116,516	
TOTAL UNRESTRICTED FUNDS			128,466		116,516
TOTAL CHARITY FUNDS			139,474		134,327

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

The financial statements were approved by the Directors on the 22nd December 2017 and signed on their behalf by:-



Registered Company Number: 04146495
Registered Charity Number: 1085300

June Hollands (Chair)

Notes to the financial statements

1. ACCOUNTING POLICIES

(a) Basis of Accounting

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 - effective 1 January 2015) - (Charities SORP FRS 102) and the Companies Act 2006.

The charitable company meets the definition of a public benefit entity under FRS 102. Assets and liabilities are initially recognised at historical cost or transaction value unless otherwise stated in the relevant accounting policy or note

(b) Reconciliation with previously Generally Accepted Accounting Practice (GAAP)

In preparing the accounts, the trustees have considered whether in applying the accounting policies required by FRS 102 and the Charities SORP FRS 102 a restatement of comparative items was required. The transition date was 1 April 2014.

No restatement was required.

(c) Going concern

The trustees consider that there are no material uncertainties about the charitable company's ability to continue as a going concern. Key judgements that the charitable company has made which have a significant effect on the accounts. 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.

(d) Income

Income is recognised when the charity has entitlement to the funds, any performance conditions 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 performance conditions attached to the grants have been 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.

(e) Donations of gifts, services and facilities

Donated professional services and donated facilities are recognised as income when the charity has control over the item or received the service, any conditions associated with the donation have been met, the receipt of economic benefit from the use by the charity of the item is probable and that economic benefit can be measured reliably. In accordance with the Charities SORP (FRS 102), volunteer time is not recognised so refer to the trustees'

annual report for more information about their contribution.

On receipt, donated gifts, professional services and donated facilities are recognised on the basis of the value of the gift to the charity which is the amount the charity would have been willing to pay to obtain services or facilities of equivalent economic benefit on the open market; a corresponding amount is then recognised in expenditure in the period of receipt.

(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.

(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. However, the cost of overall direction and administration of each activity, comprising the salary and overhead costs of the central function, is apportioned on the basis which are an estimate, based on staff time, of the amount attributable to each activity.

Where information about the aims, objectives and projects of the charity is provided to potential beneficiaries, the costs associated with this publicity are allocated to charitable expenditure.

Where such information about the aims, objectives and projects of the charity is also provided to potential donors, activity costs are apportioned between fundraising and charitable activities on the basis of area of literature occupied by each activity.

(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 £550. 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.

No depreciation charge on the building is made on the grounds that it would be immaterial because the estimated remaining useful economic life is expected to be more than 50 years.

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:

Fixture and Equipment	33 1/3 % p.a straight line
Computers	33 1/3 % p.a straight line
Buildings and Maintenance	33 1/3 % p.a straight line

(l) 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.

(m) 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. Cash balances exclude any funds held on behalf of service users.

(n) 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.

(o) 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.

(p) Pensions

The charity operates stakeholder pension scheme.

2. DETAILED COMPARATIVES FOR THE STATEMENT OF FINANCIAL ACTIVITIES

	Unrestricted	Restricted	2016 Total
Income from:			
Donations and legacies	2,796	-	2,796
Charitable activities:			
- Counselling	-	16,205	16,205
- Volunteering	-	27,000	27,000
- Carers Health Development	-	181,500	181,500
- Advice and information	255,229	-	255,229
- Enabling, Empowering and Enriching	101,064	-	101,064
Other trading activities	-	-	-
Investments	115	-	115
Other	-	-	-
Total Income	359,204	224,705	583,909
Expenditure on:			
Raising funds	1,586	-	1,586
Charitable activities:			
- Counselling	-	11,963	11,963
- Volunteering	-	49,165	49,165
- Carers Health Development	-	180,137	180,137
- Financial support for Carers	-	6,661	6,661
- Advice and information	255,229	-	255,229
- Enabling, Empowering and Enriching	6,872	-	6,872
Other	-	-	-
Total expenditure	263,687	247,926	511,613
Net income / expenditure before gains / (losses) on investments	95,517	(23,221)	72,296
Net gains / (losses) on investments	-	-	-
Net income / expenditure	76,414	(4,118)	72,296
Transfers between funds	-	-	-
Net income / (expenditure) before other recognised gains and losses	(1,651)	(168,557)	(170,208)
Gains / (losses) on revaluation of fixed assets	-	-	-
Net movement in funds	76,414	(4,118)	72,296
Total funds brought forward	40,102	21,929	62,031
Total funds carried forward	116,516	17,811	134,327

3. INCOME FROM DONATIONS AND LEGACIES

	Unrestricted	Restricted	Total 2017	2016 Total
	£	£	£	£
Donations	4,185	-	4,185	2,796
	<u>4,185</u>	<u>-</u>	<u>4,185</u>	<u>2,796</u>

4. INCOME FROM CHARITABLE ACTIVITIES

	Unrestricted	Restricted	Total 2017	Total 2016	
	£	£	£	£	
Contract income					
Southwark Council	445,000	-	445,000	536,103	
Young Carers	-	-	-	-	
Personal Budget	-	-	-	-	
Bereavement Counselling	-	16,205	16,205	16,205	
Grant income					
The Triangle Trust	-	-	-	27,000	
NEA BESN	4,000	-	4,000	-	
Life Line Project	180	-	180	1,690	
Total income from charitable activities	<u>449,180</u>	<u>16,205</u>	<u>465,385</u>	<u>580,998</u>	

5. INCOME FROM INVESTMENTS

	Unrestricted	Restricted	Total 2017	Total 2016
	£	£	£	£
Investment Income	43	-	43	115
	<u>43</u>	<u>-</u>	<u>43</u>	<u>115</u>

6. ANALYSIS OF EXPENDITURE

	Cost of raising funds	Carer's Health Development	Counselling	Volunteering	Financial support for Carers	Enabling, Empowering & Enriching	Advice and information	Support costs	2017 Total	2015 Total
	£	£	£	£	£	£	£	£	£	£
Staff costs (Note8)	-	-	-	-	-	72,622	11,763	193,430	277,814	346,626
Counselling & Facilitating	-	-	17,673	-	-	-	-	-	17,673	16,539
Volunteers	-	-	211	7,967	-	-	854	-	9,033	4,580
Training	-	-	-	-	-	-	5,100	-	5,100	5,555
Events and Activities	-	-	-	-	-	-	16,633	-	16,633	8,474
Newsletter	-	-	-	-	-	-	-	-	-	1,439
Massage/ Relaxation Fees	-	-	45	-	-	-	-	-	45	898
Carers Assessment	-	-	-	-	903	-	-	-	903	(15,724)
Grant Aid	-	-	-	-	-	-	1,130	-	1,130	1,250
Marketing	-	3,593	-	-	-	-	-	-	3,593	28,836
Support cost										
Other staff costs	-	267	4,395	-	-	3,174	44,724	-	52,561	25,518
Rent	-	-	-	-	-	5,885	33,350	-	39,236	35,092
Utilities	-	-	-	-	-	-	-	-	-	700
Premises expenses	-	-	-	-	-	-	-	-	-	-
Computer expenses	-	-	-	-	-	324	1,834	-	2,158	1,846
Printing, postage and stationery	750	-	-	-	-	562	2,437	-	3,749	7,631
Telephone & internet	-	-	-	132	-	1,083	6,135	-	7,350	10,425
Office costs	393	-	50	91	547	295	1,277	-	2,654	8,050
Insurance	-	-	-	-	-	374	2,117	-	2,490	2,162
Bank charges	-	-	-	-	-	-	-	156	156	268
Audit fees	-	-	-	-	-	-	-	4,080	4,080	4,000
Trustees' expenses	-	-	-	-	-	-	-	85	85	248
Registration fees	-	-	-	-	-	201	1,136	-	1,337	227
Professional fees	-	-	-	-	-	1,174	6,650	-	7,824	10,508
Depreciation	-	-	-	-	-	1,329	7,533	-	8,863	6,465
	1,143	3,860	22,374	8,191	1,450	87,022	142,675	197,751	464,466	511,614
Support costs	-	-	6,886	-	-	44,002	146,863	(197,751)	-	-
Total expenditure 2017	<u>1,143</u>	<u>3,860</u>	<u>29,260</u>	<u>8,191</u>	<u>1,450</u>	<u>131,024</u>	<u>289,538</u>	-	<u>464,466</u>	<u>511,614</u>
Total expenditure 2016	<u>1,586</u>	<u>180,137</u>	<u>11,963</u>	<u>49,165</u>	<u>6,661</u>	<u>6,872</u>	<u>255,229</u>	-	<u>511,614</u>	<u>996,197</u>

Of the total expenditure, £421,642 was unrestricted (2016: £263,687) and £42,824 was restricted (2016: £247,926).

7. NET INCOMING RESOURCES FOR THE YEAR

This is stated after charging / crediting:

	2017	2016
	£	£
Depreciation	8,863	6,465
Auditors' remuneration (excluding VAT):		
Audit	<u>3,333</u>	<u>3,333</u>

8. ANALYSIS OF STAFF COSTS, TRUSTEE REMUNERATION AND EXPENSES, AND THE COST OF KEY MANAGEMENT PERSONNEL

Staff costs were as follows:

	2017	2016
	£	£
Salaries and wages	245,796	309,813
Social security costs	21,156	27,309
Employer's contribution to defined contribution pension schemes	10,862	9,504
Depreciation	<u>277,814</u>	<u>346,627</u>

One employee earned more than £60,000 during the year (2016: one).

The total employee benefits including pension and national insurance contributions of the key management personnel were £75,108 (2016: £73,803).

The charity trustees were not paid or received any other benefits from employment with the charity in the year (2016: £nil). No charity trustee received payment for professional or other services supplied to the charity (2016: £nil).

9. STAFF NUMBERS

The average number of employees (head count based on number of staff employed) during the year was as follows:

	2017	2016
	No.	No.
Raising funds	1	1
Charitable activities:		
- Carer's health development	-	7.5
- Advice and information	6.4	5.9
Support	0.6	0.6
	<u>8</u>	<u>15</u>

10. RELATED PARTY TRANSACTIONS

There are no related party transactions to disclose for 2016 (2015: none).

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

11. TAXATION

The charitable company is exempt from corporation tax as all its income is charitable and is applied for charitable purposes.

12. TANGIBLE FIXED ASSETS

	Fixture & equipment	Computer & IT equipment	Building and maintenance	Total
	£	£	£	£
Cost				
At the start of the year	86,627	34,852	28,500	149,979
Additions in year	-	11,955	-	11,955
Disposals in year	-	-	-	-
At the end of the year	86,627	46,807	28,500	161,934
Depreciation				
At the start of the year	84,282	30,950	28,500	143,733
Charge for the year	2,345	6,518	-	8,863
Eliminated on disposal	-	-	-	-
At the end of the year	86,627	37,469	28,500	152,596
Net book value				
At the end of the year	-	9,338	-	9,338
At the start of the year	<u>2,345</u>	<u>3,901</u>	<u>-</u>	<u>6,246</u>

All of the above assets are used for charitable purposes.

13. DEBTORS

	2017	2016
	£	£
Grant receivable	-	5,579
Prepayments	8,254	1,252
Other debtors	-	5,000
	<u>8,254</u>	<u>11,830</u>

14. CREDITORS: AMOUNTS FALLING DUE WITHIN ONE YEAR

	2017	2016
	£	£
Other creditors	7,733	3,332
Accruals	4,000	6,350
	<u>11,733</u>	<u>9,682</u>

15. PENSION SCHEME

The charity operates stakeholder pension scheme. The amounts owed to the pension scheme at each balance sheet date are £7,733 and the number of staff members of the scheme is 7.

16. ANALYSIS OF NET ASSETS BETWEEN FUNDS

	General unrestricted	Designated	Restricted	Total Funds
	£	£	£	£
Tangible fixed assets	9,338	-	-	9,338
Net current assets	119,128	-	11,008	130,136
Net assets at the end of the year	128,466	-	11,008	139,474

17. MOVEMENTS IN FUNDS

	At the start of the year	Incoming resources & gains	Outgoing resources & losses	Transfers	At the end of the year
	£	£	£	£	£
Restricted funds:					
Personal Budget		-	(1,450)	1,450	-
Headley Foundation	2,948	-	-	-	2,948
Triangle Trust	13,500	-	(5,440)	-	8,060
Carers' Trust	-	-	(2,751)	2,751	-
NHS Bereavement	-	16,205	(29,260)	13,055	-
Carer's Health Development	1,363	-	(3,860)	2,497	-
Total restricted funds	17,811	16,205	(42,762)	19,753	11,008
Unrestricted funds:					
Designated funds	-	-	-	-	-
Total designated funds	-	-	-	-	-
General Funds	116,516	453,408	(421,704)	(19,753)	128,466
Total unrestricted funds	116,516	453,408	(421,704)	(19,753)	128,466
Pension fund	-	-	-	-	-
Total funds	134,327	469,613	(464,466)	-	139,474

Purposes of restricted funds

All carers in Southwark will have access to the practical and emotional support they need and the recognition and influence they deserve.

"The purpose of the restricted funds are to organise the activities for carers- ""Reducing Social Isolation, Advice, Information and Support, Counselling, Health and Well Being, Identifying Hidden Carers and Financial Support "".

18. OPERATING LEASE COMMITMENTS

The charity has no future minimum lease payments under non-cancellable operating leases.

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

WITH THANKS TO:



We would like to thank all individuals and charities that have donated to Southwark Carers in this period.

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